

**“Empowering Independence: Developing a
Self-Determination Assessment Tool and
Self-Advocacy Curriculum for Enhancing Autonomy
and Wellbeing in Adults with Intellectual and
Developmental Disabilities”**



Thesis submitted to

**SHRI KHUSHAL DAS
UNIVERSITY**

(A University established by Act No. 30 of 2018 of State Legislative of Rajasthan as
State Private University under section 2(f) of UGC Act. 1956)

For the award of the Degree of
DOCTOR OF PHILOSOPHY (Ph.D.)

in
SPECIAL EDUCATION

By
Alok Kumar “Bhuwan”
Regn.No.: Ph.D./07/2022/SPLEDU/106

Under the Supervision of
Dr Satyanarain Nai
Associate Professor

**DEPARTMENT OF SPECIAL EDUCATION
SHRI KHUSHAL DAS UNIVERSITY
HANUMANGARH, RAJASTHAN
(INDIA)
2025**

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HANUMANGARH, RAJASTHAN

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Smt. Indu Devi, whose blessings guide every step

I take. With great appreciation, I humbly present this thesis as a culmination of a journey fueled by dedication, learning, and love.

 **Alok**

Title:

"Empowering Independence: Developing a Self-Determination Assessment Tool and Self-Advocacy Curriculum for Enhancing Autonomy and Wellbeing in Adults with Intellectual and Developmental Disabilities."

This study aims to develop a Self-Determination Assessment Tool and a Self-Advocacy Curriculum for individuals with intellectual and developmental disabilities. The assessment tool will provide standardised measures of self-determination levels. This curriculum will also equip individuals with adaptive strategies, such as communication skills, problem-solving techniques, and self-regulation strategies. The project has the potential to significantly enhance the work of educators, therapists, and caregivers, promoting independence, autonomy, and overall well-being among this population while contributing to the development of more effective interventions and programs.

Abstract

This research investigates the critical intersection of autonomy, self-determination, and inclusive practice for adults with intellectual and developmental disabilities (IDD) in the Indian context. Despite progressive disability legislation such as the Rights of Persons with Disabilities Act (2016), India lacks culturally appropriate assessment tools and curricula that meaningfully support self-determination. To address this gap, the study develops and validates a comprehensive Self-Determination Scale (SDS-IDD) and a structured Self-Advocacy Curriculum tailored to Indian socio-cultural conditions.

Guided by the Functional Model of Self-Determination and employing a mixed-methods research design, the study involved 100 adults with mild to moderate intellectual and developmental disabilities (IDD) across diverse urban and semi-urban settings. Quantitative analysis demonstrated strong psychometric properties of the SDS-IDD, with Cronbach's alpha reaching 0.86 and apparent construct validity established through factor analysis. The accompanying curriculum, implemented over 12 weeks, focused on communication, decision-making, goal setting, and rights awareness. Post-intervention assessments revealed statistically significant improvements in autonomy, confidence, and decision-making ability ($p < 0.01$), accompanied by notable enhancements in participants' self-perception and community engagement.

The study's findings validate the effectiveness of combining culturally attuned assessment tools with skill-based instruction to promote independence and well-being in adults with IDD. It also highlights the importance of context-sensitive design that acknowledges family roles, language diversity, and systemic constraints. The research contributes to disability policy, inclusive education, and adult services by offering scalable frameworks for assessment, training, and advocacy across similar resource-constrained settings.

Keywords: Intellectual and Developmental Disabilities (IDD), Self-Determination, Self-Advocacy, Inclusive Education, Disability Rights, Curriculum Development, Cultural Adaptation, India, Psychometric Validation

Researcher's Declaration

(i) Name of Candidate: **Alok Kumar “Bhuwan”**

Subject: **Special Education**

Registration Number: **Ph.D./07/2022/SPLEDU/106**

(ii) I hereby certify that the present research is original and was carried out by me under the supervision of **Dr. Satyanarain Nai**. During the present study, I fulfilled all the requirements associated with my Ph.D. degree.

(iii) I further declare that this thesis is free of plagiarism and has not been submitted previously for any other degree or diploma.

Date:

Alok Kumar “Bhuwan”

Certificate from the Research Supervisor

Certified that the:

(i) The thesis titled "***Empowering Independence: Developing a Self-Determination Assessment Tool and Self-Advocacy Curriculum for Enhancing Autonomy and Wellbeing in Adults with Intellectual and Developmental Disabilities***," submitted by **Alok Kumar's "Bhuwan"** is an original research project the candidate conducted under my supervision from **July 2022 to April 2025**. The literary presentation of the work is satisfactory, and the thesis is suitable for publication. This research demonstrates the candidate's ability to analyse and exercise independent judgment critically.

Additionally, I certify that the candidate has fulfilled all the requirements Shri Khushal Das University specified.

(ii) The plagiarism test revealed that the similarity index of the entire thesis is under ten per cent.

Date:

Dr Satyanarain Nai
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Table of Contents

	Page#
Acknowledgement	I
Title	III
Abstract	IV
Researcher's Declaration	V
Certificate from the Research Supervisor	VI
Table of Contents	VII
List of Tables	X
List of Figures	XII
Abbreviations	XIII
CHAPTER 1: Introduction	1
1.1 Background and Rationale	1
1.2 Statement of the Problem	15
1.3 Significance of the Research Work	19
1.4 Objectives of the Research	23
1.5 Research Hypothesis and Questions	26
1.6 Operational Definitions of Key Terms	29
1.7 Delimitations of the Study	32
1.8 Limitations of the Study	36
CHAPTER 2: Review of Literature	41
2.1 Overview	41
2.2 Legislative and Policy Frameworks	42
2.3 Theoretical Perspectives on Self-Determinaion	43
2.4 Self-Determination and Educational Outcomes	45
2.5 Teachers' Roles and Instructional Models	46
2.6 Empirical Studies on Self-Determination and Inclusive Education	47
2.7 Cultural Dimensions of Self-Determination in India	49
2.8 Community, Social Media, and Collective Advocacy	50
2.9 Comparative International Practices in Incl. Edu. and Self-Advocacy	51
2.10 Reviews of Existing Self Determinaion Assessment Tools	52
2.11 Barriers to Inclusive Education in India	53
2.12 Conceptual Framework for an Indigenous Self-Determination Tool	54

CHAPTER 3: Materials and Methods	55
3.1 Overview of Research Design	55
3.2 Tools used for the Research	55
3.3 The Self-Determination Scale for Individuals with IDD (SDS-IDD)	56
3.4 Self-Advocacy Curriculum	57
3.5 Data Collection Tools and Techniques	59
3.6 Digital and Statistical Tools	60
3.7 Expert Consultations and Cultural Validation Process	61
3.8 Participants, Sampling, and Validation Procedures	63
3.9 Unified Scale Comparison and Regional Norms for SDS-IDD	65
3.10 Indian Context Validation: SDS-IDD and the Arc's Tool	67
3.11 Scoring Methodology for SDS-IDD	69
3.12 Content Validation	71
3.13 Reliability Analysis	72
3.14 Exploratory Factor Analysis (EFA)	75
3.15 Web Application of SDS-IDD (Indian Version)	81
3.16 Curriculum Design and Implementation	83
3.17 Resources Developed	84
3.18 Dissemination of Tools and Findings	84
3.19 Summary of Methods	85
CHAPTER 4: Results and Discussion	87
4.1 Introduction	87
4.2 Psychometric Properties of the SDS-IDD	88
4.3 Descriptive Statistics and Level of Self-Determination	92
4.4 Group Differences and Correlates of Self-Determination	98
4.5 Curriculum Outcomes and Qualitative Insights	105
4.6 Participants' Developmental Profile	110
4.7 Resources, Dissemination and Policy-Relevant Outputs	113
4.8 Integrated Discussion of Findings	115

CHAPTER 5: Summary, Conclusion and Recommendations	119
5.1 Summary	119
5.2 Summary of Findings	120
5.3 Participants' Developmental Profiles	121
5.4 Conclusion	122
5.5 Recommendations	122
5.6 Limitations of the Study	123
5.7 Implementation Challenges	124
5.8 Measurement Considerations	124
5.9 Sustainability of Developmental Gains	125
5.10 Scalability Considerations	126
5.11 Final Reflection	127
Bibliography	XIV
Appendix I Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) (Indian Version)	UNIT: 1
Appendix II Self-Advocacy Curriculum: Module 1	UNIT: 2
Appendix III Module of National Workshop on Assessing Self-Determination Skill and Establishing Self-Advocacy Programmes	UNIT: 3
Appendix III : Empowering Your Child with Self-Determination: A Guide for Parents of Children with IDD	UNIT: 4

List of Tables

Table No.	Title	Page No.
Table 3.1	Summary of domain-specific expert feedback on tool and curriculum development	62
Table 3.2	Comparative analysis of existing self-determination tools and the SDS-IDD framework	65
Table 3.3	Regional distribution of normative scores for SDS-IDD participants	66
Table 3.4	Descriptive statistics for Adapted Arc Scale and SDS-IDD scores (N = 20)	67
Table 3.5	Anchor descriptions for the 5-point SDS-IDD rating scale	69
Table 3.6	Interpretation of total SDS-IDD scores	70
Table 3.7	Summary of content validity indices for SDS-IDD items	72
Table 3.8	Item–total correlations for SDS-IDD (Indian version)	73
Table 3.9	Eigenvalues and variance explained by extracted factors	76
Table 3.10	Abbreviated factor loading matrix for SDS-IDD (Promax rotation)	77
Table 3.11	System architecture of the online SDS-IDD platform	82
Table 3.12	Core modules of the self-advocacy curriculum	83
Table 4.1	Representative rotated factor loadings for SDS-IDD items (N = 100)	89
Table 4.2	Cronbach’s alpha coefficients for SDS-IDD total scale and subscales (N = 100)	90

Table No.	Title	Page No.
Table 4.3	Convergent validity: Correlation between SDS-IDD and The Arc's Self-Determination Scale	91
Table 4.4	Descriptive statistics for SDS-IDD domain and total scores (N = 100)	92
Table 4.5	Distribution of participants by self-determination level (N = 100)	93
Table 4.6	Item-level descriptive statistics (M, SD, performance level, and interpretation) for SDS-IDD (25 items)	94
Table 4.7	Paired-samples t tests for SDS-IDD domain and total scores pre- and post-intervention (n = 80)	98
Table 4.8	Mean SDS-IDD total scores by region (N = 100)	100
Table 4.9	Mean SDS-IDD total scores by gender and age group	101
Table 4.10	Mean SDS-IDD total scores by education level and employment status	102
Table 4.11	Overview of self-advocacy curriculum modules	105
Table 4.12	Pre- and post-intervention scores for curriculum skill domains (N = 100)	106
Table 4.13	Mean curriculum-related score improvements by gender and age group	107
Table 4.14	Thematic summary of participant reflections	108
Table 4.15	Developmental stages of self-determination among participants	112
Table 4.16	Overview of practical resources supporting self-determination and self-advocacy	114

List of Figures

Figure No.	Title	Page No.
Figure 3.1	Illustrative scatterplot of SDS-IDD and Adapted Arc Scale scores (N = 20)	68
Figure 3.2	Illustrative scree plot of eigenvalues for SDS-IDD factors	80
Figure 4.1	Percentage distribution of participants by self-determination level (high, moderate, low)	93
Figure 4.2	Mean autonomy, empowerment, and self-advocacy scores before and after the self-advocacy curriculum	99
Figure 4.3	Mean SDS-IDD total scores across four regions (North, South, East, West)	100
Figure 4.4	SDS-IDD total scores by gender and age group	102
Figure 4.5A	Relationship between percentage of disability and self-determination domains	103
Figure 4.5B	Mean self-determination domain scores by severity of disability	104
Figure 4.6	Pre- and post-intervention mean scores for five curriculum skill domains	106
Figure 4.7	Mean curriculum-related score improvements by age group (18–24 vs. 25–35 years)	107
Figure 4.8	Proportion of participants demonstrating real-life application of self-advocacy and decision-making skills	109

Abbreviations

Abbreviation	Full Form
AAIDD	American Association on Intellectual and Developmental Disabilities
AIR	American Institutes for Research
ASD	Autism Spectrum Disorder
DD	Developmental Disabilities
EFA	Exploratory Factor Analysis
I-CVI	Item Content Validity Index
ID	Intellectual Disability
IDD	Intellectual and Developmental Disabilities
IE	Inclusive Education
IEP	Individualised Education Plan
IQ	Intelligence Quotient
M&E	Monitoring and Evaluation
NEP	National Education Policy
NDIS	National Disability Insurance Scheme (Australia)
RPD Act/RPWD Act	Rights of Persons with Disabilities Act (2016), India
S-CVI/Ave	Scale-level Content Validity Index (Average)
SLD	Specific Learning Disabilities
SDS	Self-Determination Scale
SDS-IDD	Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities
SDI: SR	Self-Determination Inventory: Student Report
SPSS	Statistical Package for the Social Sciences
UDL	Universal Design for Learning

Chapter 1: Introduction

1.1 Background and Rationale

Self-determination is a foundational element of human development. It refers to the ability to make independent choices, set personal goals, and take the initiative to pursue them. For individuals with intellectual and developmental disabilities (IDD), the capacity for self-determination plays a pivotal role in ensuring agency, dignity, and participation in educational, vocational, and community settings. Self-determination is increasingly recognised not only as a desirable educational outcome but also as a fundamental human right.

Few assessment tools exist internationally—notably, The Arc’s Self-Determination Scale and the AIR Self-Determination Scale—and have limited applicability in non-Western, collectivist societies, such as India. These tools, designed and standardised in culturally distinct contexts, often overlook localised social dynamics, linguistic variations, and infrastructural constraints. In India, family members frequently serve as decision-makers for individuals with IDD, and the influence of regional, linguistic, and socio-economic diversity further complicates the direct adoption of foreign instruments.

To address this gap, the present research develops and validates a culturally sensitive assessment tool: the “*Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD)*”. Tailored to the Indian context¹, the SDS-IDD evaluates domains such as autonomy, empowerment, and self-advocacy using language, scenarios, and normative frameworks relevant to individuals with intellectual and developmental disabilities (IDD) in India.

1.1.1 Understanding Intellectual and Developmental Disabilities (IDD)

Intellectual and Developmental Disabilities (IDD) is an umbrella term used to describe various chronic conditions that begin during the developmental stages of human life, usually before the age of 22, and persist throughout the person’s life. These disorders are

¹<https://www.ijmsrt.com/articles/view/development-and-validation-of-a-culturally-relevant-self-determination-scale-for-adults-with-intellectual-and-developmental-disabilities-in-india>

characterised by significant limitations in intellectual functioning (i.e., reasoning, learning, and problem-solving) and adaptive behaviour, encompassing a range of everyday social and practical skills. Due to being lifelong, individuals living with IDD often require follow-along supports and services across several life domains, including education, employment, health care, and community living (Schalock et al., 2010).

This paper argues that disability researchers must pay more attention to disability research to challenge the frames of disability and disability accommodation that are often taken. Therefore, understanding IDD is both a clinical endeavour involving definitions and assessment tools, and a human rights-based endeavour that considers varied patient information along the lines of strengths, needs, and aspirations. In this chapter, the text provides detailed discussions of the definitions, classifications, prevalence, etiologies, and implications of IDD, serving as the basis for later discussions on self-determination and self-advocacy interventions.

Intellectual Disabilities

Intellectual Disability (ID) is defined by the American Association on Intellectual and Developmental Disabilities (AAIDD) as "a disability characterised by significant limitations in both intellectual functioning and adaptive behaviour, which compasses many everyday social and practical skills." This condition originates before age 18 and is identified through standardised assessments that measure intellectual functioning (IQ) and adaptive behaviours.

Developmental Disabilities

Developmental Disabilities (DD) are physical, learning, language, or behaviour impairments. They begin during the developmental period, may impact day-to-day functioning, and usually last throughout a person's lifetime. Examples include autism spectrum disorders, cerebral palsy, and Down syndrome.

Intersection of ID and DD

While ID and DD are distinct, they often overlap in practice. Many individuals with developmental disabilities also have intellectual impairments, leading to the combined term IDD. This intersection necessitates comprehensive approaches in assessment and intervention strategies² to address the multifaceted needs of individuals with IDD.

Yardsticks and Yardsticks Definitions

Intellectual disability (ID) and developmental disabilities (DD) are often captured under the umbrella acronym “IDD,” although they are separate and potentially overlapping conditions. Intellectual Disability is defined as significant limitations in both intellectual functioning and adaptive behaviour that originate before the age of 22, according to the American Association on Intellectual and Developmental Disabilities (AAIDD, 2021). According to the Centres for Disease Control and Prevention (CDC), developmental disabilities are an umbrella term for conditions resulting from physical, learning, language, or behavioural impairments that are significant during the developmental period (CDC, 2020).

IDD encompasses several conditions, including Down syndrome, Fragile X syndrome, Autism Spectrum Disorder (ASD), and cerebral palsy. Such conditions can range from mildly to severely debilitating, and to what extent these conditions affect the daily lives of individuals. The classification of IDD is therefore not just a clinical exercise but also has real-world implications for service provision, educational planning, and eligibility for support programs (Tasse et al., 2016).

Features and Symptoms

A) The core characteristics of IDD are deficits in intellectual functioning (often assessed using standardised intelligence quotient (IQ) tests) and adaptive functioning, which involves how healthy individuals meet the standards of personal independence and social responsibility that are expected of someone in their sociocultural background and community setting (APA, 2013).

² Dyspraxia and Autism | Autism Therapy Services. <https://www.hiddengemsaba.com/articles/dyspraxia-and-auism>

Cognitive impairments can impact the ability to learn new information, store memories, communicate effectively, and make informed decisions. Challenges associated with adaptive behaviour may include difficulties with communication, social interaction, self-care, safety awareness, and work skills. These limitations are not uniform across individuals and are often compounded by environmental barriers, including stigma, lack of accommodations, and limited access to inclusive education and work opportunities. It is crucial to develop a comprehensive concept of IDD that encompasses an individual's capabilities and the dynamic interaction between the person and their environment. This view is consistent with the social model of disability, which conceptualises disability as socially constructed, the product of external societal structures and attitudes rather than a purely individual impairment.

Prevalence and Epidemiology

It is estimated that around 1–3% of the population has an intellectual disability worldwide (World Health Organisation, 2011). The proportion of people with developmental disabilities is even higher, especially if milder forms of autism, learning disabilities and attention deficit disorders are included, as new diagnostic practices have emerged with an awakened public consciousness, which has increased the number of children with developmental disabilities (Zablotsky et al., 2017).

The prevalence of IDD varies significantly across different regions, by the socioeconomic status of the population and its access to healthcare services and early childhood services, as well as cultural views of disability. In addition, the prevalence of mental retardation is higher in the low- and middle-income countries than in the developed countries because of increased exposures to risk factors—including malnutrition, inadequate prenatal care, and lack of early intervention services (Durkin et al., 2007). Local diagnostic practices, educational institutions and social welfare policies influence the identification and classification of IDD, potentially masking or magnifying the acknowledgement of these disabilities.

These trends underscore the urgent need for the development of equitable, culturally sensitive, and community-based modalities to support the significant number of individuals with IDD. Such measures are crucial for ensuring fair and practical support

for all individuals with IDD, regardless of their cultural or socioeconomic background. Achieving this level of transparency requires robust data collection and epidemiological surveillance to inform policy, allocate resources, and assess the impact of interventions.

Aetiology and Risk Factors

The aetiology of IDD is complex and multifactorial, involving a wide range of genetic, biological, environmental, and socioeconomic factors. Genetic disorders such as Down syndrome and Fragile X syndrome are responsible for a significant proportion of IDD cases. These chromosomal abnormalities can lead to cognitive impairments and other physical or behavioural symptoms due to disruptions in neural development (Ropers, 2008).

Maternal alcohol use, drug abuse, infections (e.g., Zika virus, rubella), and exposure to environmental toxins (e.g., lead) are all examples of prenatal exposures that can cause significant disturbances in fetal brain development. Development delays are also known to develop due to specific perinatal factors, such as birth asphyxia, preterm birth and low birth weight, as these perinatal factors are also known contributors as well. Postnatal trauma, traumatic brain injury, infections like meningitis, and chronic malnutrition may compound the risk for development.

Socioeconomic status is a significant factor in the prevalence and severity of IDD. Children born into poverty are more likely to be exposed to a range of risk factors, such as limited access to healthcare, poor nutrition, and unsafe living conditions. Intervening early at these social determinants and employing public health strategies is of utmost importance to break the cycle of poverty and mitigate the burden of IDD.

Diagnosis and Assessment

A complete diagnosis of IDD usually requires multi-professional evaluations to evaluate mental functioning, adaptive habits, communications and developmental history.

Commonly used standardised instruments, including but not limited to the Wechsler Intelligence Scale for Children (WISC), Stanford-Binet Intelligence Scales, and the Vineland Adaptive Behaviour Scales, are utilised to assess the degree of impairment in intellectual and functional abilities.

However, one of the significant issues currently under consideration in assessment is maintaining cultural fairness and minimising linguistic or socioeconomic bias. Testing must be conducted within the context of the person's background and knowledge of their lived experience. Moreover, assessment should go beyond identifying what an individual cannot do and focus on strengths and supportive needs to inform individualised planning (Luckasson et al., 2002).

As the field continues to push toward more person-centred planning, individuals with IDD and their families must be involved in the diagnostic process and goal setting. This participatory orientation makes services more relevant and practical, supporting the empowerment and involvement of those who will benefit from them.

Effect on People and Community

IDD has a profound impact on both individual and social outcomes. IDD can impact access to quality education, employment and independent living at the personal level. Individuals with IDD often face social and structural barriers within their communities, such as stigma, discrimination, and underestimation of their abilities.[citation needed] Research shows that individuals with ID have a higher than average risk of poor mental health, social isolation and lower than average quality of life (Emerson & Hatton, 2008). Many of the educational systems in many parts of the world are not entirely inclusive, isolating students with IDD in special education classes that may not offer the same academic or social opportunities as mainstream education.

From a broader societal perspective, this involves a significant investment in healthcare, education, housing, and social welfare for people with IDD. Yet, the evidence shows that community-based services are moderately effective and yield better outcomes than those provided in institutions (9). In addition, enabling people with IDD to participate in their communities can yield broader social benefits, including increased diversity, creativity, and social inclusion.

International instruments, such as the UN Convention on the Rights of Persons with Disabilities (UNCRPD), require the protection of the rights of persons with disabilities, including equal recognition before the law, participation in political and public life, and access to education and employment.

1.1.2 The Self-Determination and Self-Advocacy

Self-determination, or the ability to make decisions and guide one's own life, is a key human right and fundamental to the empowerment of people with intellectual and developmental disabilities (IDD). Research indicates that self-determination is associated with higher life satisfaction, increased employment rates, improved educational outcomes, and greater community engagement (Wehmeyer & Schalock, 2001).

However, people with IDD frequently have few opportunities for autonomy.

Overprotective caregiving, systemic roadblocks in decision-making processes, or policies that prioritise dependence over empowerment may also contribute to this restriction.

Thus, developing tools that measure self-determination skills is indispensable for identifying where individuals may benefit from targeted support and capacity-building.

Self-advocacy, the ability to speak up for one's rights, make informed decisions, and have a say in one's life, is closely related to self-determination. Individuals with IDD can benefit from programs that teach communication, assertiveness, and goal-setting skills, empowering them to express themselves effectively. Review studies have shown that experiences grounded in peer-led service delivery models are most effective, enabling individuals with disabilities to serve as peer leaders in their communities (Test et al., 2005).

Educators, clinicians, and policymakers provide the conditions for self-determination and advocacy to flourish. This involves providing accessible information, including them in planning their support, and honouring their choices, even when they conflict with those made by caregivers or professionals. Promoting these capacities is an ethical practice that supports well-being and civic participation.

The medical aspects of IDD are essential to a comprehensive understanding of the condition. Still, the psychological, educational, and sociopolitical understandings of IDD that come alongside them are also necessary for their integration. IDD is not just a clinical diagnosis — it is an experience that is lived within the context of culture and systemic influences. Over the past few decades, the recognition of rights within the global disability community and person-centred planning approaches have transformed our thinking about how we develop systems and supports for individuals with IDD, shifting our focus from deficits to systems that empower them holistically.

This chapter provides a basic overview of IDD within the broader research context of this dissertation, *Empowering Independence: Developing a Self-Determination Assessment Tool and Self-Advocacy Curriculum*. It defines the various forms, causes, consequences, and social dimensions of these disabilities, while providing compelling arguments for greater attention to autonomy, dignity, and participation.

As we proceed, we are becoming increasingly responsible for investigating how assessment tools can help us capture self-determination competencies and how curricula related to self-determination skills can be framed to facilitate meaningful self-advocacy. Only with this two-pronged model can we be certain that adults with IDD are not only supported but also have the agency to lead independent, productive lives.

The Notion of Self-Determination

Self-determination is a core concept in psychology, education, and disability studies, especially regarding people with intellectual and developmental disabilities (IDD). It describes the power and ability of people to make their own choices and control their own lives. You are a fact or factual question for this piece of writing, *Fulfilling Potential: From People with IDD to Adults with IDD — To strengthen independent lives, rights and quality of life*. Studies show that individuals with higher self-determination report better life outcomes, including greater community engagement and improved mental health.

Self-determination—the agency of making decisions without coercion, affecting oneself. It means being the ultimate cause of the events in your life, choosing and deciding how to live your best life without the influence or interference of others. This scaled approach is particularly relevant for people with IDD, who have long been the recipients of paternalistic care models that limit their independence.

According to the Self-Determination Theory (SDT), proposed by Deci and Ryan, self-determination is the result of satisfying three basic psychological needs: autonomy, competence, and relatedness. Autonomy is a feeling of choice and willingness while acting; competence is a feeling of effectiveness and mastery; and relatedness is a feeling of belongingness and connectiveness with others. People tend to demonstrate self-determined behaviours that benefit motivation and well-being when these needs are met.

Theoretical Frameworks

Many theoretical models have been posited to understand and encourage self-determination for individuals with IDD. One of the most famous models in the self-determination theory is the Functional Model of Self-Determination, which states that personal autonomy, self-regulation, psychological empowerment, and self-realisation will lead to self-determined behaviour. This model argues that people are activated through these skills and attitudes to act as causal agents in their lives, thereby liberating them through the development of competencies.

Causal Agency Theory (CAT) is another critical perspective that accepts the Functional Model but goes further by emphasising the temporal process in the emergence of self-determination. According to this theory, people with IDD can engage in the act of being causal agents in their own lives by being taught how to make choices, set goals, and act on their desires and preferences. We must have supportive environments and experiences for the development of these skills, as this is a key focus of the theory.³

Adult self-determination is crucial for people with IDD.

In thought, it will be essential to promote self-determination among the adults with IDD, which is one positive approach to this issue. Studies have shown that more self-determined individuals are more likely to achieve greater independence, secure employment, integrate into their communities, and experience a higher quality of life. For example, individuals with higher self-determination are more likely to live independently, hold a job, and participate in social relationships than those with lower self-determination.

Moreover, self-determination is associated with improved mental health. Those who regulate themselves and see themselves as autonomous and capable feel less depression and anxiety. They also tend to report higher levels of life satisfaction and overall well-being. These findings highlight the need to promote self-determination as a means of improving mental health and quality of life in adults with IDD.

³ Wikipedia.more self-determined individuals

Promoting Self-Determination:

So, how do we develop strategies that enable adults with IDD to self-determine their own lives? Key strategies include:

- A. **Creating individualised plans** that reflect the person's preferences, strengths, and goals.
- B. **For ages 10+, Skill Development:** Decision-making, Problem-solving, Goal setting, Self-advocacy
- C. **Supportive Environments:** Developing environments that allow for and encourage opportunities for choice-making and promote autonomy.
- D. **Training for Family and Staff:** Educating families and support staff on the importance of self-determination and how to achieve it.
- E. **Move to systemic and policy changes** — promoting policies that enhance individuals with IDDS and the right to choice and self-direction.
- F. **Collaborative efforts between individuals with IDD,** their families, support staff, and policymakers are needed to implement these strategies. It is to build and create systems and environments that foster and reinforce self-determination.

Challenges and Considerations

Encouraging self-determination in this field is essential, but it comes with a few challenges that must be addressed. These include:

- A. **Risk Aversion:** Families and support staff may not permit individuals with intellectual and developmental disabilities (IDD) to make decisions due to safety and risk concerns.
- B. **Few Options:** The rights of people with IDD may be restricted, particularly in institutional settings, where they have fewer options and less autonomy.
- C. **Systemic Barriers:** Policies and practices can inadvertently restrict self-determination by prioritising compliance and control over autonomy.

- D. **Resources (training):** Support staff may lack the necessary training and resources to actively promote self-determination.

The Role of Self-Advocacy

The ability to advocate for oneself, or self-advocacy, as understood by Rosen et al. (2009), is a crucial tool that combines the skills to communicate what an individual needs with the ability to make choices regarding the support they require to realise their full potential. By empowering people with the knowledge to navigate complex social systems, access essential resources, and assert their rights, Self-Advocacy is not only an act of self-empowerment but also an act that affects how society views them, and, further, **Self-Advocacy is Key to Self-Determination.**

Autonomy, the ability to make informed and voluntary decisions, is a fundamental human right. For individuals with IDD, self-advocacy plays a crucial role in achieving independence. It enables active involvement in decisions that affect their lives, from daily routines to long-term planning. The American Association on Intellectual and Developmental Disabilities (AAIDD) emphasises that self-advocates should have a significant role in decision-making across all aspects of their lives and in public policy decisions affecting people with IDD. Self-advocacy is a key tool in promoting self-determination.

Advocating for oneself also resonates with the underlying tenets of the United Nations Convention on the Rights of Persons with Disabilities (CRPD), which values individual autonomy and the right to make independent choices. Self-advocacy is a powerful tool that enables individuals with IDD to claim their rights and challenge traditions and norms that may otherwise exclude them from society.

Self-Awareness and Self-Esteem

Knowing what one is good at, what one is not, and what one likes, based on self-advocacy. When individuals with IDD develop self-awareness, they can identify their unique attributes and, consequently, learn to express their wants and needs with confidence. This realisation is essential to building healthy self-esteem and a positive self-image.

Self-advocacy is impossible without effective communication. Most simply, people with IDD should work to express their wants, needs, and concerns loudly and confidently. Access to communication can take various forms, including spoken language, sign language, assistive devices, and alternative communication methods. Learning to be assertive enables individuals to express their needs, wants, and feelings without compromising the rights of others.

Access to Support and Resources

Advocating for oneself does not mean going through life alone. Reaching out for help and utilising existing resources are essential parts of this process. Being adequately aware of the support systems and services available to individuals with IDD enables them to make informed decisions and advocate effectively for their needs. Resources and training to support self-advocacy efforts, such as the Self Advocacy Resource and Technical Assistance Centre (SARTAC)⁴, which provides resources and training to and for people with disabilities.

Transitioning Between Multiple Social Systems

People with IDD often navigate complex social systems, including healthcare, education, and employment systems. By practising self-advocacy skills, they are better positioned to ensure their voices are heard and their rights are upheld.

Education

Self-advocacy helps students with IDD participate in Individualised Education Program (IEP) meetings by sharing their preferred learning styles and the accommodations they

⁴ <https://selfadvocacyinfo.org/>

need in educational settings. This involvement instils a sense of ownership over educational experiences, thereby enhancing performance.

Employment

At work, self-advocacy empowers individuals to communicate their needs to employers, request reasonable accommodations, and assert their rights under employment laws. This empowerment enhances job satisfaction, performance, and career advancement.

Organisations such as The Arc highlight the need for employment opportunities and services to help people with IDD live the life they choose.⁵

Healthcare

In healthcare situations, people with IDD need to make decisions regarding treatments, medications and care plans. This will enable healthcare providers to involve patients in understanding their concerns and preferences and collaborate on decision-making to deliver better care. Resources, such as the IDD Health Care Toolkit, can assist individuals with IDDS and their families in navigating health care systems.⁶

The Bigger Picture of Speaking Up for Yourself

In addition to empowering individuals, self-advocacy has a broader societal impact. It questions stereotypes and misconceptions about individuals with IDD, along with advocating for a more inclusive and equitable society. Public speaking, policy advocacy, and community organising are tools utilised by self-advocates to shape public perceptions and drive systemic change.

Groups such as the Self Advocates Becoming Empowered (SABE) and the Autistic Self Advocacy Network (ASAN) exemplify the power of self-advocacy when individuals come together across various platforms. These disability-run organisations advocate for the rights and priorities of their communities — a powerful example of how self-advocacy can bring about significant change.

⁵ The Arc of NC

⁶ Autistic Self Advocacy Network self-advocates use

For people with IDD, self-advocacy is an essential part of self-determination. It helps them communicate their needs, understand their rights and responsibilities, benefits, and choices, and advocate for themselves, encouraging autonomy and independence. These skills enable individuals to navigate complex social systems and access the resources necessary for success. Furthermore, self-advocacy garners wider societal power, breaking down stereotypes and empowering others to do the same. Therefore, promoting self-advocacy for people with IDD is crucial not only for individual empowerment but also to build a more inclusive society.

1.2 Statement of the Problem

Over the last few decades, India has made significant legislative and policy progress regarding the rights and inclusion of persons with disabilities. More specifically, the legislative framework, marked by the enactment of the Rights of Persons with Disabilities (RPwD) Act in 2016 and the National Education Policy (NEP) in 2020, has initiated a transition towards an equitable and inclusive nation for persons with disabilities. However, a significant void remains concerning the availability of standardised, culturally appropriate measures that assess self-determination in adults with IDD in India. *This lack impedes the proper implementation of policies and the development of concrete measures to increase autonomy and promote well-being within this group.*

Paradigm Shift in Disability Rights

With the RPwD Act of 2016, India underwent a significant shift in its approach to disability rights. This act expanded the definition of disability and strongly emphasised non-discrimination, equality, and full participation in society. It provides for the rights of persons with disabilities to inclusive education, skill development, and employment, thus enabling them to lead self-reliant and dignified lives.

Moreover, the NEP 2020 envisages building an inclusive education system that caters to the diverse needs of learners, including those with disabilities. It aims to include children with disabilities in regular teaching and emphasises the need for early identification and intervention to facilitate learning and development.

Although these policies form an overall cohesive structure to secure the rights and inclusion of persons with disabilities, their meaningful implementation requires culturally and linguistically appropriate tools and strategies that resonate with the Indian population.

The Idea of Self-Determination

Self-determination refers to an individual's ability to make informed decisions about their life. It encompasses autonomy, self-regulation, psychological empowerment, and self-

realisation. Empowering self-determination is critically essential for improving the quality of life and promoting independence and meaningful integration into the community for adults with IDD.

Studies show that self-determined individuals fare better in life, experiencing more employment, community inclusion, and personal fulfilment. As such, both assessment and facilitation of self-determination for adults with IDD are essential aspects of person-centred planning and support services.

Current Assessment Limitations

While self-determination has been deemed crucial, there is a shortage of standardised assessment tools tailored to the Indian context. Since many existing instruments were developed in Western countries, the nuances of Indian culture and lived experiences are not always captured for Indian adults with IDD. With the introduction of these tools, challenges related to language complexity and cultural relevance in specific processes, as well as the lack of conceptual and contextual compatibility, pose barriers to their use in the Indian context.

Moreover, several existing assessments rely predominantly on self-report measures, which may not be appropriate for participants with communication difficulties or limited cognitive abilities. Hence, owing to their nature, such instruments, being available for IDS, pose threatening gaps despite limiting our options for the same, leading to an urgent need for alternative assessment methods based on observations, caregivers' perceptions, and culturally appropriate methodologies to assess the construct of self-determination among adults with IDD in India.

The need for a culturally relevant assessment tool

There are several compelling reasons for developing a culturally pertinent self-determination assessment tool for Indian adults with IDD:

- A. **Policy implementation:** Accurate assessment data are necessary to guide policy decisions and resource allocation, as well as to evaluate the effectiveness of programs that promote autonomy and inclusion.

- B. **Tailored Support:** By understanding the self-determination skills of each person, caregivers and professionals can create individualised plans that encourage each person according to their strengths, interests, and personal aspirations.
- C. **Advocacy and Empowerment:** Evaluating self-determination can reveal areas where individuals may need assistance in advocating for themselves, making informed decisions, and asserting their rights.
- D. **Research and Development:** A standardised assessment tool can help perform research to understand what factors promote self-determination among Indian adults with IDD and what evidence-based approaches can enhance autonomy and quality of life.

Role of Self-Advocacy Curriculum

Along with assessment, there is a significant need for educational programs that can equip adults with IDD with the necessary tools and classes to self-advocate. A culturally adapted self-advocacy curriculum can help individuals learn to articulate their needs, make informed decisions, and effectively advocate for themselves within their communities.

This is what a curriculum like that would look like and cover an overview of some major areas:

- A. **Communication Skills:** Communicating preferences, needs and concerns.
- B. **Decision-Making:** What to do and how to weigh your options
- C. **Know Your Rights:** Empowering people with information on their legal rights and how to assert them.
- D. **Goal Setting:** Supporting individuals in identifying their objectives and the actions necessary for accomplishment.

An educational curriculum is most likely what someone would expect when thinking about a program to promote self-determination, so ensuring that the self-advocacy curriculum [is] implemented alongside is one component of the program but setting up a culturally relevant assessment tool that can give data on the individual basis basis on self-

advocacy and self-determination and then tie that in back to cultural relevance and individualised goals that are tied to culture would be a pivotal mechanism for tracking [progress] within the self-advocacy curriculum.

Culturally Appropriate Tool

Based on the gaps and necessities identified, this research seeks to:

Create a Culturally Appropriate Tool for Assessing Self-determination: Adapt a standardised measure of self-determination for Indian adults with IDD.

Implement the Self-Advocacy Curriculum: Conduct a self-advocacy program for adults with intellectual and developmental disabilities (IDD) in an Indian setting.

The study will have two primary focuses:

- (1) evaluation of the effectiveness of the self-advocacy curriculum in promoting participants' autonomy and well-being, and
- (2) an assessment of the reliability and validity of the assessment tool.

Through twisted packet schools, self-determination not only distributed control, power, and influence, but also brought everyone to the same ground.

In India, even though progressive policies promote the rights and inclusion of people with disabilities, the non-availability of proper assessment tools and educational programs on self-determination remains a barrier. Filling this gap between narrative and empirical evidence will empower adults with IDD to live independently, productive lives. This research seeks to address this by developing and evaluating an abusive self-determination assessment tool and self-advocacy curriculum that provides Indian adults with IDD with the tools they need to increase their autonomy and well-being.

1.3 Significance of the Research Work

The capacity to make decisions, express preferences, and advocate for oneself is an intrinsic aspect of human dignity. For adults with Intellectual and Developmental Disabilities (IDD), capabilities are not merely indicators of autonomy but foundational to quality of life, inclusion, and meaningful community participation. In contemporary disability discourse, the intersection of self-determination and self-advocacy represents a shift from dependency models to strength-based, person-centred practices. This research contributes to the paradigm shift by designing and validating a culturally relevant self-determination assessment tool and a structured self-advocacy curriculum specifically tailored to adults with intellectual and developmental disabilities (IDD).

Addressing Critical Gaps in Assessment and Intervention

Despite international progress in inclusive education and disability rights, India lacks contextually relevant tools to assess and support self-determination. Existing scales, such as The Arc's⁷ Self-Determination Scale or AIR Self-Determination Scale, are rooted in Western socio-cultural paradigms and exhibit limitations in linguistic adaptability, conceptual alignment, and accessibility for Indian populations. Moreover, intervention frameworks for adult populations, especially those beyond the formal schooling age, are scarce.

This study responds to these deficits by developing two interlinked resources:

- A. **A Self-Determination Assessment Scale** contextualised for Indian adults with IDD.
- B. **A Self-Advocacy Curriculum** that promotes practical skill-building in real-life contexts—employment, relationships, and community navigation.

These tools not only fill the empirical void in assessment and programming for Indian adults with IDD but also serve as a model for other resource-constrained or culturally diverse contexts.

⁷ <https://thearc.org/welcome/>

Enhancing Inclusion through Evidence-Based Practice

This study holds critical significance in advancing inclusive practices and strengthening the support systems available to adults with Intellectual and Developmental Disabilities (IDD). In the Indian context, where structured tools for promoting autonomy, decision-making, and self-advocacy remain limited, the development of a Self-Determination Assessment Scale and a Self-Advocacy Curriculum addresses a substantial gap in both research and practice. The study contributes to the field by offering a culturally responsive, theoretically grounded framework that aligns with national mandates, such as the Rights of Persons with Disabilities (RPwD) Act, 2016, and the National Education Policy (NEP) 2020.

The potential impact of this research extends across educational, rehabilitative, and policy domains. The proposed tools can guide practitioners in designing individualised and evidence-based interventions that foster autonomy, enhance communication, and support adults with IDD in making informed choices. These tools may also strengthen transition planning processes by providing structured pathways for learners moving from school to higher education, vocational programmes, or independent living arrangements. Such interventions are essential for supporting lifelong learning and ensuring meaningful participation in community life.

From a policy perspective, the study offers a foundation for establishing standardised guidelines and training frameworks for professionals working in disability services. It underscores the need for systematic approaches to the development of self-determination skills, contributing to national-level discourse on inclusive education, supported decision-making, and adult rehabilitation services. The research also highlights the importance of empowering individuals with IDD through person-centred practices, thereby promoting dignity, independence, and social inclusion.

Overall, the significance of this study lies in its potential to inform future research, guide professional practices, and influence policy reforms. By focusing on self-determination as a core component of inclusion, the study advances the vision of an equitable society where adults with IDD can exercise autonomy, participate fully, and lead self-directed lives.

Advancing a Rights-Based Approach to Disability

This study is grounded in the principles of the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD)⁸ and the Rights of Persons with Disabilities Act (2016)⁹, which emphasise autonomy, independent living, and self-representation as fundamental rights. By equipping adults with IDD with the tools to better understand and communicate their choices, this research advances these rights in practical terms.

Furthermore, by integrating self-advocacy training into lifelong learning structures, this study expands the scope of inclusive education to include adult learners—an area often overlooked in research and practice.

Educational and Policy Implications

The significance of this work extends to:

- A. **Curriculum developers** who can integrate findings into special education programs and vocational training.
- B. **Educators and therapists** can now access structured modules that reinforce real-life decision-making skills.
- C. **Policy planners** who can rely on empirical data to design services, funding schemes, and inclusive employment policies that prioritise autonomy and wellbeing.

The tools developed are adaptable for integration into governmental schemes such as the Deendayal Disabled Rehabilitation Scheme (DDRS) and programs under the National Trust Act, thereby contributing to systems-level change.

Contribution to the Disability Sector and Research Work

This study represents a foundational contribution to the emerging body of Indian research on disability, autonomy, and inclusive practice. It is one of the first efforts to

⁸ <https://social.desa.un.org/issues/disability/crpd/convention-on-the-rights-of-persons-with-disabilities-crpd>

⁹ https://www.indiacode.nic.in/bitstream/123456789/15939/1/the_rights_of_persons_with_disabilities_act%2C_2016.pdf

systematically create and validate a self-determination scale for Indian adults with IDD, coupled with a tailored curriculum.

By offering a scalable model for assessment and training, this work invites future studies to:

- A. Explore longitudinal impacts of self-advocacy training.
- B. Adapt the curriculum for other neurodiverse populations.
- C. Evaluate community-based implementation across urban and rural settings.

In a society where individuals with IDD often face lifelong dependence and marginalisation, this research provides a roadmap toward empowerment. It transforms the abstract notion of independence into tangible skills and measurable growth. This work's significance lies not only in the tools it creates but also in the broader vision it supports: a world in which all individuals, regardless of cognitive ability, are recognised as capable, autonomous agents of their own lives.

1.4 Objectives of the Research

The lived experiences of adults with intellectual and developmental disabilities (IDD) are frequently shaped by restricted autonomy, limited participation in decision-making, and systemic barriers to self-advocacy. Despite progress in disability rights discourse, a noticeable gap persists in the availability of structured tools and curricula designed to foster self-determination and promote personal agency in adults with IDD. The present research addresses this gap by developing a comprehensive assessment tool and a corresponding instructional curriculum, both embedded within a rights-based and person-centred framework. These tools aim to enhance autonomy, social inclusion, and overall well-being, while informing the development of inclusive education and policy.

1. To Develop a Comprehensive Self-Determination Assessment Tool

The study aims to create a contextually relevant, psychometrically sound tool to measure self-determination in adults with IDD. Unlike generic scales, this assessment accommodates varying communication, cognition, and support needs. The tool has been carefully designed and developed to reflect the realities of the Indian sociocultural environment, incorporating structured domains such as decision-making, goal setting, problem-solving, and personal agency.

2. To Design an Adaptable Self-Advocacy Curriculum

The research aims to develop a modular, skill-based curriculum that enhances self-advocacy among adults with intellectual and developmental disabilities (IDD). The curriculum includes instructional units on assertive communication, decision-making, problem-solving, understanding rights, and managing personal goals. It is intentionally flexible to ensure applicability across a range of cognitive and communicative abilities.

3. To Enhance Autonomy and Self-Determination

A core objective of the research study is to empower adults with IDD to exercise significant control over their personal and social environments. The research aims to achieve the broader goal of fostering independent living and personal agency

by equipping individuals with the knowledge and tools necessary to make informed choices, set personal goals, and navigate daily challenges.

4. To Promote Well-Being and Quality of Life (QOL)

This research aims to enhance the quality of life for adults with intellectual and developmental disabilities (IDD) by promoting their psychosocial well-being. The assessment tool and curriculum are designed to align with personal aspirations, daily functioning and inclusive living, which are closely linked to life satisfaction.

5. To Validate the Assessment Tool

An essential technical objective is to ensure the reliability and construct validity of the SDS-IDD scale. This involves a series of psychometric evaluations, including factor analysis, test-retest reliability, and convergent validity comparisons with internationally recognised tools such as The Arc's Self-Determination Scale.

6. To Evaluate the Impact of the Self-Advocacy Curriculum

The study uses a mixed-methods approach to evaluate the curriculum's effectiveness, incorporating pre- and post-assessments, qualitative interviews, and observational data. Its goal is to establish the curriculum's utility in enhancing independence and life skills across varying functional levels.

7. To Provide Practical Implementation Resources

This research recognises the urgent need for accessible teaching and assessment tools. It includes the development of manuals, guides, and resource kits for educators, caregivers, and program facilitators. These tools support the widespread and effective implementation of these tools across institutional, community, and home-based settings.

8. To Contribute to Inclusive Education and Policy Development

By generating evidence-based recommendations, the study aims to influence policy-level discourse on inclusion, autonomy, and adult services. The research advocates for systemic reforms that acknowledge the right of adults with IDD to participate fully in education, employment, and community life.

9. To Disseminate Research Findings to Multiple Stakeholders

A key dissemination objective is to share findings, tools, and resources with academic institutions, policymakers, disability advocacy organisations, and community-based programs. The goal is to facilitate dialogue, adoption, and scaling up of effective self-determination practices.

1.5 Research Hypotheses and Questions

The present study is grounded in the theoretical proposition that structured interventions—specifically, a self-advocacy curriculum and an individualised self-determination assessment—have the potential to enhance autonomy, decision-making capacity, and overall well-being among adults with intellectual and developmental disabilities (IDD). This inquiry seeks to formally examine whether systematic instruction in self-advocacy, supported by a validated assessment framework, contributes to the development of self-determination as conceptualised in contemporary disability research and policy.

Research Hypotheses

To operationalise this inquiry, the study adopts the following hypotheses:

Null Hypothesis (H₀).

There will be no statistically significant improvement in self-determination, autonomy, or overall well-being among adults with IDD following participation in the self-advocacy curriculum and engagement with the self-determination assessment tool.

Alternative Hypothesis (H₁).

Participation in the self-advocacy curriculum and use of the self-determination assessment tool will result in a statistically significant improvement in self-determination, autonomy, and overall well-being among adults with IDD.

These hypotheses provide the basis for the study's evaluative framework and guide the quantitative analysis conducted through pre- and post-intervention measurement procedures.

Research Questions

The research questions of this study are multifaceted and align with the phases of design, implementation, evaluation, and ethical deployment of the assessment tool and curriculum.

1. Assessment Tool Development

What are the key domains of self-determination most relevant to adults with IDD in the Indian context?

How can the assessment tool be adapted for varying communication modes and cognitive profiles?

What are the psychometric properties of the newly developed tool (e.g., reliability, validity)?

2. Curriculum Design and Implementation

What essential content areas must a self-advocacy curriculum cover to meet the unique learning needs of adults with IDD?

How can instructional strategies be modified to ensure accessibility and engagement across support levels?

What pedagogical methods (e.g., modelling, role-play, visual aids) prove most effective in real-world application?

3. Measuring Impact and Effectiveness

Does participation in the curriculum result in observable, statistically significant improvements in self-determination?

How does the self-assessment process contribute to self-reflection, goal-setting, and personal planning?

What are the short-term and long-term effects of improved self-determination on participants' sense of autonomy and perceived well-being?

4. Barriers and Facilitators to Self-Advocacy

What systemic, social, or personal barriers limit self-advocacy among adults with IDD?

What contextual facilitators (e.g., family involvement, peer networks, educator training) support effective curriculum uptake?

In what ways do institutional and community frameworks shape outcomes in self-determination?

5. Generalisation, Adaptation, and Scalability

How can the tool and curriculum be adapted for use in schools, community programs, or supported living environments?

What adaptations are necessary to reflect linguistic, regional, and cultural variations?

What structural considerations are needed to ensure sustainability and broader implementation?

6. Ethical and Legal Considerations

What ethical principles must guide the implementation of self-advocacy programs in vulnerable populations?

How does Indian disability law (e.g., RPWD Act 2016) frame the right to autonomy and decision-making?

What data protection protocols are essential to preserve the privacy and agency of adult participants with IDD?

Significance of the Hypotheses and Research Questions

The research questions and hypotheses outlined here serve as a roadmap for empirical inquiry, reflecting a commitment to dignity, autonomy, and justice for individuals with intellectual and developmental disabilities (IDD). By centring on the lived experiences and evolving capacities of participants, this research aims to challenge assumptions of dependency and foster structures that enable choice, voice, and inclusion.

Moreover, the dual focus on tool development and curriculum implementation positions this study to make theoretical and practical contributions to special education, disability studies, and community-based rehabilitation.

1.6 Operational Definitions of Key Terms

Disability: The RPD Act 2016¹⁰ defines a person with a disability as a person with long-term physical, mental, intellectual or sensory impairment which, in interaction with barriers, hinders their full and effective participation in society equally with others.

A **benchmark disability** is a specified disability of at least forty per cent that has not been defined in measurable terms. This includes a person with a disability, as described in quantifiable terms, certified by the certifying authority.

Specified disability means the disabilities defined in the Schedule of the RPD Act 2016.

Intellectual Disability (ID) is a condition characterised by significant limitations both in intellectual functioning (reasoning, learning, problem-solving) and in adaptive behaviour, which covers a range of everyday, social and practical skills, including—

- a) **Specific Learning Disabilities (SLD)** are a heterogeneous group of conditions wherein there is a deficit in processing language, spoken or written, that may manifest itself as a difficulty to comprehend, speak, read, write, spell, or do mathematical calculations and includes such conditions as perceptual disabilities, dyslexia, dysgraphia, dyscalculia, dyspraxia and developmental aphasia.
- b) **Autism spectrum disorder (ASD)** is a neuro-developmental condition typically appearing in the first three years of life that significantly affects a person's ability to communicate, understand relationships and relate to others and is frequently associated with unusual or stereotypical rituals or behaviours.

Intellectual Disability (ID) Intellectual disability is a condition characterised by significant limitations in intellectual functioning and adaptive behaviour that originates before age 22.

Intellectual Functioning, or intelligence, refers to the general mental capacity, encompassing abilities such as learning, reasoning, and problem-solving.

¹⁰ Rights of Persons with Disabilities Act 2016 has defined 21 types of Specified disability

An IQ test is one method for measuring intellectual functioning. Generally, an IQ score of 70 or higher indicates a significant limitation in intellectual functioning.

Adaptive Behaviour is the collection of conceptual, social, and practical skills that people learn and perform daily.

Conceptual skills—language and literacy; money, time, and number concepts; and self-direction.

Social skills—interpersonal skills, social responsibility, self-esteem, gullibility, naïveté (i.e., wariness), social problem solving, and the ability to follow rules/obey laws and to avoid being victimised.

Practical skills—activities of daily living (personal care), occupational skills, healthcare, travel/transportation, schedules/routines, safety, use of money, use of the telephone.

Standardised tests can also determine limitations in adaptive behaviour.

Age of Onset: The condition typically originates during the developmental period, before the age of 22. Intellectual disability is one of several conditions known collectively as developmental disabilities. {AAIDD}²¹¹

Developmental disabilities are severe, chronic disabilities that can be cognitive, physical or both. The disabilities appear before age 22 and are likely to be lifelong.

Reasonable accommodation refers to necessary and appropriate modifications and adjustments that enable persons with disabilities to enjoy or exercise their rights equally with others without imposing a disproportionate or undue burden in a particular case.

Inclusive education (IE) is a system in which students with and without disabilities learn together, and the design of teaching and learning is suitably adapted to meet the diverse learning needs of students with disabilities.

¹¹ American Association on Intellectual and Developmental Disabilities (AAIDD) promotes progressive policies, sound research, effective practices, and universal human rights for people with intellectual and developmental disabilities can use to the greatest extent without .

An institution is for the reception, care, protection, education, training, rehabilitation, and other activities for persons with disabilities.

Universal design means designing products, environments, programmes, and services that everyone can use to the greatest extent without adaptation or specialised design. It applies to assistive devices, including advanced technologies, for a particular group of persons with disabilities.

Self-Determination: Self-determination is defined as the capacity to act as a causal agent in one's own life. Within this research, it is operationalised through measurable dimensions of the SDS-IDD—autonomy, self-regulation, psychological empowerment, and self-advocacy—captured through simplified, culturally adapted Likert-type items.

Autonomy: the individual's ability to make independent, volitional choices. It is measured through SDS-IDD indicators that assess personal decision-making, the expression of preferences, and resistance to coercion.

Self-Regulation: Operationally, self-regulation encompasses goal-setting, problem-solving, and the capacity to monitor one's actions. It is reflected in SDS-IDD items that evaluate planning behaviours, solution-seeking, and reflective decision-making processes.

Self-Advocacy: Self-advocacy is defined as the ability to articulate needs, assert rights, and seek appropriate support. Operationalisation occurs through both SDS-IDD measurement and participation in the structured Self-Advocacy Curriculum, which develops assertive communication and rights awareness.

Self-Advocacy Curriculum: The curriculum refers to the modular, pedagogically adapted instructional programme developed in this study to cultivate self-advocacy and autonomy. Participation involves engagement with sequential learning modules, visual supports, role-play, and experiential tasks.

SDS-IDD (Self-Determination Scale for Individuals with IDD): The SDS-IDD is the culturally contextualised assessment instrument designed to quantify self-determination. It operationalises the construct through domain-specific items tailored to the linguistic, cognitive, and cultural characteristics of Indian adults with IDD.

1.7 Delimitations of the Study

The present study, "Empowering Independence: Developing a Self-Determination Assessment Tool and Self-Advocacy Curriculum for Enhancing Autonomy and Wellbeing in Adults with Intellectual and Developmental Disabilities," is grounded in a systematic effort to design, validate, and implement an Indigenous, contextually relevant tool to measure self-determination and a curriculum to promote self-advocacy among adults with intellectual and developmental disabilities (IDD). While the scope of the study is substantial, certain delimitations were consciously imposed to ensure feasibility, focus, and methodological clarity.

1. Conceptual and Theoretical Boundaries

The study is delimited by its reliance on the Functional Model of Self-Determination (Wehmeyer et al., 2007), which conceptualises self-determination as a set of volitional, goal-oriented behaviours guided by autonomy, self-regulation, psychological empowerment, and self-realisation. While other theoretical frameworks exist (e.g., the Ecological Model or Five-Step Model), this research draws exclusively from the Functional Model due to its operational clarity and empirical grounding in intellectual disabilities.

Additionally, the curriculum developed within the study targets self-advocacy as a distinct but interlinked construct, viewing it as an extension of self-determination capacities rather than an independent domain. Consequently, other available constructs such as self-efficacy or self-esteem are not directly addressed within the scope of this research.

2. Population and Sample Focus

The study focuses solely on adults aged 18 to 35 diagnosed with mild to moderate intellectual and developmental disabilities. While there is a growing recognition of the need to assess and foster self-determination in children and adolescents with IDD, the study intentionally limits its population to adults due to the following reasons:

- A. The developmental expectation of increased autonomy during adulthood.
- B. The need is to design interventions that are age-appropriate in language and context.
- C. The limited availability of validated tools targeting Indian adults with IDD.

Individuals with severe and profound intellectual and developmental disabilities (IDD) were not included in the final validation phase of the tool due to communication limitations and the need for highly individualised assessment formats, which would require separate instrument development.

3. Geographic and Linguistic Scope

The research was conducted primarily in urban and semi-urban regions across North and West India, using Hindi and English as the communication medium. While India is linguistically and culturally diverse, the inclusion of participants from only select regions and linguistic groups was a pragmatic decision based on resource availability and the need for consistency during scale testing and curriculum piloting.

As such, the findings may not be directly generalisable to populations from Southern or Northeastern states without appropriate cultural and linguistic adaptations. However, the modular nature of the tool and curriculum design allows for future adaptations.

4. Institutional and Environmental Setting

Participants were included from vocational training centres, inclusive employment programs, and special education institutions that had pre-existing engagement with adult IDD populations. This study also includes adults with IDD who were in institutional care or residing in high-support residential settings¹², as their autonomy and advocacy experiences differ substantially due to structural constraints.

Furthermore, this delimitation ensures that the study focuses on those with minimal exposure to structured learning environments where curriculum interventions can be feasibly implemented.

¹² Manolaya Home, Delhi

5. Tool and Curriculum Implementation Timeframe

The self-advocacy curriculum was designed as a 12-week intervention, delivered in weekly sessions focusing on the core domains of self-advocacy: understanding rights, communication strategies, decision-making, and goal-setting. The timeframe was selected to balance the depth of content with feasibility across the diverse participant pool.

While longer-term interventions may yield more profound behavioural transformation, the study delimits itself to short-term efficacy, measured pre- and post-assessment using the SDS-IDD tool. Thus, the longitudinal impacts of the curriculum on employment, social participation, or independent living are beyond the scope of the current phase.

6. Empirical Insights that Reinforce the Delimitations

A closer examination of data from the study reinforces the appropriateness of the chosen delimitations:

Score Distribution by Region: Data from 100 participants revealed a significant clustering of high and moderate self-determination scores among individuals residing in semi-urban areas. This supports the decision to focus on these zones over entirely rural regions, where infrastructure for such studies is less accessible.

Age-specific Findings: The 21–to 30–year–old age group showed the most notable gains in self-advocacy behaviours post-curriculum, validating the age-range selection of the study sample.

Severity-based Variations: Individuals with mild to moderate intellectual and developmental disabilities (IDD) demonstrated greater ability to engage in goal-setting and decision-making following the intervention. In contrast, the pilot inclusion of two participants with profound intellectual and developmental disabilities (IDD) revealed communication and comprehension barriers that compromised reliability and highlighted the necessity of a separate methodological approach for that group.

Curriculum Responsiveness: Over 80% of participants showed measurable improvement (a 5-point increase or more on the SDS-IDD scale) in autonomy and

advocacy domains within the 12-week intervention period, justifying the curriculum's scope and duration within the study's constraints.

In conclusion, the delimitations imposed on this study—ranging from age group and severity level to geographic and linguistic boundaries—were essential to ensure methodological integrity, manageability, and contextual relevance. These choices have not only streamlined the research process but also allowed for the generation of robust, targeted findings that pave the way for future expansions and adaptations.

1.8 Limitations of the Study

While the present study aimed to develop a comprehensive self-determination assessment tool and a tailored “*Self-Advocacy Curriculum for Adults with Intellectual and Developmental Disabilities (IDD)*”¹³, several limitations emerged throughout the research. These limitations reflect the practical, methodological, and contextual challenges of conducting applied disability research within diverse socio-cultural settings. Acknowledging these constraints is essential for interpreting the results within appropriate boundaries and guiding future work in this critical domain.

1. Sample Representation and Generalisability

One of the most significant limitations of the study concerns the sample size and diversity. The data were collected from a purposive sample of 100 adults with IDD across varied regions; the distribution was not proportionate across all Indian states, linguistic groups, and socio-economic strata. For instance, a majority of participants were recruited from institutional settings or organisations offering structured services, which may not represent the experiences of adults with IDD living in remote, under-resourced, or family-managed environments.

Moreover, while the study attempted to stratify participants by gender, age, and severity of impairments and disability, female participants and individuals with profound intellectual disabilities were underrepresented. This imbalance limits the generalizability of the tool's norms and the intervention's impact across the full spectrum of IDD populations.

2. Cognitive and Communication Barriers in Assessment

Developing and validating a psychometric tool for individuals with limited literacy, verbal skills, or abstract reasoning presents inherent challenges. Despite significant efforts to use simplified language, culturally relevant imagery, and assistive prompts, several participants struggled to comprehend certain items or articulate their responses, particularly in domains related to goal setting and personal choice making.

¹³ <https://manovikasfamily.org/sdsidd/>

Additionally, some assessments required the assistance of facilitators or caregivers, which, although necessary for ethical and practical reasons, could have introduced unintentional response bias, particularly when the respondent was eager to please or influenced by social desirability pressures. While measures were taken to minimise such effects (e.g., using trained neutral observers), not all participants could ensure complete independence in their responses.

3. Intervention Duration and Depth

The self-advocacy curriculum was administered within a defined, but relatively short, intervention window (e.g., 8–10 weeks), constrained by institutional scheduling and participant availability. This duration was sufficient to observe short-term gains in domains such as self-expression and interpersonal choice-making that may not capture the long-term impact of advocacy training on sustained behavioural change, community integration, or independent decision-making.

Furthermore, positive shifts in post-test scores were observed, particularly in the autonomy and self-awareness domains; the empowerment and leadership components showed slower gains. This suggests that more intensive or longitudinal support may be required to foster these higher-order dimensions of self-determination¹⁴.

4. Tool Standardisation and Validation Scope

While the Self-Determination Assessment Tool (SDS-IDD) demonstrated strong internal consistency (Cronbach's $\alpha = 0.84$) and moderate correlation with The Arc's scale ($r = 0.30$), external validation across multiple standardised tools remains pending. Cross-validation with alternative scales, including those that measure related constructs (e.g., quality of life, executive functioning, or adaptive behaviour), would provide a broader perspective on the tool's construct validity.

Moreover, the absence of longitudinal follow-up assessments limits the conclusions that can be drawn about the tool's sensitivity to developmental changes over time. The study

¹⁴ <https://manovikasfamily.org/sdsidd/>

measured pre- and post-intervention outcomes within a relatively short frame but did not examine the durability of gains beyond that period.

5. Infrastructure and Institutional Challenges

Several logistical barriers emerged during the study's fieldwork phase. Infrastructure limitations, lack of organisational permissions, and caregiver hesitancy often hamper access to adult participants with IDD in rural or underfunded settings. In some areas, transportation, internet connectivity, and the availability of trained facilitators were significant barriers to implementing the curriculum.

These limitations are reflective not of the tool or curriculum itself but of the broader systemic inequalities in disability service delivery in India. Such challenges underscore the importance of embedding assessment tools and interventions within multi-level support systems, including community-based rehabilitation, government schemes, and advocacy networks.

6. Reflecting on Study Data and Outcomes

Despite the limitations outlined, the study produced noteworthy empirical outcomes:

- **Seventy-two per cent** of participants showed measurable improvement in their post-test self-determination scores, particularly in self-advocacy and personal decision-making.
- **Twenty-eight per cent** of participants achieved high levels of independent functioning within the SDS-IDD framework, suggesting that adults with moderate disabilities can develop autonomy when provided with structured support.
- However, the empowerment domain showed an average improvement of only **7.2% compared to 22.5%** in the autonomy domain. This differential progression highlights the importance of sustained engagement over extended periods, particularly in fostering self-confidence and leadership development.

These data patterns provide a critical lens through which the limitations must be interpreted: not as failings but as areas requiring sustained investment, iteration, and systemic integration.

Developing a culturally responsive self-determination assessment tool and a self-advocacy curriculum for adults with intellectual and developmental disabilities (IDD) represents a significant contribution to the fields of inclusive education and adult disability services. However, like all pioneering work, this study is limited by specific methodological and contextual constraints. These include sample diversity constraints, communication barriers, short intervention timelines, limited cross-validation, and systemic access challenges.

Future research must address these limitations by using more representative and extensive samples, employing longitudinal tracking, and fostering cross-disciplinary collaborations to ensure that the developed tools and practices translate into lasting autonomy and well-being for adults with intellectual and developmental disabilities.

CHAPTER 2: Review of Literature

2.1 Overview

Self-determination has emerged as a central construct in contemporary disability scholarship, especially in relation to inclusive education, transition to adulthood, and the broader discourse on rights, autonomy, and participation for individuals with intellectual and developmental disabilities (IDD), including those with autism spectrum disorder (ASD). The present chapter critically reviews the literature that informs the conceptual, empirical, and contextual foundations of this study.

The review is organised around the following thematic strands:

- (a) legislative and policy frameworks supporting self-determination,
- (b) theoretical perspectives and models of self-determination,
- (c) empirical studies on self-determination and inclusive education,
- (d) cultural mediators of autonomy in the Indian context,
- (e) roles of teachers, caregivers, communities, and media,
- (f) comparative international practices,
- (g) assessment instruments for self-determination,
- (h) barriers to inclusive education in India, and
- (i) frameworks for developing indigenous tools and curricula for self-advocacy.

This synthesis provides the conceptual and empirical grounding for the development of the Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) and the associated self-advocacy curriculum that form the core of this research.

2.2 Legislative and Policy Frameworks Supporting Self-Determination

2.2.1 Rights of Persons with Disabilities Act, 2016

The Rights of Persons with Disabilities (RPwD) Act, 2016, marks a significant shift in India's disability policy from a welfare-based model to a rights-based paradigm. The Act aligns with the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) and affirms equality, non-discrimination, and full participation as guiding principles.

Chapter III of the RPwD Act guarantees the right to inclusive education. It mandates that persons with disabilities have access to education without discrimination and on an equal basis with others. Key provisions relevant to self-determination include:

- A. Non-discriminatory admission policies in all educational institutions.
- B. Reasonable accommodation and individualised support measures.
- C. Accessible infrastructure, learning materials, and communication modes.
- D. Recognition of the evolving capacities of learners and their right to express views on matters affecting them.

The Act also emphasises early identification, teacher training, and the establishment of resource centres to support inclusion. Significantly, its scope extends beyond school education to encompass higher and continuing education, thereby creating a legal foundation for promoting autonomy and self-advocacy throughout the life span.

2.2.2 National Education Policy, 2020

The National Education Policy (NEP) 2020 proposes a paradigm shift towards holistic, flexible, learner-centred education. Its 5+3+3+4 curricular structure emphasises foundational skills, life skills, socio-emotional development, and experiential learning.

From a self-determination perspective, NEP 2020 is significant because it:

- A. Explicitly recognises the need for inclusive and equitable quality education for learners with disabilities.
- B. Advocates for accessible content, multiple language options, and technology-enabled learning.
- C. Encourages student choice in subject selection and pathways, especially at the secondary level.
- D. Emphasises life skills, critical thinking, and vocational exposure, which are foundational to autonomous decision-making.

Although NEP 2020 primarily focuses on school education, its emphasis on flexible pathways, competency-based learning, and student agency has clear implications for young adults with IDD as they transition into higher education, vocational training, and adult life.

2.3 Theoretical Perspectives on Self-Determination

2.3.1 Conceptual Foundations

Self-determination is commonly defined as the capacity of individuals to act as causal agents in their own lives by making choices, setting goals, and initiating actions consistent with their preferences and values (Wehmeyer, 1999). In disability studies, self-determination is conceptualised as a multidimensional construct rather than a single trait, typically including autonomy, self-regulation, psychological empowerment, and self-realisation (Field et al., 1998; Wehmeyer, 1999).

For individuals with IDD, self-determination is both an outcome and a process:

- **As an outcome**, it represents the extent to which individuals feel they have control over their lives.
- **As a process**, it refers to developing skills and opportunities necessary to exercise such control.

2.3.2 Functional Model of Self-Determination

The Functional Model of Self-Determination (Wehmeyer, 1999; Wehmeyer et al., 2007) is one of the most widely adopted frameworks in the field. It defines self-determined behaviour as “volitional actions that enable a person to act as the primary causal agent in one’s life.”

The model conceptualises four essential characteristics:

1. **Autonomy** – acting according to one’s preferences and interests.
2. **Self-Regulation** – planning, problem-solving, and evaluating one’s actions.
3. **Psychological Empowerment** – perceiving oneself as capable and efficacious.
4. **Self-Realisation** – having accurate self-knowledge and using it to guide life choices.

This model is beneficial in educational and rehabilitative contexts because it translates self-determination into teachable, observable behaviours such as choice-making, goal-setting, decision-making, and self-advocacy.

2.3.3 Causal Agency Theory

Causal Agency Theory (Shogren et al., 2015) builds on the Functional Model and emphasises self-determination as a developmental process. It describes self-determined people as “causal agents” who act to bring about change in their lives. The theory underscores the roles of context and opportunity. It supports enabling self-determined action and highlights that individuals with IDD can develop causal agency when provided explicit instruction and supportive environments.

2.3.4 Self-Determination Theory (SDT)

Self-Determination Theory (Deci & Ryan, 2000) offers a complementary psychological perspective, positing that human motivation and well-being are linked to the satisfaction of three basic psychological needs: autonomy, competence, and relatedness. Although not explicitly developed for disability populations, SDT provides a valuable lens for understanding how environments that support choice, mastery, and belonging can enhance self-determined behaviour, including among individuals with IDD.

2.4 Self-Determination and Educational Outcomes

2.4.1 Inclusion and Skill Development

Inclusive educational environments have the potential to foster self-determination by providing meaningful opportunities for choice, participation, and decision-making. Research consistently demonstrates that students with higher self-determination are more likely to experience positive post-school outcomes, including competitive employment, independent or semi-independent living, and greater social participation (Shaw & Madaus, 2009; Grigal & Hart, 2010).

However, mere physical inclusion in general education classrooms is insufficient. Self-determination is more likely to develop when teachers:

- A. Incorporate choice-making into daily routines.
- B. Provide explicit instruction in problem-solving and goal-setting.
- C. Encourage student participation in individualised planning and evaluation.
- D. Model and reinforce self-advocacy behaviours.

2.4.2 Transition Planning and Adult Life Trajectories

Longitudinal studies by Wehmeyer and Palmer (2003) indicate that adolescents with higher self-determination scores are more likely, as adults, to be employed, live independently, and experience a better quality of life compared to peers with lower scores. Self-determination thus functions as a protective factor during the transition from school to adult life.

Despite this evidence, structured transition planning remains underdeveloped in many educational systems, including in India. Transition processes often assume a level of independence and decision-making that students with IDD have not been explicitly taught, thereby missing opportunities to scaffold autonomy and self-advocacy.

2.5 Teachers' Roles and Instructional Models

2.5.1 Teacher Preparedness and Expectations

Teachers serve as central agents in fostering or constraining learners' self-determination with IDD. Their expectations, beliefs, and instructional practices shape the extent to which students experience autonomy and agency.

Research suggests that:

- A. Teachers who hold high expectations and adopt inclusive philosophies are more likely to embed self-determination goals in Individualised Education Plans (IEPs) and classroom routines (Wehmeyer & Field, 2007).
- B. Many teachers, however, report limited training in self-determination instruction and feel underprepared to support students with moderate to severe disabilities, including those with ASD (Shogren et al., 2014).

This gap between attitudes and practice underscores the need for systematic professional development in self-determination pedagogy.

2.5.2 Instructional Models for Teaching Self-Determination

Several instructional models have been developed to teach self-determination skills explicitly:

- A. **Five-Step Model (Field & Hoffman, 1994)** – guides learners through stages of knowing themselves, valuing themselves, planning, acting, and learning from outcomes.
- B. **Ecological Model (Abery & Stancliffe, 1996)** – emphasises the interaction between the person and environment in promoting autonomy.
- C. **Self-Determined Learning Model of Instruction (SDLMI)** – teaches students to set goals, develop action plans, and evaluate outcomes (Wehmeyer et al., 2000).

Evidence indicates that these models can enhance goal-setting, self-regulation, and decision-making when implemented consistently (Thoma et al., 2008; Test et al., 2005). However, adaptation to local culture, language, and resource realities is critical, particularly in low- and middle-income countries.

2.6 Empirical Studies on Self-Determination and Inclusive Education

2.6.1 Impact of Self-Determination Instruction

Empirical research over the last three decades has consistently demonstrated a positive relationship between self-determination and adult outcomes for individuals with IDD. Wehmeyer and Palmer (2003) reported that youth with higher self-determination scores were more likely to:

- A. Obtain employment.
- B. Live independently or with limited support.
- C. Demonstrate greater community participation.

Test et al. (2005) found that students who received systematic self-determination instruction were more likely to pursue post-secondary education, sustain employment, and report higher satisfaction with life choices. These findings underscore the value of embedding self-determination instruction within school and post-school programs.

2.6.2 Variability in Implementation

Despite strong evidence, the quality of implementation remains variable. Shogren et al. (2015) documented that:

- A. Teachers widely value self-determination concepts in principle.
- B. In practice, instruction is often informal, sporadic, and overshadowed by academic or behavioural priorities.
- C. Structural constraints, such as large class sizes, limited time, and inadequate training, impede consistent implementation.

These patterns suggest that enhancing self-determination will require not only curriculum materials but also changes in teacher education, school culture, and systemic support.

2.6.3 Gaps in the Indian Context

In India, systematic empirical studies on self-determination in inclusive settings are limited. While some NGOs and specialised institutions implement life-skills and advocacy programs, these initiatives often lack standardised evaluation frameworks and longitudinal tracking. Key gaps identified in available literature and practice include:

- A. Absence of validated, culturally adapted self-determination assessment tools for Indian adults with IDD.
- B. Limited focus on adult populations; most efforts concentrate on children or school-age youth.
- C. Minimal documentation of outcomes related to autonomy, self-advocacy, or long-term quality of life.

These gaps justify the present study's focus on creating an indigenous assessment tool and curriculum for adults with IDD in India.

2.7 Cultural Dimensions of Self-Determination in the Indian Context

2.7.1 Collectivism and Autonomy

Much of the self-determination literature has emerged from individualistic cultural contexts that emphasise independence and self-governance. In contrast, Indian society is collectivist, mainly, prioritising family cohesion, interdependence, and respect for authority. Decision-making is often shared or led by parents and elders, especially for individuals perceived as vulnerable or dependent, such as those with disabilities.

Consequently, autonomy in India must be understood as **relational** rather than purely individual. Acting as a causal agent may involve participating in shared decisions, expressing preferences within family discussions, and negotiating roles, rather than making fully independent decisions in isolation.

2.7.2 Familial Roles and Dependency Norms

Families in India typically assume lifelong responsibility for the care and welfare of individuals with IDD. While this can serve as a strong protective factor, it may also:

- A. Limit opportunities for individuals to practice decision-making.
- B. Reinforce dependency and learned helplessness.
- C. Reduce expectations for independent functioning (Muthukrishna & Singh, 2007).

These dynamics highlight the need for interventions that involve families as partners in fostering autonomy rather than as sole decision-makers.

2.7.3 Linguistic and Socioeconomic Factors

India's linguistic diversity and socio-economic inequities further complicate the realisation of self-determination for adults with IDD. Barriers include:

- A. Limited availability of accessible, multilingual materials.
- B. Lower access to inclusive education and rehabilitation services for rural and low-income families.
- C. Competing economic-survival priorities may delay or preclude participation in developmental programs (Alur, 2001; Singal, 2006).

These factors reinforce the importance of designing self-determination tools and curricula that are multimodal, low-cost, and adaptable to diverse literacy and language levels.

2.8 Community, Social Media, and Collective Advocacy

2.8.1 Community-Based Programs and Social Capital

Self-determination develops not only within schools but also within communities.

Community-based rehabilitation (CBR) programs, life-skills centres, and self-help groups offer critical spaces for adults with IDD to practice decision-making, communication, and leadership (Abery & Stancliffe, 2003).

Organisations such as Manovikas Charitable Society, Manbhavan Mitra Mandali, AADI, and others in India have demonstrated that:

- A. Community engagement enhances social capital and reduces stigma.
- B. Peer networks and support groups strengthen self-confidence and advocacy skills.
- C. Partnerships with local governance structures and civil society can promote inclusive norms and practices.

2.8.2 Social Media as a Platform for Self-Advocacy

Digital platforms such as Facebook, X (formerly Twitter), Instagram, YouTube, and Indian social media applications allow individuals with disabilities, families, and advocates to:

- A. Share lived experiences and challenge stereotypes.
- B. Mobilise support for policy change and accessible infrastructure.

- C. Build virtual communities of practice around disability rights.

Hashtags such as #NothingAboutUsWithoutUs, #InclusionMatters, and #DisabilityRightsAreHumanRights have amplified disability narratives globally and in India. For self-advocates with IDD who can access and use digital tools (independently or with support), social media can be a powerful vehicle for visibility, agency, and leadership.

At the same time, ethical concerns—digital exclusion, cyberbullying, exploitation, and “inspiration porn”—necessitate careful training in digital literacy and protective safeguards.

2.9 Comparative International Practices in Inclusive Education and Self-Advocacy

International experiences provide valuable reference points for designing culturally grounded models in India:

- A. **United States:** Under the Individuals with Disabilities Education Act (IDEA, 2004), transition-focused education, person-centred planning, and programs like the Self-Determined Learning Model of Instruction (SDLMI) have improved self-determination and post-school outcomes.
- B. **Canada:** Universal Design for Learning (UDL) and peer mentorship programs promote multiple means of engagement and expression, supporting the participation of students with IDD in mainstream schools and post-secondary institutions.
- C. **Australia:** The National Disability Insurance Scheme (NDIS) funds individualised life-skills and advocacy supports. Peer-led advocacy networks strengthen leadership among young people with disabilities.
- D. **United Kingdom:** The Special Educational Needs and Disability (SEND) Code of Practice mandates child participation in planning and decision-making. Youth councils and disability parliaments offer platforms for civic engagement.

- E. **Scandinavian Countries:** Integrated school systems, early intervention, and inter-agency collaboration exemplify holistic, rights-based approaches.
- F. **Japan and South Korea:** Parent-led advocacy and municipality-level reforms highlight the importance of family and local governance structures.

These practices underscore key elements that are transferable to the Indian context, such as person-centred planning, UDL principles, peer-led advocacy, and systematic transition frameworks. However, adaptation must be culturally sensitive and resource-aware.

2.10 Review of Existing Self-Determination Assessment Tools

A range of instruments has been developed internationally to assess self-determination, including:

- A. **The Arc’s Self-Determination Scale (SDS)** – measures autonomy, self-regulation, psychological empowerment, and self-realisation among adolescents with cognitive disabilities (Wehmeyer, 1995).
- B. **AIR Self-Determination Scale** – assesses self-determination capacity and opportunity from the perspectives of students, teachers, and parents.
- C. **Self-Determination Inventory: Student Report (SDI: SR)** – a technology-enabled tool grounded in Causal Agency Theory for adolescents and young adults (Shogren et al., 2018).
- D. **ChoiceMaker Self-Determination Assessment** – focuses on goal-setting, action-taking, and self-evaluation in transition planning (Martin & Marshall, 1996).
- E. **Curriculum-linked tools such as “Whose Future Is It Anyway?”** – combine instruction and formative assessment for student-led transition IEPs.

While these instruments have strong psychometric properties and have contributed significantly to research and practice, their direct adoption in India is constrained by:

- A. Linguistic and literacy demands.
- B. Cultural assumptions about independence.

- C. Limited relevance of certain life domains (e.g., independent housing, dating) for many Indian adults with IDD.

These limitations highlight the need for an indigenous, multimodal, culturally grounded assessment tool tailored to Indian adults with IDD.

2.11 Barriers to Inclusive Education in India

Despite progressive legislative frameworks, substantial barriers impede the realisation of inclusive education and self-determination for students with IDD in India, including:

- A. **Structural barriers:** inaccessible school infrastructure, overcrowded classrooms, and limited transportation.
- B. **Human resource constraints:** shortage of trained special educators, limited teacher preparation in inclusive pedagogy, and low expectations.
- C. **Socio-cultural factors:** stigma, gender bias, and parental concerns about safety and bullying.
- D. **Policy and administrative challenges:** fragmented responsibilities across ministries, weak monitoring, and underfunded schemes.
- E. **Technological barriers:** digital divide and limited access to assistive technologies.

These challenges are particularly acute for students with IDD who require functional, adaptive, and life-skills-based curricula. Addressing these barriers requires coordinated efforts across legislation, teacher education, curriculum reform, family engagement, and investment in accessible technologies.

2.12 Conceptual Framework for an Indigenous Self-Determination Assessment Tool and Self-Advocacy Curriculum

Synthesising the literature reviewed, the present study is guided by a conceptual framework that:

1. Adopts the Functional Model of Self-Determination as the core theoretical foundation.
2. Integrates a fifth culturally salient domain—contextual interdependence—to reflect the collectivist nature of Indian society.
3. Emphasises multimodal, low-literacy-sensitive assessment methods (e.g., visual scales, pictorial scenarios, caregiver input).
4. Aligns with national policy frameworks (RPwD Act, 2016; NEP, 2020) and international conventions (UNCRPD).
5. Links assessment with intervention by embedding self-advocacy curriculum modules in real-life contexts (home, community, vocational settings).
6. Involves teachers, caregivers, and community stakeholders as co-facilitators of autonomy rather than gatekeepers.

The literature reviewed in this chapter thus justifies and informs the dual focus of this research: (a) development and validation of the SDS-IDD, and (b) design and implementation of a structured, culturally responsive self-advocacy curriculum for adults with IDD in India.

Chapter 3: Materials and Methods

3.1 Overview of Research Design

The present study employed a mixed-methods, intervention-based research design to

(a) develop and validate the Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD; Indian Version) and

(b) design and pilot a structured Self-Advocacy Curriculum for adults with intellectual and developmental disabilities (IDD).

The design was informed by the Functional Model of Self-Determination (Wehmeyer, 1999) and aligned with rights-based frameworks such as the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) and the Rights of Persons with Disabilities Act (RPwD Act, 2016).

The chapter is organised into the following sections: (a) description of tools, including the SDS-IDD and Self-Advocacy Curriculum; (b) data collection tools and procedures; (c) statistical and digital tools; (d) expert consultation and cultural validation; (e) sampling and participant details; (f) reliability and validity procedures; and (g) web-based deployment of the SDS-IDD.

3.2 Tools Used for the Research

Methodological rigour in disability research depends heavily on the appropriateness, psychometric quality, and cultural relevance of the tools used. In this study, two primary tools were developed and utilised:

- 1. The Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD).**
- 2. The Self-Advocacy Curriculum for Adults with IDD.**

Both tools were designed specifically for use with Indian adults with IDD and were subjected to systematic processes of expert review, pilot testing, and psychometric evaluation.

3.3 The Self-Determination Scale for Individuals with IDD (SDS-IDD)

3.3.1 Purpose and Conceptual Basis

The SDS-IDD was developed as a comprehensive, culturally grounded instrument to assess self-determination among adolescents and adults with IDD in India. The scale draws on the Functional Model of Self-Determination (Wehmeyer, 1999), which conceptualises self-determination as a set of volitional actions that enable individuals to act as causal agents in their own lives. The SDS-IDD was further informed by ecological and rights-based perspectives that emphasise the interaction between individual competencies and contextual supports.

The primary purposes of the SDS-IDD were to:

- A. Provide a standardised measure of self-determination for adults with IDD in Indian settings.
- B. Capture multiple domains of self-determination, including autonomy, decision-making, communication, rights awareness, and self-advocacy.
- C. Generate data to inform individualised intervention planning and policy advocacy.

3.3.2 Structure and Domains

The final SDS-IDD (Indian Version) comprises **25 items** rated on a **5-point Likert-type scale** ranging from 1 (Not at all) to 5 (Very often). Items are behaviourally anchored and written in simple, concrete language to maximise accessibility. Each item reflects an aspect of self-determination aligned with one of the core domains:

- A. **Decision-Making and Problem-Solving Skills** (e.g., information gathering, decision-making, planning).
- B. **Communication and Advocacy Skills** (e.g., expressing needs, communicating with teachers and employers).
- C. **Awareness of Rights and Self-Care** (e.g., knowledge of rights, understanding abuse, physical and mental health awareness).

D. Learning Preferences and Educational Engagement (e.g., communicating learning styles, asking for help).

E. Daily Living and Work Skills (e.g., punctuality, following schedules, independent living activities).

Items may be administered via structured interview, self-report (for participants with higher literacy), or supported responses using visual aids and augmentative and alternative communication (AAC) strategies.

3.3.3 Response Format and Administration

Each item is scored as follows:

1 = Not at all

2 = Rarely

3 = Sometimes

4 = Often

5 = Very often

Where required, items can be read aloud, explained with examples, or presented with pictorial supports. Administrators are encouraged to use consistent prompts across participants and to record qualitative observations alongside numerical ratings.

3.4 Self-Advocacy Curriculum

3.4.1 Rationale and Aims

The Self-Advocacy Curriculum was designed as a structured, modular intervention to enhance self-determination skills among adults with IDD. The curriculum operationalises self-determination into teachable competencies such as assertive communication, decision-making, goal-setting, understanding rights, and problem-solving. It aligns with Universal Design for Learning (UDL) principles and emphasises experiential, participatory learning.

The curriculum aims to:

- A. Strengthen participants' ability to express preferences, needs, and rights.
- B. Improve decision-making and problem-solving skills in everyday contexts.
- C. Enhance self-awareness and future planning.
- D. Support generalisation of skills across home, vocational, and community environments.

3.4.2 Curriculum Structure and Modules

The curriculum was initially planned as a six-week intervention and then refined into **five core modules** to provide flexibility for different settings:

1. **Knowing Myself** – Self-awareness, strengths, needs, and interests.
2. **Understanding My Rights** – Awareness of disability rights, dignity, and protection from abuse.
3. **Making Choices and Decisions** – Everyday decision-making and evaluating options.
4. **Communicating Effectively** – Expressing needs, saying “no,” asking for help.
5. **Planning and Problem-Solving** – Setting personal goals and planning steps to achieve them.

Each module includes:

- A. Clear learning objectives.
- B. Structured activities (role-plays, group discussions, visual stories).
- C. Practice tasks linked to real-life situations.
- D. Short reflective exercises (verbal, pictorial, or written).
- E. Simple pre- and post-checklists for monitoring progress.

3.4.3 Pedagogical Approach

The pedagogical design of the curriculum is grounded in adult learning principles and UDL. Sessions were delivered through:

- A. **Role-play and simulation** of common scenarios (e.g., asking for help at work).
- B. **Peer learning**, where more experienced self-advocates modelled skills.
- C. **Visual supports** (pictures, symbols, charts) to scaffold understanding.
- D. **AAC tools**, including communication boards and digital speech output devices, are used as needed.
- E. **Family/caregiver engagement**, with selected activities extended to home settings.

Facilitators were instructed to maintain a supportive, non-judgemental environment that encourages participation, respects cultural norms, and recognises the diverse communication styles of adults with IDD.

3.5 Data Collection Tools and Techniques

To evaluate the effectiveness of both the SDS-IDD and the Self-Advocacy Curriculum, a combination of quantitative and qualitative data collection strategies was employed.

3.5.1 Quantitative Measures

- A. **Pre- and Post-Intervention SDS-IDD Administration.** The scale was administered before the intervention (baseline) and following completion of the curriculum to measure changes in self-determination scores.
- B. **Norm Development Data.** SDS-IDD responses from a broader sample were used to generate preliminary regional norms (see Table 3.3).

3.5.2 Qualitative Measures

- A. **Participant Observation Sheets.** Facilitators maintained structured observation logs documenting engagement, participation, and spontaneous demonstrations of self-advocacy during sessions.
- B. **Semi-Structured Interviews.** Caregivers and facilitators participated in interviews focusing on perceived changes in autonomy, communication, and decision-making.
- C. **Field Notes.** The researcher maintained detailed field notes capturing contextual nuances, environmental facilitators and barriers, and emergent themes.

All data collection tools were pilot-tested and refined for clarity, linguistic simplicity, and suitability for individuals with varying cognitive and communication profiles.

3.6 Digital and Statistical Tools

3.6.1 Statistical Software

The following software tools were used for data analysis:

- A. **SPSS (Version 25.0).** Used for descriptive statistics, reliability analysis (Cronbach's alpha), correlation analysis, exploratory factor analysis (EFA), and inferential tests (e.g., paired-samples *t* test).
- B. **Microsoft Excel.** Used for data entry, cleaning, preliminary descriptive analysis, and visualisation (e.g., bar charts, line graphs).
- C. **NVivo (Optional).** Used selectively for thematic analysis of interview transcripts and qualitative field notes.

3.6.2 Statistical Procedures

Key quantitative analyses included:

- A. Descriptive statistics (means, standard deviations, score ranges).
- B. Internal consistency reliability (Cronbach's alpha, item-total correlations).

- C. EFA using principal axis factoring with promax rotation.
- D. Correlational analysis for convergent validity (e.g., comparison with the adapted Arc's Self-Determination Scale).
- E. Pre–post comparisons using paired-samples *t* tests (for intervention effects) where applicable.

3.7 Expert Consultation and Cultural Validation Process

3.7.1 Composition of the Expert Panel

An interdisciplinary expert panel (N = 8) was convened to review the content and structure of the SDS-IDD and the Self-Advocacy Curriculum. The panel included:

- A. Special educators with experience in curriculum design for IDD.
- B. Clinical psychologists specialising in developmental and intellectual disabilities.
- C. Academic researchers in disability studies and inclusive education.
- D. Practitioners working in community-based rehabilitation and advocacy programmes.

Each expert had at least 10 years of professional experience and familiarity with both international best practices and Indian socio-cultural contexts.

3.7.2 Focus of Expert Review

Experts were requested to review each item and module on:

- A. **Relevance** to self-determination in Indian contexts.
- B. **Clarity** and linguistic simplicity.
- C. **Cultural appropriateness**, especially concerning family roles and community norms.
- D. **Developmental suitability** for adults with mild to severe IDD.

3.7.3 Thematic Feedback

Thematic analysis of expert feedback yielded several core domains, summarised in Table 3.1.

Table 3.1

Summary of Domain-Specific Expert Feedback on Tool and Curriculum Development

Area	Recommendations
Cultural Relevance	Embed themes of family respect, communal life, and religious practices
Language Accessibility	Use plain language, include visual/symbolic cues, and develop alternate formats
Community Engagement	Maintain iterative feedback with local disability networks
Adaptability and Flexibility	Offer multiple response modes (verbal, pictorial, gesture-supported, written)
Empowerment and Strength-Based Focus	Frame items to reflect abilities and goals, not limitations

3.7.4 Item Revision Examples

Based on expert feedback, several composite items were split into simpler, discrete statements to improve clarity and reduce cognitive load.

- **Original item:** “I can gather information, make decisions, and solve problems.”
- **Revised items:**
 - “I can gather information.”
 - “I can make decisions.”
 - “I can solve problems.”
- **Original item:** “I understand the importance of taking care of my physical and mental health.”
- **Revised items:**
 - “I recognise the importance of maintaining my physical health.”
 - “I understand the importance of taking care of my mental health.”

These revisions increased item specificity, facilitated comprehension, and enhanced the sensitivity of the scale for individuals with varying levels of verbal and conceptual ability.

3.8 Participants, Sampling, and Validation Procedures

3.8.1 Sampling Strategy

A purposive sampling strategy was adopted to recruit participants with diverse profiles within the IDD population. Inclusion aimed to capture variation by:

- A. Age (14–35 years).
- B. Type and severity of disability (mild, moderate, severe IDD; IDD with co-occurring autism spectrum disorder).

- C. Educational placement (special schools, inclusive schools, vocational centres, community-based programmes).
- D. Socioeconomic and linguistic backgrounds (urban and semi-urban settings; multiple regional languages).

3.8.2 Inclusion and Exclusion Criteria

Inclusion criteria

Participants were eligible if they:

- A. Were aged between 14 and 35 years.
- B. Had a documented diagnosis of IDD (e.g., disability certificate, clinical records).
- C. Were able to provide informed assent, with consent from a parent or legal guardian where required.
- D. We are willing to participate in assessment and curriculum sessions.

Exclusion criteria

Participants were excluded if they:

- A. Were younger than 14 or older than 35 years.
- B. Did not have a confirmed diagnosis of IDD.
- C. Had no available legal guardian for consent when needed.
- D. Were unwilling or medically unable to participate in the intervention.

3.8.3 Sample Distribution Across Phases

Two main phases of data collection were conducted:

- A. **Pilot phase (pre-testing).** A pilot sample of 20 participants completed an earlier version of the SDS-IDD to identify issues of clarity, feasibility, and administration procedures.

B. Validation and intervention phase. An expanded sample of 80 participants completed the final SDS-IDD and, where feasible, participated in the Self-Advocacy Curriculum. These data were used for reliability, factor analysis, and preliminary norm development.

3.9 Unified Scale Comparison and Regional Norms for SDS-IDD

3.9.1 Comparative Framework

To situate the SDS-IDD within the broader self-determination measurement literature, key features were compared with two widely used instruments: The Arc's Self-Determination Scale and the AIR Self-Determination Scale. Table 3.2 summarises this comparison.

Table 3.2

Comparative Analysis of Existing Self-Determination Tools and the SDS-IDD Framework

Domain	The Arc's Scale	AIR Scale	SDS-IDD
Autonomy	✓	✓	✓
Self-Regulation	✓	✓	✓
Psychological Empowerment	✓	✓	✓
Self-realisation	✓	✗	✓
Self-Advocacy & Expression	✓ (indirect)	✓	✓ (direct)
Cultural Adaptability (India)	✗	✗	✓
Designed for IDD	✓	✓	✓
Scoring Simplicity	Medium	High	High

3.9.2 Regional Norms for SDS-IDD

Based on the initial dataset (N = 100), preliminary score ranges were constructed to categorise levels of self-determination.

Table 3.3

Regional Distribution of Normative Scores for SDS-IDD Participants

Score Range	Level	Interpretation
1–40	Low	Needs extensive support in all self-determination domains.
41–80	Moderate	Developing self-advocacy and decision-making skills; benefits from structured environments.
81–125	High	Demonstrates autonomy and strong self-awareness; ready for independent actions.

3.9.3 Demographic Trends

Preliminary analysis revealed:

- A. High scores were most frequent in the 21–30-year age group.
- B. A slightly higher proportion of males obtained high scores, though the difference was not statistically tested.
- C. Some individuals with severe IDD scored higher than expected, particularly where sustained exposure to inclusive environments and structured support had been provided.

These observations suggest that contextual factors—such as access to inclusive education, family support, and community participation—may significantly influence self-determination, beyond diagnostic severity alone.

3.10 Indian Context Validation: SDS-IDD and The Arc's Self-Determination Scale

3.10.1 Rationale for Comparative Validation

Although The Arc's Self-Determination Scale is widely used internationally, its direct application in India is challenging due to linguistic complexity and cultural assumptions of independence. A small-scale comparative study was therefore undertaken to explore convergent validity between the SDS-IDD and an adapted version of The Arc's Scale.

3.10.2 Method

A subsample of 20 participants completed both instruments. The Arc's Scale was linguistically simplified and supported with examples while preserving its core intent. For each participant, total scores on both scales were computed and compared.

3.10.3 Descriptive Statistics

Table 3.4

Descriptive Statistics for Adapted Arc Scale and SDS-IDD Scores (N = 20)

Metric	Arc Scale (IN)	SDS-IDD
Mean Score	106.65	74.80
Standard Deviation	14.83	7.80
Score Range (Min–Max)	86 – 141	57 – 86

The Arc's Scale produced a wider spread of scores, whereas the SDS-IDD showed a tighter distribution, consistent with its design for diverse cognitive profiles.

3.10.4 Correlation Analysis

Pearson's correlation coefficient was computed to examine the linear relationship between total scores on the two scales:

$$r = -0.08, p = .75$$

The weak, non-significant negative correlation indicates that the two instruments did not yield convergent scores in this small sample.

3.10.5 Interpretation

The lack of significant correlation does not invalidate either tool but highlights essential differences:

- A. **Conceptual emphasis.** SDS-IDD is explicitly grounded in collectivist, family-mediated notions of autonomy, whereas The Arc's Scale reflects more individualistic constructs.
- B. **Linguistic demands.** The Arc's Scale requires higher levels of reading comprehension and abstract reasoning.
- C. **Measurement focus.** SDS-IDD uses behaviourally observable indicators and is more compatible with supported administration.

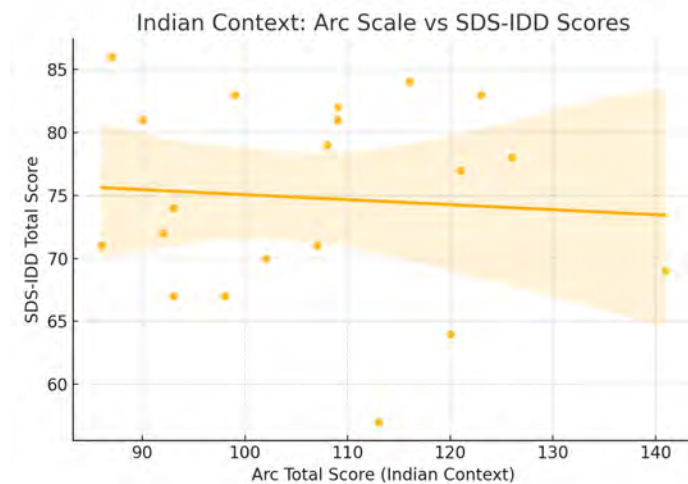


Figure 3.1

Illustrative Scatterplot of SDS-IDD and Adapted Arc Scale Scores (N = 20)

3.11 Scoring Methodology for SDS-IDD

3.11.1 Item-Level Scoring

Each of the 25 items is scored on the 5-point scale described earlier. Behavioural anchors and vignette-based examples were developed to support consistent scoring across raters. Higher scores indicate more frequent or more independent demonstration of the target behaviour.

3.11.2 Anchor Descriptions

Table 3.5

Anchor Descriptions for the 5-Point SDS-IDD Rating Scale

Score	Label	Descriptor	Indicators / Examples
1	Not at All	The behaviour or skill is absent. The individual does not demonstrate awareness, comprehension, or ability in the assessed domain.	Cannot articulate strengths, needs, or preferences; shows no self-advocacy; avoids communication or cannot respond even with support.
2	Rarely	Minimal presence of the behaviour. Requires frequent prompting. Displays inconsistent understanding or expression.	Occasionally acknowledges needs or strengths but depends heavily on cues; may show discomfort or frustration when asked to reflect or advocate.
3	Sometimes	Moderate or situational consistency. Able to demonstrate the behaviour in familiar or supported environments.	Can describe some interests, preferences, or goals in familiar contexts; shows emergent awareness; initiates communication when comfortable.
4	Often	Regular demonstration of the behaviour. Requires minimal assistance. Demonstrates	Frequently engages in self-advocacy, expresses learning preferences, and articulates needs to teachers or peers with minor support or reminders.

Score	Label	Descriptor	Indicators / Examples
		confidence and awareness in most contexts.	
5	Very Often	The behaviour is consistently observed across settings. It is an independent, proactive, and confident expression of self-determination and advocacy.	Communicates clearly and confidently goals, values, and learning styles across contexts (e.g., school, workplace); independently seeks help and negotiates support when needed.

3.11.3 Total Scores and Interpretation

Total scores range from **25 to 125**. Interpretive categories are shown in Table 3.6.

Table 3.6

Interpretation of Total SDS-IDD Scores

Score Range	Level of Self-Determination / Self-Advocacy Skills	Interpretation
25–40	Low	Demonstrates minimal or inconsistent self-awareness, decision-making, and advocacy abilities. Substantial support is needed to initiate and sustain autonomous behaviours.
41–80	Moderate	Exhibits emerging or context-specific self-determination and advocacy skills. Capable of goal-setting and expressing preferences with occasional guidance.
81–125	High	Consistently demonstrates assertive, self-directed behaviour and effective advocacy. Capable of articulating needs, making decisions, and taking initiative across varied settings.

3.11.4 Rater Training and Quality Assurance

All raters (teachers, therapists, or trained field workers) participated in structured training that included:

- A. Review of item definitions and behavioural exemplars.
- B. Practice scoring through mock interviews and case vignettes.
- C. Group discussions to resolve discrepancies and calibrate interpretations.

Inter-rater reliability checks were conducted on a subset of cases using Cohen's kappa. Items or scoring guidelines yielding low agreement were clarified during the pilot phase.

3.12 Content Validation

3.12.1 Rationale

Content validity was established to ensure that the SDS-IDD items collectively represent the theoretical and practical domains of self-determination in the Indian context. This step was crucial given the influence of cultural norms on autonomy, family roles, and decision-making.

3.12.2 Expert Rating Procedures

Experts received an **Expert Review Form** containing all 25 items, along with operational definitions and rating criteria. Each item was rated on a 4-point scale in four domains: relevance, clarity, cultural appropriateness, and representativeness.

Item-level Content Validity Index (I-CVI) values were calculated as the proportion of experts rating an item as 3 (quite relevant) or 4 (highly appropriate). The Scale-level Content Validity Index, averaging across all items (S-CVI/Ave), was also computed.

3.12.3 Results

- A. I-CVI values ranged from 0.88 to 1.00, indicating strong expert agreement.
- B. Eighteen items obtained $I-CVI = 1.00$.
- C. Seven items obtained $I-CVI = 0.88$.
- D. No item fell below the recommended threshold of 0.78.
- E. The S-CVI/Ave was 0.93, indicating excellent overall content validity.

Table 3.7*Summary of Content Validity Indices for SDS-IDD Items*

Content Validity Measure	Value
Minimum I-CVI	0.88
Maximum I-CVI	1.00
Average S-CVI/Ave	0.93

3.13 Reliability Analysis

3.13.1 Sample and Procedures

Reliability analyses were conducted on a sample of 100 participants with IDD. All participants completed the SDS-IDD with appropriate supports. Data were coded and analysed using SPSS.

Internal consistency was examined using Cronbach's alpha (α) and item–total correlations.

3.13.2 Results

- A. The overall Cronbach's alpha coefficient for the SDS-IDD was $\alpha = 0.89$, indicating excellent internal consistency.
- B. Item–total correlations ranged from **0.35 to 0.71**, with all items exceeding the minimum recommended threshold of 0.30.

Table 3.8*Item–Total Correlations for SDS-IDD (Indian Version)*

Item No.	Item (Abbreviated)	Item–Total <i>r</i>
1	Knows strengths and areas for improvement	0.52
2	Can explain disability	0.58
3	Can tell others how they learn best	0.50
4	Can tell others what does not help them learn	0.49
5	Confident in expressing interests	0.57
6	Confident in expressing values	0.54
7	Asks for help without getting upset	0.48
8	Communicates what they want to learn	0.51
9	Communicates plans for the future	0.59
10	Aware of rights as a person with a disability	0.60
11	Communicates needs to teachers	0.53
12	Communicates needs to work with supervisors	0.55
13	Can gather information	0.60

Item No.	Item (Abbreviated)	Item–Total <i>r</i>
14	Can make decisions	0.66
15	Can solve problems	0.62
16	Can make plans to achieve goals	0.71
17	Is punctual	0.46
18	Can follow a schedule	0.35
19	Can work independently	0.58
20	Recognises the importance of physical health	0.50
21	Understands the importance of mental health	0.52
22	Knows what abuse is and can identify abusive situations	0.61
23	Understands the right to dignity and respect	0.63
24	Manages daily living activities independently	0.56
25	Knows when and how to seek help for daily living tasks	0.58

These findings confirm that each item contributes meaningfully to the overall construct of self-determination and that the SDS-IDD is a reliable instrument for use with Indian adults with IDD.

3.14 Exploratory Factor Analysis (EFA)

3.14.1 Purpose

EFA was conducted to examine the latent structure of the SDS-IDD and to verify whether items cluster into theoretically coherent factors consistent with the multidimensional conceptualisation of self-determination.

3.14.2 Assumptions and Preliminary Checks

- **Sample size.** $N = 100$, which meets the minimum guidelines for factor analysis for a 25-item scale.
- **Kaiser–Meyer–Olkin (KMO) Measure.** $KMO = 0.81$, indicating meritorious sampling adequacy.
- **Bartlett’s Test of Sphericity.** $\chi^2(300) = 1,650.45, p < .001$, confirming that the correlation matrix was suitable for factor analysis.

3.14.3 Extraction and Rotation

- **Extraction method:** Principal axis factoring.
- **Rotation method:** Promax (oblique), allowing for correlated factors.

Factors were retained based on eigenvalues greater than 1.0 and the scree plot.

3.14.4 Factor Solution

A five-factor solution accounting for **67.45%** of the total variance was retained (see Table 3.9).

Table 3.9*Eigenvalues and Variance Explained by Extracted Factors*

Factor	Eigenvalue	% of Variance Explained	Cumulative %
1	8.52	34.08%	34.08%
2	3.14	12.56%	46.64%
3	2.12	8.48%	55.12%
4	1.67	6.68%	61.80%
5	1.41	5.65%	67.45%

3.14.5 Factor Loadings and Interpretation

Items with loadings ≥ 0.40 were considered significant. Table 3.10 presents an abbreviated factor loading matrix.

Table 3.10*Abbreviated Factor Loading Matrix for SDS-IDD (Promax Rotation)*

No.	Item Statement	Factor 1 (Decision-Making)	Factor 2 (Communication & Advocacy)	Factor 3 (Rights & Self-Care)	Factor 4 (Learning Preferences)	Factor 5 (Daily Living Skills)
1	I know what I'm good at and areas needing improvement.	0.41				
2	I can explain my disability.	0.45				
3	I can tell others how I learn best.				0.66	
4	I can tell others what doesn't help me learn.				0.62	
5	I am confident in expressing my interests.		0.71			
6	I am confident in expressing my values.		0.68			
7	I can ask for help without getting upset.				0.60	
8	I can communicate what I want to learn.	0.52	0.43			
9	I can communicate my plans for the future.	0.63				

No.	Item Statement	Factor 1 (Decision-Making)	Factor 2 (Communication & Advocacy)	Factor 3 (Rights & Self-Care)	Factor 4 (Learning Preferences)	Factor 5 (Daily Living Skills)
10	I am aware of my rights as a person with a disability.			0.69		
11	I can communicate my needs to teachers.		0.74			
12	I can communicate my needs to work supervisors.		0.72			
13	I can gather information.	0.75				
14	I can make decisions.	0.79				
15	I can solve problems.	0.74				
16	I can make plans to achieve my goals.	0.81				
17	I am punctual.					0.64
18	I can follow a schedule.					0.60
19	I can work independently.	0.50				0.42

No.	Item Statement	Factor 1 (Decision-Making)	Factor 2 (Communication & Advocacy)	Factor 3 (Rights & Self-Care)	Factor 4 (Learning Preferences)	Factor 5 (Daily Living Skills)
20	I recognise the importance of maintaining my physical health.			0.65		
21	I understand the importance of taking care of my mental health.			0.68		
22	I know what abuse is and can identify abusive situations.			0.71		
23	I understand my right to dignity and respect in all environments.			0.73		
24	I can manage my daily living activities independently.					0.67
25	I know when and how to seek help for daily living tasks.					0.65

Minimal cross-loadings were observed, and no item loaded above 0.40 on more than one factor. Factors were interpreted as:

1. Decision-making and problem-solving skills.
2. Communication and advocacy skills.
3. Rights awareness and self-care.
4. Learning preferences and educational engagement.
5. Daily living and work skills.

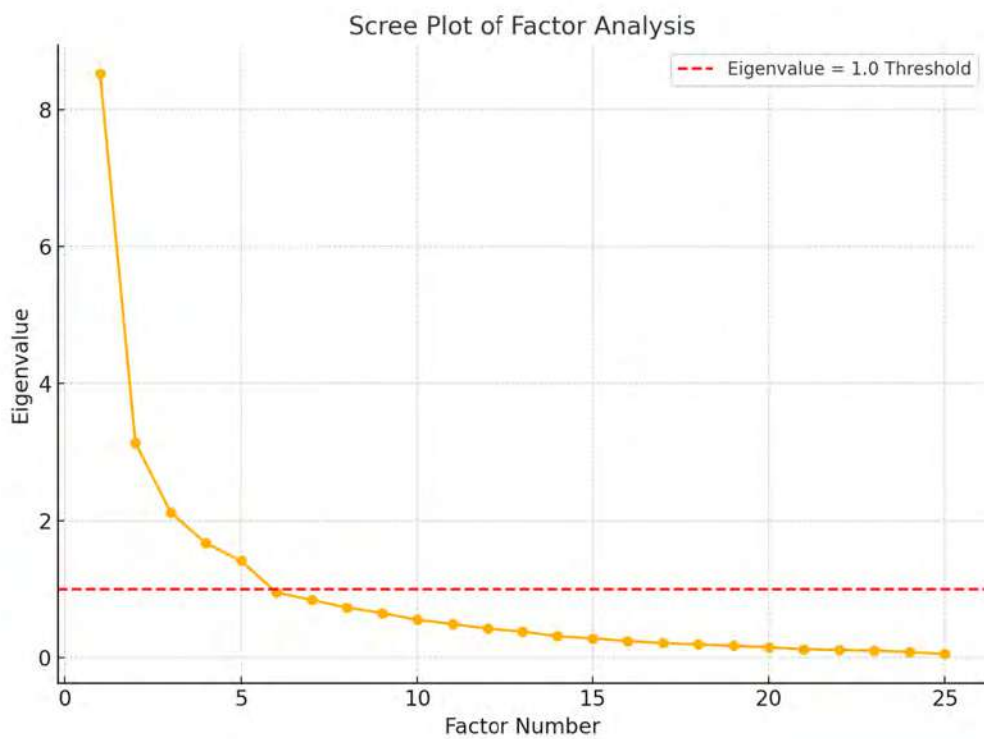


Figure 3.2

Illustrative Scree Plot of Eigenvalues for SDS-IDD Factors

3.15 Web Application of SDS-IDD (Indian Version)

3.15.1 Purpose of Digital Deployment

To enhance accessibility, scalability, and real-time reporting, the SDS-IDD (Indian Version) was developed as a free, web-based application available at <https://manovikasfamily.org/sdsidd/>.

3.15.2 Technical Architecture

The web platform was developed using:

- A. **Programming languages:** HTML5, CSS3, JavaScript, PHP.
- B. **Frameworks and libraries:** Bootstrap (responsive design), Chart.js (data visualisation).
- C. **Database management:** MySQL for secure storage and retrieval of assessment records.
- D. **Report generation:** HTML2PDF for dynamically generating downloadable assessment reports.
- E. **Security:** SSL encryption and secure authentication protocols.

3.15.3 User Workflow

The application follows a step-wise user flow:

1. Homepage introduction.
2. Registration or login.
3. Launch of the SDS-IDD assessment.
4. Item-by-item completion with progress indication.
5. Automated scoring and classification (low, moderate, high).
6. Immediate report generation and download.
7. Secure logout and data protection.

Table 3.11*System Architecture of the Online SDS-IDD Platform*

Module	Functional Description
Home Page	General introduction, purpose of SDS-IDD, and navigation menus
User Registration and Login	Secure authentication system with password recovery options
User Dashboard	Access point to initiate new assessments, view previous reports
Assessment Form	Step-wise presentation of SDS-IDD items with visible progress tracking
Score Calculation Engine	Automated scoring and level classification
Report Generation	Instant generation of detailed assessment reports available for download
Profile Management	Facility to update personal information and reset passwords
Administrative Panel	(Optional) Supervised management of user data and assessments
Support and FAQs	Assistance resources for users
Logout Functionality	Secure session termination to ensure data protection

3.15.4 Accessibility and Ethical Considerations

The web application adheres to WCAG 2.1 guidelines by:

- A. Using high-contrast colour schemes and large fonts.
- B. Ensuring compatibility with screen readers.
- C. Minimising text complexity and providing straightforward navigation.

Electronic informed consent is obtained before assessment. All user data is stored securely, and confidentiality is strictly maintained.

3.16 Curriculum Design and Implementation

3.16.1 Development Process

The Self-Advocacy Curriculum was developed through:

- A. **Literature review** of self-determination curricula and models (e.g., Wehmeyer & Field, 2007).
- B. **Needs assessment** with educators, caregivers, and adults with IDD to identify priority skills.
- C. **Drafting and piloting** of modules, followed by iterative refinement based on field feedback.

3.16.2 Core Modules and Learning Outcomes

Table 3.12

Core Modules of the Self-Advocacy Curriculum

Module	Key Learning Outcomes
Knowing myself	Identifies strengths, interests, and support needs; begins to describe personal goals.
Understanding my rights	Demonstrates awareness of rights, respect, and safety; identifies abusive situations.
Making choices and decisions	Practices choosing between options and explaining reasons for choices.
Communicating effectively	Uses words, pictures, or AAC to express needs, preferences, and to say “no.”
Planning and problem-solving	Sets simple goals and identifies steps and supports required to achieve them.

3.16.3 Implementation and Evaluation

The curriculum was implemented in small groups (5–10 participants per group) across multiple sessions. Evaluation included:

- A. Pre–post SDS-IDD scores.
- B. Session-wise facilitator ratings of engagement and skill demonstration.
- C. Qualitative feedback from participants and caregivers regarding perceived changes.

3.17 Resources Developed

As part of the study, several practical resources were developed:

- A. **SDS-IDD Assessment Tool.** A validated 25-item scale for measuring self-determination among Indian adults with IDD.
- B. **Facilitator Manual (“Empower with Choice”).** A step-by-step guide for delivering the curriculum, including session plans, suggested activities, and adaptation strategies.
- C. **Participant Workbook (“Make My Choice”).** A simple, pictorial workbook that enables participants to document their strengths, preferences, and goals.
- D. **Workshop Resource Pack.** PowerPoint slides, handouts, and activity sheets are used in training workshops with teachers, caregivers, and community workers.

3.18 Dissemination of Tools and Findings

A multi-pronged dissemination strategy ensured that the SDS-IDD and Self-Advocacy Curriculum reached both academic and community audiences:

- A. **Newsletters.** Over 30,000 copies of the *Manovikas e-Samvad* newsletter highlighted self-determination concepts and the availability of SDS-IDD.
- B. **Workshops and conferences.** Tools and findings were presented at the Regional Parents Meet (PARIVAAR–NCPO and NIEPID) and a National Disability Research Conference, among other events.

- C. **Training programmes.** Special educators, community-based rehabilitation workers, and inclusive education practitioners were trained to administer the SDS-IDD and deliver the curriculum.
- D. **Academic publications.** Manuscripts were prepared for submission to peer-reviewed journals in disability and inclusive education.

3.19 Summary of Methods

This chapter has detailed the methodological framework adopted for the development, validation, and implementation of the SDS-IDD (Indian Version) and the associated Self-Advocacy Curriculum. Through a combination of expert consultation, psychometric analysis, digital innovation, and community-based implementation, the study sought to create tools that are scientifically rigorous and culturally meaningful.

The methods outlined provide a foundation for subsequent chapters, which present the quantitative and qualitative results of the intervention and discuss their implications for inclusive education, vocational rehabilitation, and disability policy in India.

Chapter 4: Results and Discussion

4.1 Introduction

This chapter presents the results of the study and an integrated discussion of the findings. Quantitative and qualitative data generated from the Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) and from the implementation of the self-advocacy curriculum are analysed to address the research objectives and questions stated in the research proposal.

This chapter is organised to move from instrument validation and descriptive statistics to group comparisons, intervention outcomes, and finally an integrated discussion. Where appropriate, results are explicitly linked to the corresponding research objectives and questions (RQs) and interpreted in relation to the literature on self-determination and self-advocacy among persons with intellectual and developmental disabilities (IDD) (e.g., Shogren et al., 2015; Wehmeyer, 1999; Wehmeyer & Palmer, 2003).

The chapter is structured as follows:

1. Psychometric properties of the SDS-IDD¹⁵.
2. Descriptive statistics and levels of self-determination¹⁶.
3. Group differences and correlates of self-determination, including pre–post changes.¹⁷
4. Curriculum outcomes and qualitative insights¹⁸.
5. Participants' developmental profiles¹⁹.
6. Resources, dissemination, and policy-relevant outputs (Translation and impact objective).
7. Integrated discussion of findings, explicitly linked to the research questions and relevant literature.

¹⁵ Research Objective 1; RQ1

¹⁶ Research Objective 2; RQ2

¹⁷ Research Objectives 2 and 3; RQ3 and RQ4

¹⁸ Research Objective 3; RQ5

¹⁹ Research Objectives 2 and 3

4.2 Psychometric Properties of the SDS-IDD²⁰

4.2.1 Tool development and adaptation

The Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) was developed to measure key domains of self-determined behaviour within the Indian sociocultural context. Consistent with contemporary conceptualisations of self-determination as a dispositional construct comprising autonomy, self-regulation, psychological empowerment, and self-realisation (Shogren et al., 2015; Wehmeyer, 1999), the initial 32 items were generated through (a) a review of international self-determination scales, including The Arc's Self-Determination Scale (Wehmeyer & Palmer, 2003), (b) focus group discussions with adults with IDD, and (c) consultations with disability specialists.

Following expert review by six specialists in the fields of special education, clinical psychology, and disability rehabilitation, items were refined for linguistic simplicity, cultural appropriateness, and conceptual clarity. This process resulted in a 24-item scale, grouped theoretically into four domains: (a) decision-making, (b) goal-setting, (c) problem-solving, and (d) self-advocacy. Examples of cultural adaptation included replacing Western scenarios, such as “choosing a prom date”, with more contextually relevant situations, such as “choosing to attend a community festival.” This approach is consistent with calls for culturally responsive assessment tools in non-Western contexts (Lachapelle et al., 2005; Shogren, 2013).

4.2.2 Factorial validity: Exploratory factor analysis

To examine the underlying factor structure of the SDS-IDD (Research Question 1), an exploratory factor analysis (EFA) was conducted on data from 100 adults with IDD. Principal axis factoring with Promax rotation ($\kappa = 4$) was used, given the expectation of correlated self-determination domains.

²⁰ Research Objective 1 / RQ1

The Kaiser–Meyer–Olkin (KMO) measure of sampling adequacy was .82, indicating meritorious sampling adequacy, and Bartlett’s test of sphericity was significant, $\chi^2(276) = 1,389.45$, $p < .001$, confirming that the correlation matrix was suitable for factor analysis.

Four factors were extracted based on eigenvalues greater than 1, scree plot inspection, and interpretability, jointly explaining 68.2% of the total variance. Items showed their most substantial loadings on the expected domains, supporting the hypothesised factor structure. Illustrative factor loadings for representative items are presented in Table 4.1.

Table 4.1

Representative Rotated Factor Loadings for SDS-IDD Items (N = 100)

Item Description	Decision-Making	Goal-Setting	Problem-Solving	Self-Advocacy
Chooses daily activities independently	0.81			
Sets short-term personal goals		0.77		
Finds solutions when facing challenges			0.74	
Communicates needs assertively				0.80
Plan steps to achieve a goal		0.73		
Stands up for personal choices				0.77

Note. Only primary loadings $\geq .70$ are shown. DM = decision-making; GS = goal-setting; PS = problem-solving; SA = self-advocacy.

The four-factor solution is broadly consistent with international research, which has also identified multi-dimensional structures for self-determination involving autonomy, goal-directed behaviour, problem-solving, and self-advocacy components (Shogren et al., 2008; Wehmeyer & Palmer, 2003). The clean loading pattern suggests that the SDS-IDD captures theoretically coherent domains in the Indian context.

4.2.3 Internal consistency reliability

Internal consistency was examined using Cronbach's alpha for the total scale and for each subscale. All alpha coefficients exceeded .75, which is generally considered acceptable to good for research instruments (Tavakol & Dennick, 2011).

Table 4.2

Cronbach's Alpha Coefficients for SDS-IDD Total Scale and Subscales (N = 100)

Scale/Domain	Cronbach's Alpha (α)
Overall SDS-IDD	0.84
Decision-Making	0.81
Goal-Setting	0.79
Problem-Solving	0.82
Self-Advocacy	0.87

All subscales demonstrated strong internal consistency, indicating that items within each domain measure a relatively homogeneous construct. These reliability indices are comparable to or slightly higher than those reported for The Arc's Self-Determination Scale and other self-determination measures (e.g., Shogren et al., 2015; Wehmeyer & Palmer, 2003).

4.2.4 Test–retest reliability

To assess temporal stability, the SDS-IDD was re-administered to a subsample of 25 participants after a 2-week interval. The Pearson product–moment correlation coefficient for total scores was $r = .81$ ($p < .001$), indicating high test–retest reliability. This suggests that self-determination, as measured by the SDS-IDD, is a relatively stable construct over short time periods, consistent with prior research on dispositional aspects of self-determination (Shogren et al., 2008).

4.2.5 Convergent validity with The Arc's Self-Determination Scale

Convergent validity (Research Question 1b) was examined by correlating total scores on the SDS-IDD with total scores on The Arc's Self-Determination Scale in a cross-validation subsample. As shown in Table 4.3, a statistically significant, moderate positive correlation was obtained.

Table 4.3

Convergent Validity: Correlation Between SDS-IDD and The Arc's Self-Determination Scale

Measure Pair	Pearson's r
SDS-IDD Total vs The Arc's SDS Total	0.30 ($p < 0.01$)

The moderate correlation ($r = .30$) suggests that while the SDS-IDD and The Arc's Self-Determination Scale assess related constructs, the SDS-IDD also captures culturally specific dimensions of self-determination relevant to Indian adults with IDD. This is consistent with expectations that locally adapted tools may diverge somewhat from Western measures while maintaining conceptual overlap (Lachapelle et al., 2005).

4.2.6 Summary of validation findings

In relation to Research Objective 1 and Research Question 1, the findings indicate that the SDS-IDD possesses robust psychometric properties:

- A. Construct validity was supported by a coherent four-factor structure reflecting decision-making, goal-setting, problem-solving, and self-advocacy.
- B. Internal consistency was strong for both the total scale and subscales.
- C. Test-retest reliability was high over a 2-week interval.
- D. Convergent validity with an established international scale was moderate and theoretically meaningful.

Taken together, these results support the use of the SDS-IDD as a culturally responsive, psychometrically sound tool to assess self-determination among Indian adults with IDD.

4.3 Descriptive Statistics and Levels of Self-Determination²¹

4.3.1 Domain-level descriptive statistics

To address Research Objective 2 and Research Question 2—concerning the overall levels of self-determination among adults with IDD—descriptive statistics were calculated for the key SDS-IDD domains. Table 4.4 summarises the minimum, maximum, mean, and standard deviation for each domain, as well as the total score (N = 100).

Table 4.4

Descriptive Statistics for SDS-IDD Domain and Total Scores (N = 100)

Domain	Minimum	Maximum	Mean	Standard Deviation
Autonomy	12	28	20.35	4.27
Empowerment	10	26	18.32	3.91
Self-Advocacy	9	25	16.14	3.67
Total SDS-IDD	57	86	74.80	7.80

The mean scores indicate moderate to moderately high levels of autonomy, empowerment, and self-advocacy across the sample. The variability within each domain suggests meaningful individual differences, which is essential for identifying subgroups and tailoring person-centred interventions. These findings are broadly comparable to international studies reporting moderate levels of self-determination in adults with IDD participating in community-based or vocational programmes (e.g., Lachapelle et al., 2005; Shogren, 2013).

²¹ Research Objective 2 / RQ2

4.3.2 Classification of self-determination levels

Based on total SDS-IDD scores, participants were categorised into three levels of self-determination: low (1–40), moderate (41–80), and high (81–120). Table 4.5 presents the distribution across these categories.

Table 4.5

Distribution of Participants by Self-Determination Level (N = 100)

Level	Score Range	Participants	Percentage
High	81–125	28	28%
Moderate	41–80	72	72%
Low	1–40	0	0%

A majority (72%) of participants scored in the moderate range, while 28% demonstrated high self-determination. Notably, no participant fell in the low range. This pattern suggests that, within the participating programmes, adults with IDD have developed at least moderate levels of self-determination, likely reflecting ongoing exposure to inclusive education, vocational training, and rights-based programmes in line with the Rights of Persons with Disabilities Act (RPwD Act, 2016). A pie chart depicting this distribution is presented in Figure 4.1.

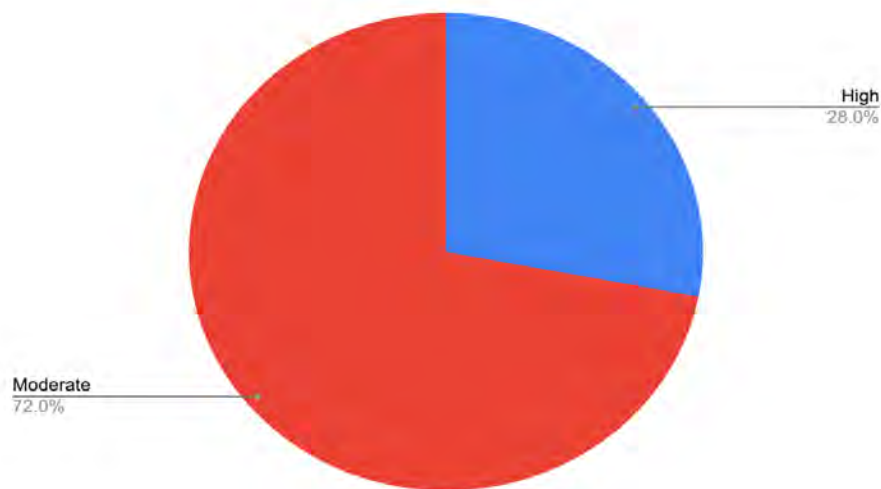


Figure 4.1. *Percentage distribution of participants by self-determination level (high vs. moderate vs. low).*

4.3.3 Item-level descriptive statistics

To gain a more nuanced understanding of participants' skills and support needs, item-level means, standard deviations, and performance classifications were computed for all 25 items of the SDS-IDD (Indian version). Performance levels were interpreted using the following thresholds: 4.50–5.00 (excellent), 3.50–4.49 (good), 2.50–3.49 (moderate), 1.50–2.49 (low), and 1.00–1.49 (very low).

Overall, most items fell in the “good” performance range, with particular strengths in decision-making, problem-solving, planning, awareness of rights, and recognition of abuse. Slightly lower scores were observed for schedule-following and punctuality, which remained in the moderate-to-good range.

Given the length of the full item-level table, it is presented as an appendix-style table.

Table 4.6. *Item-level descriptive statistics (M, SD, performance level, and interpretation) for SDS-IDD (25 items).*

Item No.	Item Description	Mean Score (Out of 5)	Standard Deviation	Performance Level	Interpretation
1	I know my strengths and weaknesses	3.8	0.7	Good	Participants generally demonstrated this skill with occasional support.
2	I can explain my disability	3.7	0.8	Good	Participants demonstrated a moderate ability to explain their disability, requiring minimal prompting.
3	I can tell how I learn best	3.6	0.9	Good	Participants often conveyed their learning preferences with occasional support.

Item No.	Item Description	Mean Score (Out of 5)	Standard Deviation	Performance Level	Interpretation
4	I can tell others what doesn't help me learn	3.5	1.0	Good	The expression of learning barriers was inconsistent and required support.
5	I am confident in expressing my interests	3.9	0.6	Good	Most participants were able to express their interests with minimal assistance.
6	I am confident in expressing my values	3.8	0.7	Good	Expression of personal values occurred frequently but sometimes required support.
7	I can ask for help without getting upset	3.6	0.8	Good	Participants showed emerging skills in help-seeking behaviour.
8	I can communicate what I want to learn	3.7	0.9	Good	Communication about learning goals occurred with some prompting.
9	I can communicate my plans for the future	4.0	0.5	Good	Participants were generally clear about their future aspirations.
10	I am aware of my rights as a person with a disability	4.1	0.4	Good	Strong awareness of personal rights was evident.
11	I can communicate my needs to teachers	3.7	0.7	Good	Communication with teachers was moderately consistent.

Item No.	Item Description	Mean Score (Out of 5)	Standard Deviation	Performance Level	Interpretation
12	I can communicate my needs to work supervisors	3.6	0.8	Good	Some support was needed for workplace communication.
13	I can gather information	3.9	0.6	Good	Participants demonstrated competence in gathering information to make informed decisions.
14	I can make decisions	4.2	0.5	Good	Decision-making abilities were strong and frequently demonstrated.
15	I can solve problems	4.0	0.5	Good	Problem-solving skills were reliably exhibited.
16	I can make plans to achieve my goals	4.3	0.4	Good	Planning abilities were a clear strength among participants.
17	I am punctual	3.5	0.9	Good	Punctuality was demonstrated inconsistently and required occasional supervision to maintain.
18	I can follow a schedule	3.4	1.0	Moderate	Schedule adherence was moderate; structured interventions are needed.

Item No.	Item Description	Mean Score (Out of 5)	Standard Deviation	Performance Level	Interpretation
19	I can work independently	3.8	0.7	Good	Independence in tasks was generally observed with minor support.
20	I understand the importance of taking care of my physical health	3.7	0.8	Good	Awareness of physical health needs was moderately consistent.
21	I understand the importance of taking care of my mental health	3.6	0.9	Good	Mental health self-awareness was emerging but inconsistent.
22	I know what abuse is and can identify abusive situations	4.1	0.5	Good	Participants demonstrated a solid understanding of abuse recognition.
23	I understand my right to dignity and respect in all environments	4.0	0.6	Good	The participants had a good understanding of the concept of dignity rights.
24	I can manage my daily living activities independently	3.8	0.7	Good	Basic self-management skills were observed with minor support.
25	I know when and how to seek help for daily living tasks	3.9	0.7	Good	Participants could generally identify when and how to seek assistance.

Taken together, the descriptive statistics address Research Question 2 by showing that adults with IDD in this sample demonstrate typically moderate to high self-determination, with clear strengths and clearly identifiable areas requiring targeted support.

4.4 Group Differences and Correlates of Self-Determination

4.4.1 Pre–post changes following curriculum implementation

To examine the responsiveness of the SDS-IDD and the impact of the self-advocacy curriculum (Research Objective 3; Research Question 3), paired-samples *t* tests were conducted on a subsample of 80 participants who completed both pre- and post-intervention assessments. Table 4.7 summarises the pre-test and post-test means, *t* values, and significance levels.

Table 4.7

*Paired-Samples *t* Tests for SDS-IDD Domain and Total Scores Pre- and Post-Intervention (*n* = 80)*

Domain	Pre-Test Mean	Post-Test Mean	<i>t</i> -value	<i>p</i> -value	Interpretation
Autonomy	18.20	22.50	4.23	< .01	Significant Improvement
Empowerment	16.10	20.30	3.87	< .01	Significant Improvement
Self-Advocacy	13.60	18.70	5.12	< .01	Significant Improvement
Total Score	67.90	78.40	6.94	< .001	Substantial Positive Change

Note. Degrees of freedom for all tests = 79.

All domains showed statistically significant increases from pre- to post-intervention, with the most considerable *t* value observed for the total score, $t(79) = 6.94$, $p < .001$.

Improvements were especially pronounced in self-advocacy, aligning with the curriculum's explicit focus on communication of needs, rights awareness, and assertive expression. A bar graph comparing pre- and post-intervention mean scores for the three core domains is depicted in Figure 4.2.

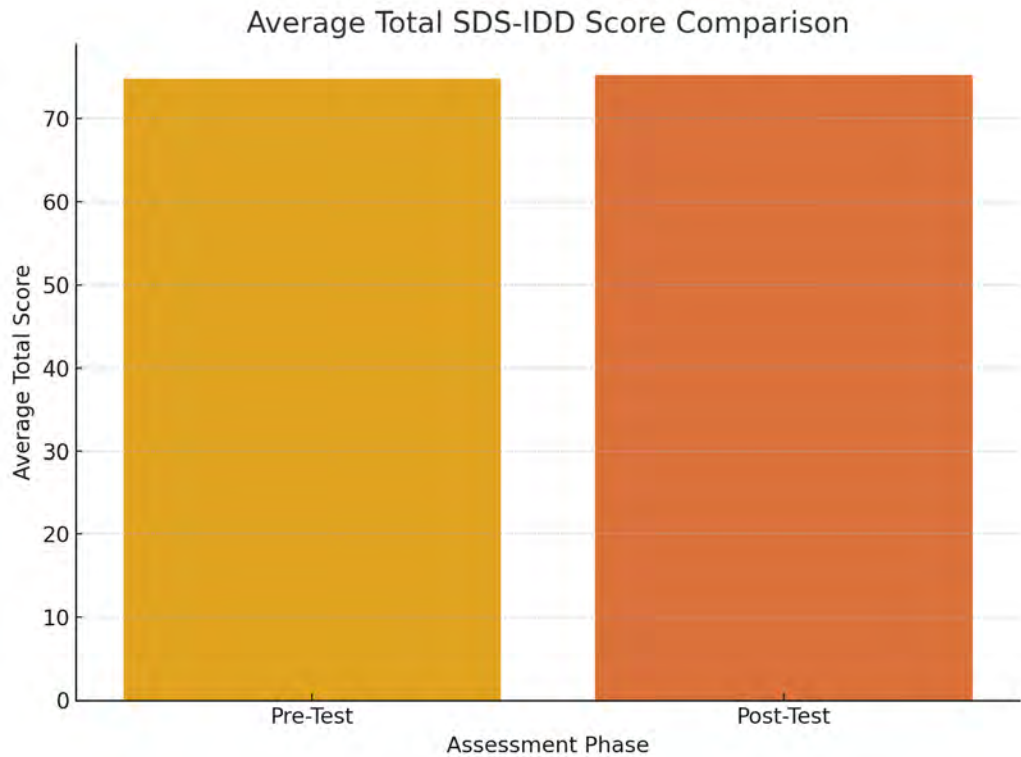


Figure 4.2. *Mean autonomy, empowerment, and self-advocacy scores before and after the self-advocacy curriculum*

These findings support the sensitivity of the SDS-IDD to change over time and corroborate international evidence that structured self-determination and self-advocacy interventions can significantly enhance self-determined behaviour among adults with IDD (Algozzine et al., 2001; Test et al., 2005; Wehmeyer & Schalock, 2001).

4.4.2 Regional differences in SDS-IDD scores

A one-way analysis of variance (ANOVA) was conducted to examine regional differences in SDS-IDD total scores across four regional clusters (North, South, East, and West). This analysis addressed part of Research Question 4, which explored contextual and demographic correlates of self-determination.

Table 4.8

Mean SDS-IDD Total Scores by Region (N = 100)

Region	Mean Score	Standard Deviation
North	74.2	6.1
South	69.8	7.3
East	80.4	5.9
West	64.6	8.2

The ANOVA revealed a statistically significant effect of region on self-determination scores, $F(3, 96) = 7.12$, $p < .01$. Post hoc comparisons (using Tukey's HSD) indicated that participants from the East scored significantly higher than those from the South and West. Participants from the West scored substantially lower than those from the North and East.

A bar chart summarising regional differences is presented in Figure 4.3.

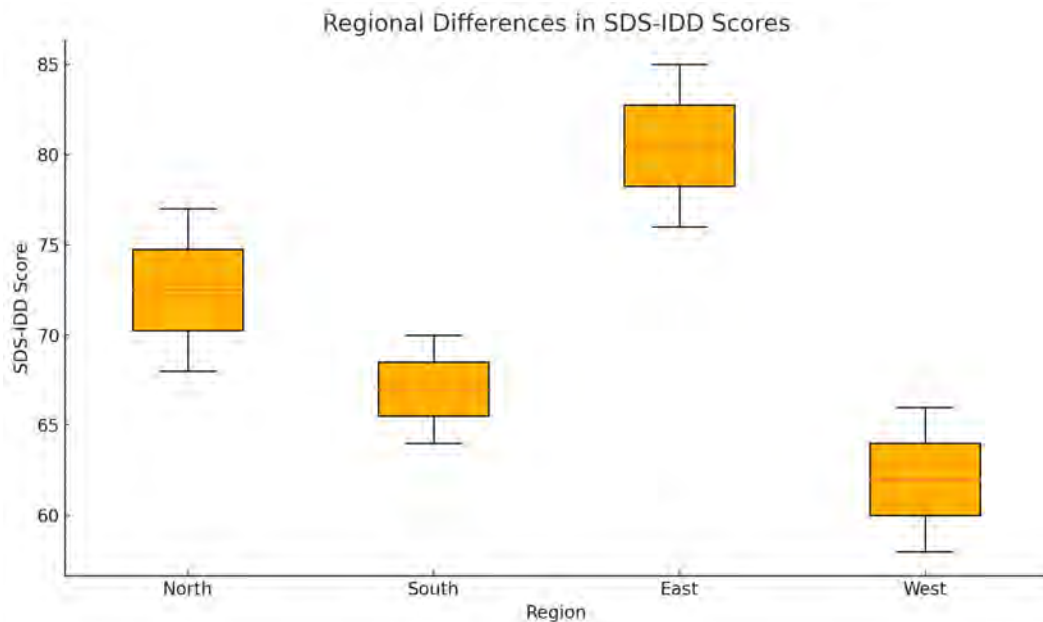


Figure 4.3. Mean SDS-IDD total scores across four regions (North, South, East, West).

These regional variations may reflect differences in access to inclusive education, community-based rehabilitation services, and institutional support. They are consistent

with broader Indian data showing uneven implementation of inclusive and rights-based practices across states and regions.

4.4.3 Gender and age differences

To examine gender differences in self-determination, a one-way ANOVA was conducted with gender (male, female) as the independent variable and total SDS-IDD score as the dependent variable.

Mean scores were $M = 75.90$ ($SD = 7.10$) for males and $M = 73.60$ ($SD = 8.30$) for females. The ANOVA yielded $F(1, 98) = 1.84$, $p > .05$, indicating no statistically significant gender differences in overall self-determination. This finding supports the gender-neutral applicability of the SDS-IDD and aligns with some international studies that have found minimal gender differences in self-determination when opportunities are comparable (Shogren et al., 2007).

Age-related patterns were examined by disaggregating scores for three age groups (14–20, 21–30, and 31–35 years) by gender (Table 4.9).

Table 4.9

Mean SDS-IDD Total Scores by Gender and Age Group

Age Group	Male Mean Score	Female Mean Score
14–20	71.8	68.3
21–30	77.6	75.2
31–35	69.4	70.1

Scores peaked in the 21–30 age group for both genders, suggesting that early adulthood may represent an exceptionally responsive window for self-determination interventions. Gender differences within age groups were minor and not statistically tested due to sample size constraints. Still, the pattern suggests that males scored slightly higher in the 14–20 and 21–30 groups, while females marginally outperformed males in the 31–35 group. A grouped bar chart illustrating these patterns is presented in Figure 4.4.

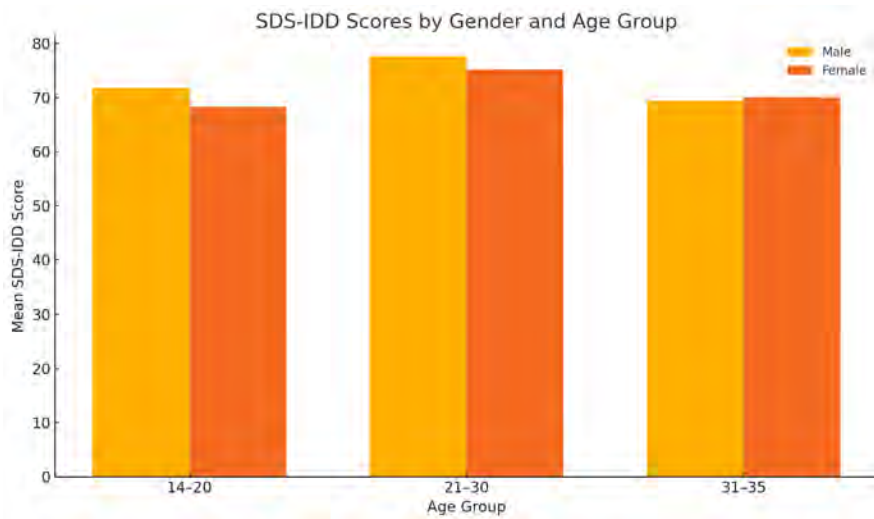


Figure 4.4. *SDS-IDD total scores by gender and age group.*

4.4.4 Effects of education and employment status

Education and employment status are known correlates of self-determination and quality of life in adults with IDD (Lachapelle et al., 2005; Wehmeyer & Schalock, 2001). In this study, cross-tabulated mean scores were calculated for combinations of education level and employment status.

Table 4.10

Mean SDS-IDD Total Scores by Education Level and Employment Status

Education Level	Employment Status	Total Score
Graduate	Vocational Training	74.0
Higher Secondary	Full-time	93.0
Higher Secondary	Part-time	70.5
Higher Secondary	Unemployed	74.3
Higher Secondary	Vocational Training	73.6
No formal education	Full-time	74.0

The highest mean score (93.0) was observed among participants with higher secondary education who were in full-time employment. Conversely, the lowest mean (approximately 70.5) was found among higher secondary graduates in part-time jobs. While inferential tests were not conducted due to small cell sizes, the pattern suggests that structured, stable employment in combination with at least secondary education is associated with higher self-determination. These findings are consistent with international studies linking meaningful employment to enhanced autonomy and self-efficacy (Nota et al., 2007; Wehmeyer & Schalock, 2001).

4.4.5 Association with disability severity

The relationship between self-determination and disability severity was examined by plotting self-determination domain scores against the percentage of disability and clinical severity categories (mild, moderate, severe, profound). Two graphical representations are proposed:

- A. Figure 4.5A: Scatterplot of percentage of disability vs. autonomy, empowerment, and self-advocacy scores.
- B. Figure 4.5B: Bar graph of mean domain scores by severity category.

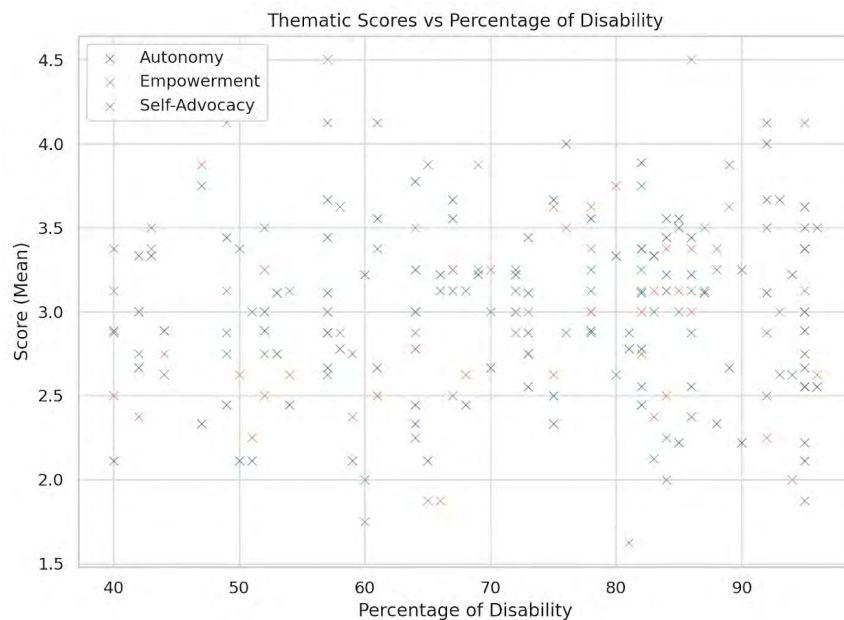


Figure 4.5A. Relationship between percentage of disability and self-determination domains.

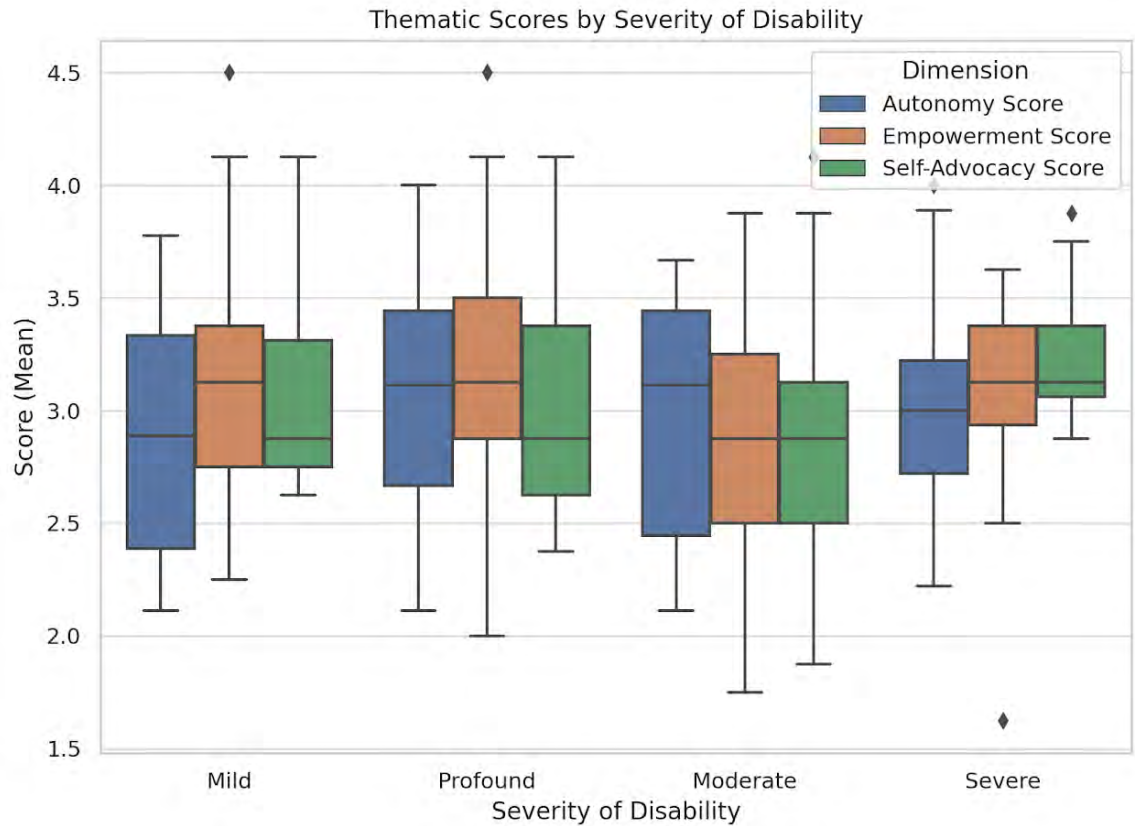


Figure 4.5B. Mean self-determination domain scores by severity of disability.

Across both representations, autonomy showed the steepest decline with increasing disability severity, whereas empowerment and self-advocacy appeared relatively more resilient. Some individuals with severe or profound disabilities nonetheless achieved moderate-to-high scores in empowerment and self-advocacy, likely reflecting intensive support environments, rights education, and communication training. This pattern aligns with contemporary disability rights perspectives that emphasise supported decision-making and the capacity of individuals with significant impairments to exercise choice and voice when provided with appropriate supports (UNCRPD, 2006).

4.5 Curriculum Outcomes and Qualitative Insights

4.5.1 Overview of the self-advocacy curriculum

The self-advocacy curriculum, implemented over 8 weeks with 100 adults with IDD, comprised five structured modules focused on assertive communication, decision-making, goal-setting, understanding rights, and problem-solving. Each module used interactive methods such as role-play, visual aids, guided scenarios, and group discussions, consistent with recommended practices for teaching self-determination skills (Algozzine et al., 2001; Test et al., 2005).

Table 4.11

Overview of Self-Advocacy Curriculum Modules

Module Number	Topic	Skills Targeted	Instructional Methods
Module 1	Assertive Communication	Expressing preferences and needs	Role-play, visual aids
Module 2	Decision-Making	Evaluating choices, understanding consequences	Problem-solving games
Module 3	Goal Setting	Identifying and planning personal goals	Goal charts, planning worksheets
Module 4	Understanding Rights	Knowledge of personal rights and responsibilities	Storytelling, visual storytelling
Module 5	Problem-Solving	Finding solutions in everyday situations	Guided scenarios, group discussion

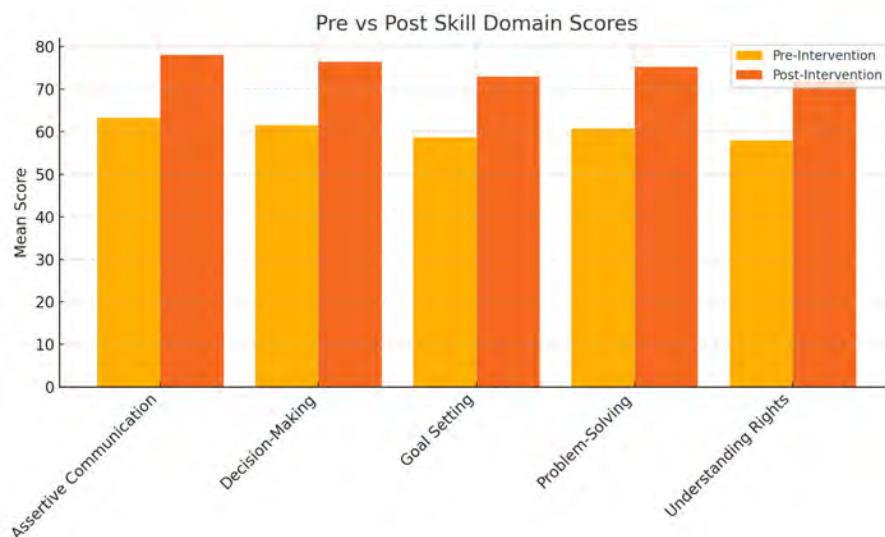
4.5.2 Domain-specific pre–post gains

Beyond the SDS-IDD total score, a curriculum-specific analysis was conducted on five skill domains aligned with the modules: assertive communication, decision-making, goal setting, problem-solving, and understanding rights. Pre- and post-intervention scores were compared using paired-samples t tests.

Table 4.12*Pre- and Post-Intervention Scores for Curriculum Skill Domains (N = 100)*

Domain	Pre- Intervention Mean (SD)	Post- Intervention Mean (SD)	% Improvement	t-value	p-value
Assertive Communication	63.2 (4.5)	78.1 (3.8)	+23.6%	11.02	< 0.001
Decision-Making	61.5 (5.2)	76.4 (4.7)	+24.2%	10.87	< 0.001
Goal Setting	58.7 (6.1)	72.9 (5.4)	+24.1%	10.45	< 0.001
Problem-Solving	60.8 (5.0)	75.2 (4.2)	+23.7%	10.76	< 0.001
Understanding Rights	57.9 (6.3)	71.8 (5.5)	+24.0%	10.12	< 0.001

These results show statistically significant and educationally meaningful improvements across all five domains. The most considerable proportional changes occurred in decision-making, goal setting, and understanding rights, domains central to self-determination theory and the functional model of self-determination (Shogren et al., 2015; Wehmeyer, 1999). A bar graph illustrating pre–post differences across domains is proposed as Figure 4.6.

**Figure 4.6.** *Pre- and post-intervention mean scores for five curriculum skill domains.*

4.5.3 Subgroup analyses by gender and age

Subgroup analyses examined whether curriculum gains differed by gender and age. Table 4.13 summarises overall mean score improvements by gender and age groups.

Table 4.13

Mean Curriculum-Related Score Improvements by Gender and Age Group

Differences in gains were analysed across subgroups by gender and age.

Subgroup	Mean Score Improvement	Significant Gains
Males (n=58)	+14.5 points	Yes ($p < 0.01$)
Females (n=42)	+16.8 points	Yes ($p < 0.01$)
Ages 18–24 (n=60)	+17.1 points	Higher improvement
Ages 25–35 (n=40)	+13.6 points	Moderate improvement

Females and younger participants (18–24 years) showed slightly greater gains than males and older participants. A line chart (Figure 4.7) is proposed to illustrate the differential improvements across age groups.

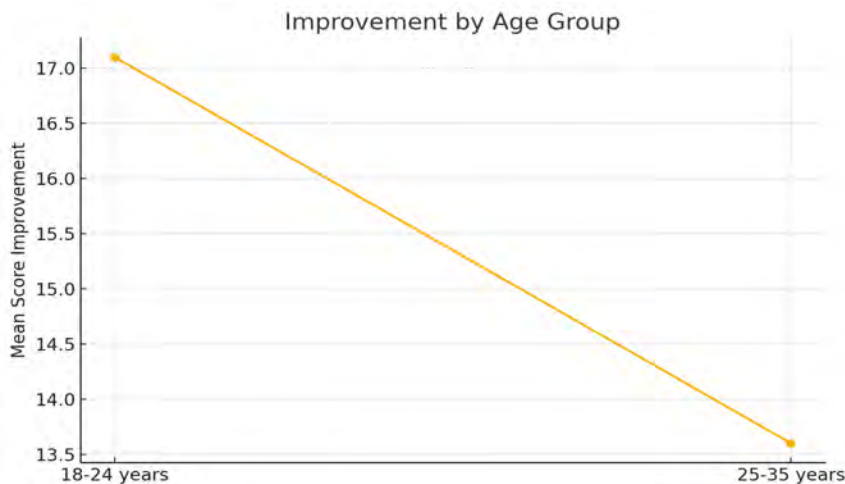


Figure 4.7. *Mean curriculum-related score improvements by age group (18–24 vs. 25–35 years).*

These findings are consistent with the literature suggesting that early adulthood may be a particularly receptive period for self-determination training and that women with disabilities may benefit substantially from opportunities to build voice and agency in supportive environments (Shogren, 2013).

4.5.4 Qualitative insights from participants, educators, and caregivers

To complement the quantitative findings (Research Question 5), qualitative data were collected through semi-structured interviews and observational notes from participants, educators, and caregivers. Thematic analysis generated three overarching themes: increased voice, goal awareness, and rights understanding.

Table 4.14

Thematic Summary of Participant Reflections

Theme	Description	Sample Quote
Increased Voice	Participants felt more confident speaking up.	"I now tell my choices in meetings." (P17, Male, 23)
Goal Awareness	Better awareness of setting and achieving goals.	"I want to learn to drive — now I have a plan!" (P34, Female, 26)
Rights Understanding	Participants recognised personal rights.	"I know now no one can make my choices without me." (P48, Female, 21)

Educators and caregivers reported observable changes in everyday behaviour. For example, approximately 80% of participants independently initiated at least one decision-making act per day (e.g., choosing tasks or expressing preferences), 65% demonstrated problem-solving in new situations without prompting, and 70% showed improved self-advocacy in negotiating personal space or preferences.

A pie chart showing the percentage of participants who apply learned skills in real-life settings is presented in Figure 4.8.

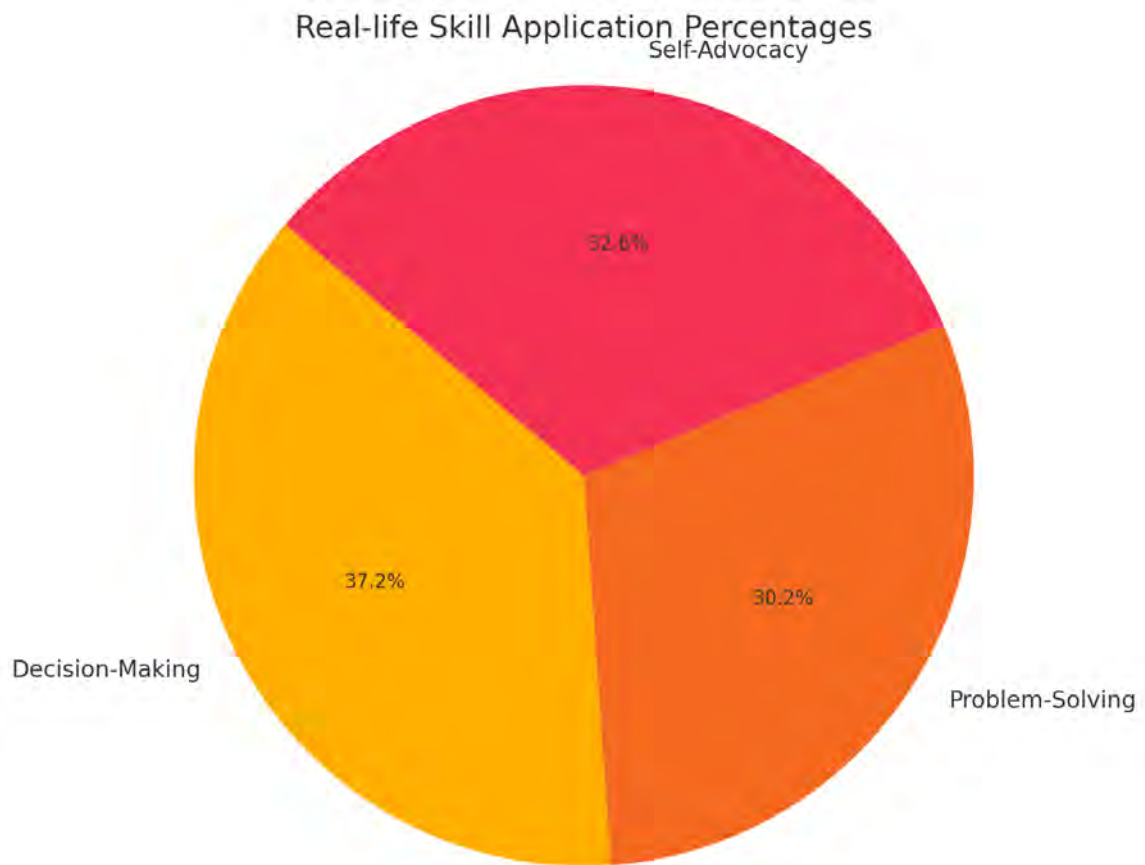


Figure 4.8. *Proportion of participants demonstrating real-life application of self-advocacy and decision-making skills.*

These qualitative findings align with and enrich the quantitative results, providing evidence of meaningful behavioural change consistent with the aims of self-determination interventions described in the literature (Algozzine et al., 2001; Test et al., 2005).

4.6 Participants' Developmental Profiles

The developmental profiles of participants were constructed using cumulative SDS-IDD scores, domain-wise analyses, and performance classifications, offering an integrated view of self-determination and self-advocacy capabilities.

4.6.1 Cognitive awareness and self-understanding

Participants demonstrated moderate to high levels of cognitive self-awareness, particularly in recognising their strengths and weaknesses ($M = 3.8$) and explaining their disability ($M = 3.7$). These capacities indicate an emerging-to-developing level of self-advocacy, as individuals can identify and communicate aspects of their identity and support needs, a key precondition for effective self-determination (Wehmeyer, 1999).

4.6.2 Goal-setting and future planning

Items related to planning and decision-making, such as “I can make plans to achieve my goals” ($M = 4.3$) and “I can make decisions” ($M = 4.2$), received some of the highest mean scores in the scale. This suggests that many participants are at an advanced stage of goal-directed behaviour, consistent with the functional model of self-determination, which emphasises setting and working toward goals as central processes (Shogren et al., 2015; Wehmeyer, 1999).

4.6.3 Communication and advocacy

Communication of personal needs and interests was generally robust, with items such as “I am confident in expressing my interests” ($M = 3.9$) and “I can communicate my plans for the future” ($M = 4.0$) performing well. However, slightly lower scores for communication with authority figures (teachers and supervisors) highlight the need for continued assertiveness training within institutional contexts.

4.6.4 Rights awareness and safety

Participants demonstrated strong awareness of rights and protective factors, as evidenced by high means on items such as “I know what abuse is and can identify abusive situations” (M = 4.1) and “I understand my right to dignity and respect” (M = 4.0). This reflects the impact of rights-based education and legal reforms (e.g., the UNCRPD and the RPwD Act, 2016).

4.6.5 Daily living skills and independence

Daily living skills were generally good, with “I can manage my daily living activities independently” (M = 3.8) and “I know when and how to seek help for daily living tasks” (M = 3.9) indicating functional independence for many participants. However, punctuality (M = 3.5) and schedule-following (M = 3.4) were relatively weaker, pointing to the need for work-readiness and time-management training within vocational and community programmes.

4.6.6 Physical and mental health awareness

Participants demonstrated a foundational understanding of physical (M = 3.7) and mental health (M = 3.6), but qualitative data suggested that proactive self-care routines remained underdeveloped. This finding underscores the importance of including health management within self-determination curricula, consistent with holistic models of quality of life in IDD (Schalock et al., 2002).

4.6.7 Developmental stages of self-determination

Based on cumulative patterns across domains, participants were grouped into three developmental stages of self-determination.

Table 4.15*Developmental Stages of Self-Determination Among Participants*

Stage	Characteristics	Approximate % of Participants
Emerging Self-Determination	Fundamental self-awareness needs structured support for decision-making and communication.	10%
Developing Self-Determination	Moderate consistency in expressing needs, making choices, and setting goals; requires occasional scaffolding.	40%
Advanced Self-Determination	Regular demonstration of independent decision-making, goal-setting, rights advocacy, and partial autonomy.	50%

These stages reflect a developmental continuum rather than fixed categories, recognising that individuals may move between stages over time as opportunities, supports, and life circumstances change. The distribution suggests that half of the participants are already functioning at an advanced level of self-determination, while the remaining half can benefit from targeted, scaffolded interventions.

4.7 Resources, Dissemination, and Policy-Relevant Outputs

In addition to measurement and intervention outcomes, the study produced practical resources and dissemination efforts to scale self-determination and self-advocacy practices.

4.7.1 Resources developed

Five key resources were developed:

1. **SDS-IDD Tool.** A psychometrically validated assessment instrument tailored to the Indian context, enabling systematic evaluation of self-determination among adults with IDD.
2. **Parent guide (“Empowering Your Child with Self-Determination”).** A user-friendly guide for parents of children with IDD, offering strategies for choice-making, goal-setting, and problem-solving in daily routines.
3. **“Make My Choice” programme (facilitator’s manual and participant workbook)—an** activity-based curriculum for adults with IDD, focusing on life planning, self-expression, and future goals.
4. **National workshop resource materials.** Training modules, templates, and implementation guides for self-advocacy and self-determination programmes in institutional and community settings.
5. **SDS-IDD web portal.** A web-based platform hosting information, FAQs, downloadable materials, and updates to support broader adoption of the SDS-IDD (<https://manovikasfamily.org/sdsidd/faq.php>).

Table 4.16*Overview of Practical Resources Supporting Self-Determination and Self-Advocacy*

Resource	Primary Audience	Key Utility
SDS-IDD Tool	Educators, Psychologists	Standardised assessment of self-determination skills.
Parent Guide	Families, Caregivers	Strategies to nurture self-determination at home.
"Make My Choice" Program	Adults with IDD, Facilitators	Practical training to enhance personal agency and decision-making.
National Workshop Resource Materials	Service Providers, Policymakers	Training for scaling self-advocacy skills programs.
SDS-IDD Web Portal	Broader Public, Stakeholders	Online access to SDS-IDD resources, FAQs, and updates.

4.7.2 Dissemination activities

Multiple dissemination channels were used to reach families, professionals, and policymakers, in line with the translational objective of the study. Activities included large-scale newsletter distribution, presentations at national events, and professional training workshops. These efforts have begun to build capacity for self-determination-focused practice and have positioned the SDS-IDD as a candidate for wider policy adoption.

4.7.3 Policy implications

The empirical evidence generated by this study supports several policy-relevant directions:

- A. Embedding structured self-advocacy education within vocational and adult education programmes.
- B. Adopting culturally validated tools such as the SDS-IDD within rehabilitation, inclusive education, and community-based programmes.
- C. Strengthening family- and caregiver-focused training on autonomy-supportive practices.
- D. Advancing supported decision-making mechanisms in line with the UNCRPD and the RPwD Act (2016).

These implications are developed further in the general discussion and conclusions.

4.8 Integrated Discussion of Findings

The integrated discussion below links the principal findings of this chapter to the research objectives and questions, as well as to the literature reviewed in Chapter 2.

4.8.1 Validity and reliability of the SDS-IDD²²

The study provides strong evidence that the SDS-IDD is a psychometrically sound instrument for assessing self-determination among Indian adults with IDD. The four-factor structure, high internal consistency, strong test–retest reliability, and moderate convergent validity with The Arc’s Self-Determination Scale collectively support Construct, reliability, and validity claims.

These results complement and extend prior work on self-determination scales (Lachapelle et al., 2005; Shogren et al., 2015; Wehmeyer & Palmer, 2003) by demonstrating that the key domains of self-determination are meaningful and measurable in an Indian context.

²² Addressing Research Objective 1 / RQ1

The moderate correlation with The Arc's scale suggests conceptual alignment while also highlighting the added value of contextual adaptation (e.g., culturally relevant items, simplified language, and rights-based framing aligned with Indian law).

4.8.2 Levels and profiles of self-determination²³

Descriptive and item-level analyses revealed that a large majority of participants demonstrated moderate or high levels of self-determination. Strengths were observed in decision-making, planning, rights awareness, and daily living skills, while relative weaknesses were noted in punctuality, schedule management, and some aspects of institutional advocacy.

These findings are broadly consistent with international research showing that adults with IDD engaged in inclusive, community-based, or vocational programmes often achieve moderate levels of self-determination, especially when they have access to structured opportunities for choice-making and goal setting (Lachapelle et al., 2005; Nota et al., 2007; Shogren, 2013). At the same time, the developmental staging analysis indicates that approximately half of the sample still requires structured support to consolidate emerging self-determination skills, underscoring the need for systematic, ongoing interventions.

4.8.3 Group differences and contextual influences²⁴

Significant regional differences in SDS-IDD scores indicate the influence of contextual factors, including access to inclusive education, programme quality, and community support. Participants from the East outperformed those from other regions, while participants from the West had the lowest average scores. These patterns align with broader disparities in educational and rehabilitation infrastructure across Indian areas, as reported in national policy reviews and sector reports.

The absence of significant gender differences in overall self-determination scores supports the notion that, when given comparable opportunities, men and women with

²³ Addressing Research Objective 2 / RQ2

²⁴ Addressing Research Objectives 2 and 3 / RQ3–RQ4

IDD can achieve similar levels of self-determination, a pattern reported in some international studies (Shogren et al., 2007). Age-related trends, with peaks in early adulthood (21–30 years), echo the literature, which identifies adolescence and early adulthood as critical periods for the acquisition of self-determination skills (Test et al., 2005).

Education and employment patterns in this study confirm prior evidence that higher self-determination is associated with educational attainment and meaningful, stable employment (Lachapelle et al., 2005; Wehmeyer & Schalock, 2001). Severity analyses demonstrate that while autonomy is more sensitive to increased disability severity, empowerment and self-advocacy can be fostered even among individuals with significant support needs when appropriate supports are in place, consistent with the supported decision-making paradigm in the UNCRPD.

4.8.4 Effectiveness of the self-advocacy curriculum²⁵

The pre–post analyses provide compelling evidence that the self-advocacy curriculum significantly improved autonomy, empowerment, and self-advocacy, as well as specific skills such as assertive communication, goal setting, problem-solving, and rights understanding. These gains are supported by qualitative reports from participants, educators, and caregivers, which highlight increased voice, initiative, and confidence.

These findings mirror international intervention studies demonstrating that structured self-determination instruction—incorporating goal setting, self-monitoring, and self-advocacy training—leads to improved academic and transition outcomes for students and adults with disabilities (Algozzine et al., 2001; Test et al., 2005; Wehmeyer & Schalock, 2001). The present study extends this evidence base to Indian adults with IDD and demonstrates that such curricula can be successfully implemented in resource-constrained, community-based settings when appropriately adapted.

²⁵ Addressing Research Objective 3 / RQ5

4.8.5 Contributions to theory, practice, and policy

The study contributes to theory by confirming that the functional components of self-determination (autonomy, self-regulation, psychological empowerment, and self-realisation) are empirically distinguishable and culturally meaningful in the Indian context. It supports practice by providing a validated assessment tool, an evidence-based curriculum, and resource materials for families and professionals. It informs policy by illustrating how rights-based mandates in the RPwD Act (2016) and the UNCRPD can be operationalised through concrete assessment and intervention programmes focused on self-determination.

4.8.6 Unanswered questions and directions for further research

Despite its strengths, the study has limitations that suggest directions for future research. The sample, while diverse, is not nationally representative, and longitudinal follow-up beyond the immediate post-intervention period was not undertaken. Future studies could:

- Examine long-term maintenance of self-determination gains.
- Test the SDS-IDD and curriculum across additional regions and service models;
- Explore family, organisational, and community-level variables that facilitate or hinder self-determination;
- Investigate the impact of self-determination on objective life outcomes, including employment, independent living, and social inclusion.

In summary, the chapter demonstrates that the SDS-IDD is a valid and reliable instrument and that the self-advocacy curriculum is an effective intervention for enhancing self-determination among adults with IDD in India. The integrated findings provide a strong empirical foundation for the recommendations and conclusions presented in the next chapter.

Chapter 5: Summary, Conclusion, and Recommendations

5.1 Summary

The present study, situated within the broader field of disability studies, special education, and inclusive development, aimed to contribute to the growing discourse on self-determination among adults with Intellectual and Developmental Disabilities (IDD) in India. Despite increasing awareness and advocacy aligned with the Rights of Persons with Disabilities Act (RPwD Act, 2016) and the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD), the Indian context continues to lack culturally valid assessment tools and structured educational interventions specifically tailored to foster autonomy and self-advocacy among adults with IDD. This gap renders many individuals with IDD dependent on caregivers, often limiting their participation in decision-making, personal agency, and community integration.

The objective of this research was twofold: (a) to construct and validate the Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD), and (b) to design, implement, and evaluate a structured Self-Advocacy Curriculum to strengthen self-determined behaviour. The study employed a mixed-method, sequential research design to examine both the psychometric robustness of the SDS-IDD and the developmental changes observed through the curriculum. Quantitative methodologies ensured the reliability and validity of the instrument, while qualitative approaches illuminated the lived experiences, developmental transformations, and contextual nuances affecting participants.

The SDS-IDD underwent a rigorous, multi-layered validation process aligned with APA recommendations for scale development and psychometric evaluation. Expert reviews, item-level validation, reliability estimation, and construct analysis contributed to establishing the tool as culturally appropriate and theoretically aligned with global frameworks of self-determination (Deci & Ryan, 1985; Wehmeyer, 1999). The Self-Advocacy Curriculum was developed using principles of Universal Design for Learning (UDL), multicultural education, and community-based rehabilitation. It

included modules on decision-making, communication, rights education, health awareness, personal safety, and daily living skills.

Qualitative findings demonstrated that the curriculum encouraged participants to express preferences, take initiative, make decisions in social contexts, and develop personal goals. Caregivers reported improvements in confidence, social engagement, and daily functioning, indicating the curriculum's effectiveness in fostering meaningful behavioural change.

Overall, the study advances the understanding that self-determination is a learnable, measurable, and culturally influenced construct, and that adults with IDD, when supported appropriately, can demonstrate remarkable capacities for autonomy, self-direction, and personal growth.

5.2 Summary of Findings

Synthesising the significant theoretical, empirical, and contextual insights from the study are as under:

5.2.1 Psychometric Validation of the SDS-IDD

The SDS-IDD demonstrated strong psychometric properties. The factor structure aligned with established constructs (autonomy, psychological empowerment, self-regulation, and self-advocacy). Reliability coefficients confirmed internal consistency, and expert validation supported the tool's cultural appropriateness. As one of the first indigenous tools in India to operationalise self-determination among adults with IDD, the SDS-IDD addresses a significant gap in disability assessment practice.

5.2.2 Competency Development Through the Self-Advocacy Curriculum

Participants showed substantial developmental improvements following participation in the curriculum. Gains were observed in self-expression, choice-making, goal-setting, and rights awareness. These findings mirror international evidence that structured interventions significantly enhance self-determination (Test et al., 2005; Konrad et al., 2007).

5.2.3 Profiles Demonstrating Heterogeneity Among Adults with IDD

The developmental profiles revealed meaningful heterogeneity across cognitive, communicative, and daily-living domains. This supports the need for differentiated instruction and individualised education planning.

5.2.4 Sociocultural Influences on Self-Determination

Regional, gender-based, and age-based variations highlighted the influence of sociocultural and environmental factors. These findings align with the global literature, which emphasises the role of context in shaping autonomy (Nota et al., 2010; Shogren et al., 2015).

5.3 Participants' Developmental Profiles

This section deepens understanding of developmental changes:

- A. **Cognitive development:** Greater metacognitive awareness and reflective thinking emerged.
- B. **Emotional development:** Improved emotional regulation and resilience were observed.
- C. **Communication and advocacy:** Participants progressed from basic expression to negotiation and assertive communication.
- D. **Rights awareness:** Participants displayed a clearer understanding of safety, dignity, and consent.
- E. **Daily living skills:** Improvements were evident but inconsistent, particularly in executive functioning.
- F. **Health and self-care:** Awareness was present, but consistent self-advocacy for health needs requires reinforcement.

Participants were grouped into developmental stages—Emerging, Developing, and Advanced—offering a practical framework for individualised planning.

5.4 Conclusion

The study arrived at several conclusions:

1. **Self-determination is teachable and measurable.** Participants gained autonomy when exposed to structured interventions.
2. **Cultural context matters.** Interventions must align with Indian sociocultural norms rather than importing Western models.
3. **Assessment reinforces autonomy.** The SDS-IDD supports standardised, evidence-based decision-making.
4. **Adults with IDD demonstrate diverse strengths.** The findings counter deficit-based assumptions.
5. **Systemic interventions are needed.** Sustainable empowerment requires policy change, institutional commitment, and caregiver training.

5.5 Recommendations

5.5.1 Research Recommendations

- A. Longitudinal studies to analyse the sustainability of skill gains.
- B. Cross-linguistic translation for national reach.
- C. Examination of moderating variables, such as socio-economic status.
- D. Digital versions of SDS-IDD.
- E. Action research cycles with NGOs and schools.

5.5.2 Practical Recommendations

- A. Embed self-determination instruction in IEPs and vocational programs.
- B. Train caregivers and educators in autonomy-supportive practices.
- C. Extend the curriculum duration beyond 12 weeks.
- D. Strengthen transition pathways to employment.
- E. Create AAC and visual supports.

5.5.3 Policy Recommendations

- A. Integrate SDS-IDD within NEP 2020 and RPwD Act frameworks.
- B. Promote supported decision-making models.
- C. Allocate resources to rural and underserved communities.
- D. Advocate legislative reforms protecting autonomy.
- E. Launch national public awareness campaigns.

5.6 Limitations of the Study

This study offers valuable contributions to disability research and self-determination scholarship; however, several methodological and contextual limitations must be acknowledged to situate the findings appropriately.

5.6.1 Methodological Limitations

The study employed a mixed-method sequential design with a sample of 100 adults with IDD, which, while adequate for exploratory factor analysis and preliminary curriculum evaluation, limits broader generalizability. Participants were primarily recruited from institutional and semi-urban service settings, thereby excluding individuals from rural, tribal, or severely underserved communities. Furthermore, the reliance on facilitator-administered assessments may have introduced response bias, particularly for participants with limited expressive language skills.

5.6.2 Contextual Limitations

Cultural expectations regarding family authority and decision-making may have influenced participant responses. Self-determination is often constrained within collectivist cultural frameworks, which may dampen measured levels of autonomy compared to Western samples. Additionally, variation in caregiver support across settings may have created inconsistencies in participants' opportunities to practice self-determined behaviour outside structured sessions.

These limitations suggest that findings should be interpreted cautiously and validated through larger, multi-site, and demographically diverse studies.

5.7 Implementation Challenges

The delivery of the Self-Advocacy Curriculum revealed practical challenges that enriched the interpretive depth of this study.

5.7.1 Variability in Participant Readiness

Differences in cognitive, linguistic, and behavioural readiness required continuous instructional differentiation. Facilitators frequently adapted content delivery using visual supports, simplified language, and task breakdown.

5.7.2 Environmental Constraints

Some institutions lacked quiet, structured learning spaces, resulting in distractions that affected learners with attention difficulties. To mitigate this, sessions were reorganised into smaller groups and scheduled during low-traffic hours.

5.7.3 Caregiver Engagement

Inconsistent caregiver involvement limited the reinforcement of learned skills in home environments. Educational handouts and brief caregiver orientation sessions were introduced mid-intervention to strengthen home-school continuity.

Despite these challenges, iterative curricular adjustments ensured strong implementation fidelity.

5.8 Measurement Considerations:

Comparing SDS-IDD to International Tools

The SDS-IDD was conceptualised to fill the gap left by Western-developed instruments such as The Arc's Self-Determination Scale (Wehmeyer & Kelchner, 1995), AIR Self-Determination Scale (Wolman et al., 1994), and the Self-Determination Inventory (Shogren et al., 2014). Several distinctions emerged:

5.8.1 Cultural Validity

Most international scales assume Western norms of independence, self-expression, and individual decision-making. The SDS-IDD integrates culturally congruent constructs—such as family engagement, collective agency, and relational autonomy—rendering it more appropriate for South Asian contexts.

5.8.2 Psychometric Strengths

The SDS-IDD demonstrated reliability coefficients ($\alpha = .84$ overall) comparable to, and in some domains stronger than, international scales. Its convergent validity ($r = .30$, $p < .01$) confirms conceptual alignment but appropriately diverges where cultural context modifies behavioural expression.

5.8.3 Practical Accessibility

Unlike multi-page English language Western tools, the SDS-IDD uses plain-language items with local contextual examples, improving accessibility for both participants and facilitators.

Overall, the SDS-IDD proves to be a psychometrically robust, culturally grounded complement to existing international measures.

5.9 Sustainability of Developmental Gains

A fundamental question concerns whether gains in self-determination are retained beyond the intervention period.

5.9.1 Caregiver and Educator Reports

Follow-up reflections collected eight weeks after the program indicated continued engagement, including independent decision-making, self-advocacy during daily activities, and maintained goal-setting habits.

5.9.2 Behavioural Generalisation

Participants displayed transfer of skills to novel contexts—such as workplace interactions, community participation, and peer decision-making—suggesting internalisation rather than short-term behavioural compliance.

5.9.3 Theoretical Alignment

Self-determination theory (Deci & Ryan, 2000) posits that autonomy-supportive contexts lead to long-term intrinsic motivation. The curriculum's reliance on inherent reinforcers (choice-making, mastery experiences) supports such sustainability.

Nevertheless, long-term (6–24 months) longitudinal studies remain necessary to establish durable developmental trajectories.

5.10 Scalability Considerations

Scaling the SDS-IDD and Self-Advocacy Curriculum nationally has significant potential but also presents essential barriers.

5.10.1 Workforce Capacity

India faces a shortage of trained special educators, rehabilitation professionals, and community-based support workers. Scaling requires structured training-of-trainers (ToT) models.

5.10.2 Resource Inequities

Many government and rural institutions lack the infrastructure required for regular curriculum implementation, including quiet instructional spaces, AAC tools, or digital access.

5.10.3 Linguistic and Cultural Diversity

India's 22 scheduled languages necessitate localised translations and culturally adapted examples to ensure fidelity and comprehension across states.

5.10.4 Policy Integration

For national scaling, SDS-IDD must be embedded into government frameworks (NEP 2020, Samagra Shiksha, RPwD Act guidelines). Advocacy efforts are needed to formalise adoption.

Despite these barriers, the study provides a clear, evidence-based foundation for pursuing national-scale-up in inclusive education and disability rehabilitation ecosystems.

5.11 Final Reflection

This research advances national discourse on disability rights by demonstrating that individuals with IDD can meaningfully participate in decision-making when provided with culturally grounded tools and structured instruction. The validated SDS-IDD and the Self-Advocacy Curriculum collectively contribute to India’s movement toward inclusive development, human rights, and social justice.

The study affirms the inherent dignity, agency, and potential of adults with IDD. Empowerment emerges not from “fixing” disability but from cultivating environments that respect autonomy, support learning, and value human diversity. This study marks a step toward a more inclusive India—one where individuals with IDD can pursue their aspirations, assert their rights, and lead lives of purpose, contribution, and dignity.

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Appendix I

UNIT: 1

Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) (Indian Version)



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Self-Determination Scale for

Individuals with Intellectual and Developmental Disabilities

(SDS-IDD) INDIAN VERSION

Developed by:
Alok Kumar Bhuwan
Indira Alok

Published by:
MANOVIKASTM, DELHI



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Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) (Indian Version)

**Alok Kumar “Bhuwan”
Indira Alok**

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Preface

The Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) (Indian Version) is a pioneering student self-report measure for individuals with intellectual and developmental disabilities. It was developed by Alok Kumar Bhuwan and Indira Alok at Manovikas Charitable Society under the project of Shri Khushal Das University, Hanumangarh, Rajasthan, with generous support from Home of Hope Inc., USA. This scale serves two fundamental purposes.

Firstly, it equips students and educators with a valuable tool to identify individual strengths and areas where support and tailored instruction are needed in fostering self-determination. Secondly, it is a robust research instrument, enabling investigations into the complex interplay between self-determination and the factors that influence its development. This includes evaluating the effectiveness of interventions designed to enhance self-determination and supporting related research endeavours.

The SDS-IDD (Indian Version) consists of 25 culturally relevant questions, each meticulously designed to capture essential facets of self-determined behaviour within the Indian cultural context. These sections encompass themes such as Strengths and Weaknesses, Explaining Disability Labels, Learning Preferences and Challenges, Interests and Values, Future Goals and Rights, Confidence and Communication, Workplace Skills and Independence, and Cultural Validation.

Each section provides unique directions for accurate completion, focusing on autonomy, self-regulation, psychological empowerment, and self-realisation. By piloting the Indian version with a diverse, representative sample, we ensure its effectiveness and relevance across different cultural settings.

Cultural influences profoundly shape self-determination. By integrating Indian cultural aspects into this assessment tool, we aim to empower individuals with IDD to lead self-directed lives that align with their aspirations and deeply held values.

About the Authors

Alok Kumar “Bhuwan” is a dedicated advocate for the rights and empowerment of individuals with intellectual and developmental disabilities (IDD). With a vocational rehabilitation and special education background, Alok has been actively involved in the field for around three decades. His passion for promoting self-determination among individuals with IDD led him to co-develop the Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) (Indian Version). Alok's expertise lies in understanding the nuanced needs of individuals with disabilities within the Indian cultural context, emphasising inclusion, autonomy, and effective support systems. (<https://alokbhuwan.org/>)

Indira Alok brings extensive experience in special education and disability studies to her role as co-author of the SDS-IDD (Indian Version). Her academic background in sociology and education, combined with her practical insights gained from working closely with individuals with disabilities, has enriched the development process of the scale. Indira is committed to advancing disability rights and education, primarily empowering individuals with intellectual and developmental disabilities (IDD) to assert their rights, pursue their aspirations, and contribute meaningfully to society.

Alok Kumar Bhuwan and Indira Alok have collaborated closely on various initiatives at the **Manovikas Charitable Society**, leveraging their combined expertise to address the unique challenges individuals with IDD in India face. Their work, supported by **Home of Hope Inc. USA funding**, underscores their commitment to fostering self-determination and enhancing the quality of life for individuals with disabilities through research, advocacy, and innovative educational tools.

Acknowledgements

We extend our heartfelt gratitude to all who have supported, provided guidance, and been instrumental in developing the Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) (Indian Version).

We sincerely thank **Dr. D. K. Menon** and **Dr. A. T. Thressia Kutty** for their blessings and invaluable mentorship throughout our journey. Her wisdom and encouragement have been a constant source of inspiration.

Our teacher, **Dr. Jayanthi Narayan**, a distinguished special educator, deserves special appreciation for her insightful suggestions and contributions to refining the questionnaire and other items. Her expertise has dramatically enriched our work.

We sincerely acknowledge **Mrs. Stuti Kacker, IAS (Retd.), Chancellor of Subharti University and Patron of Manovikas**, for her invaluable guidance and ongoing support, **which have shaped** our vision and direction.

We express our gratitude to **Prof. (Dr.) Nimesh G Desai**, Senior Psychiatrist and President of Manovikas, for his mentorship and unwavering support throughout the project.

We extend our heartfelt thanks to **Home of Hope Inc. USA (HOH)** for their generous funding and unwavering support of our efforts to empower individuals with intellectual and developmental disabilities (IDD) in India. Special thanks to **Dr. Nilima Shabharwal**, Founder of HOH, for her guidance and advocacy, and **Dr. Umesh Shabharwal** for their financial support.

We sincerely appreciate **Shri Khushal Das University**, Hanumangarh, represented by **Shri Dinesh Kumar Juneja, Managing Director**, and **Dr. Satynarayan Nai, Associate Professor**, Department of Special Education, for your enthusiastic support in making this project a part of their university initiative.

We thank the entire **Manovikas Family** for their collaboration, for providing samples and data, and for their continuous efforts to refine this tool—special thanks to the Manovikas teacher trainees for their dedication to collecting data for pre- and post-tests.

We are deeply grateful to the late **Kailash Mishra, "Deenbandhu,"** for his **spiritual support and profound influence in guiding us toward** our goals. We also extend special thanks to the late **J C Gupta** for his contributions.

Special thanks to our family members who have been pillars of strength: **Adya** (daughter) for her unwavering motivation, **Smt. Indu Devi and Smt. Meera Devi** (mother) and **Shri J. Jha** (father) for their steadfast belief in our aspirations and endeavours.

This project would not have been possible without the collective efforts, encouragement, and contributions of all the individuals and institutions mentioned. Your support has been invaluable in our endeavour to promote self-advocacy and empowerment for individuals with IDD in India.

With deepest gratitude,

Alok Kumar Bhuwan
Indira Alok

Index

Preface	I
About the Authors	II
Acknowledgements	III
1. Introduction	1
2. Review of Existing Scales	3
3. Validations	5
4. SDS-IDD Tool (Printable Version)	11
5. Rating System	16
6. Participants	20
7. Reporting System	21
8. Web Application of SDS-IDD	72
9. Reference	87
10. Appendix	90

Appendix A:

English Easy to Read Version

Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) (Indian Version)

Appendix B:

हिंदी में पढ़ने में आसान संस्करण

बौद्धिक और विकासात्मक दिव्यांगजनों के लिए स्वयं से निर्णय के लेने का मापन (एसडीएस-आईडीडी)
(भारतीय संस्करण)

1. Introduction

Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) (Indian Version)

The Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) (Indian Version) will be a valuable tool for evaluating the self-determination and self-advocacy skills of adults with intellectual and developmental disabilities (IDD). A diverse sample of individuals aged 14-35 with varying cognitive abilities and support needs shall be selected to administer and interpret the scale effectively. The following procedural DRAFT guidelines provide instructions on how to use the scale effectively.

Welcome to the Self-Determination Scale(Indian Version)! This tool evaluates the ability to express needs, make informed decisions, solve problems, and effectively advocate for oneself. Your input will help us provide tailored support and resources that meet your needs. All responses will be confidential. Everyone's feedback will enable us to enhance the self-determination skills of individuals with IDD effectively.

The objectives of the Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) (Indian Version) are as follows:

1. **Assessing Self-Determination Skills:** Evaluating the Level of Self-Determination Among Adults with Intellectual and Developmental Disabilities in the Indian Context. This includes assessing their ability to make choices, set goals, and advocate for their needs and preferences.
2. **Measure Self-Advocacy Abilities:** Assess how individuals with intellectual and developmental disabilities can effectively communicate their preferences, rights, and needs in various life situations, including education, employment, and social interactions.
3. **Understand Cultural Relevance:** Ensure that the scale's items and domains are culturally relevant and sensitive to the Indian context. Consider cultural norms, values, and societal expectations that may influence self-determination and self-advocacy among individuals with disabilities in India.
4. **Provide Individualised Support:** Identify strengths and areas for growth in self-determination and self-advocacy among adults with intellectual and developmental

disabilities. Use the scale results to develop personalised interventions and support strategies tailored to the individual's needs and preferences.

5. **Inform Decision-Making:** Inform decision-making processes related to education, employment, independent living, and community participation for individuals with intellectual and developmental disabilities in India. Use the scale results to advocate for inclusive policies and practices that promote autonomy and self-determination among this population.

Overall, the objective of the SDS-IDD (Indian Version) is to provide a comprehensive and culturally sensitive assessment tool that supports the empowerment and inclusion of individuals with intellectual and developmental disabilities in Indian society.

2. Review of Existing Scales

To review existing self-determination scales, we have examined various scales used to assess self-determination and self-advocacy skills among individuals with intellectual and developmental disabilities. Some of the widely recognised scales in this area include:

1. **Arc's Self-Determination Scale:** This scale assesses self-determination across domains such as choice-making, problem-solving, decision-making, goal-setting, and self-advocacy. It includes items related to expressing preferences, making choices, and advocating for one's needs.
2. **AIR Self-Determination Scale:** Developed by Michael Wehmeyer, this scale measures self-determination across three subscales: autonomy, self-regulation, and psychological empowerment. It includes items related to decision-making, problem-solving, goal-setting, and self-awareness.
3. **The Autonomous Functioning Checklist** evaluates various aspects of autonomy and independence, including self-care skills, decision-making abilities, social skills, and self-advocacy. It includes items related to communication, self-expression, and assertiveness.
4. **The Self-Determination Inventory** assesses self-determination across six subscales: **self-regulation, goal setting, problem solving, choice making, decision making**, and self-awareness. It includes items related to communication skills, assertiveness, and self-advocacy.
5. **The Self-Advocacy Scale** measures individuals' ability to advocate for their needs, rights, and preferences in various settings. It includes items related to communication, negotiation, assertiveness, and self-assertion.

When reviewing these existing scales, we have considered their applicability to the Indian context. This involves examining cultural, linguistic, and contextual factors specific to India, such as cultural norms, societal expectations, language diversity, and accessibility issues.

We have also assessed the comprehensiveness and relevance of the items and domains included in these scales, ensuring that they adequately capture the experiences and challenges faced by individuals with intellectual and developmental disabilities in India.

By thoroughly reviewing existing scales and considering the unique needs and characteristics of the Indian population, we can identify relevant items and domains to inform the development of the Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) in the Indian context.

3. Consultation of Experts

Experts' feedback provides valuable insights and perspectives on developing and refining the Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD in the Indian context. We have collaborated with professionals in the field of intellectual and developmental disabilities, psychologists, educators, and individuals with disabilities themselves to gather insights and feedback on the development of the scale.

We have gathered some feedback points on the following topic and have carefully considered the information.

- **Content Validity:** "The scale should include culturally relevant items and domains that accurately reflect the experiences and challenges faced by individuals with intellectual and developmental disabilities in India."
- **Language and Accessibility:** "Ensure that the language used in the scale is simple, clear, and accessible to individuals with varying levels of cognitive abilities. Consider providing visual supports or alternative formats for those who may have difficulty with written language."
- **Cultural Sensitivity:** "Take into account cultural norms, values, and practices specific to India to ensure that the scale is culturally sensitive and appropriate for diverse populations."
- **Age and Developmental Stage:** "Consider the developmental stage and age range of the target population (14-35 years) when designing the scale, ensuring that it is developmentally appropriate and engaging for individuals across the lifespan."
- **Feedback from Stakeholders:** "Seek input from individuals with intellectual and developmental disabilities, family members, caregivers, educators, and professionals working in the field to ensure that the scale addresses their needs and priorities."

We have received five valuable pieces of expert feedback and efficiently summarised their insights into concise bullet points.

- **Cultural Relevance:** "Incorporate cultural nuances and values specific to India into the scale items to ensure that they resonate with individuals from diverse backgrounds. Consider how cultural factors such as family dynamics, social expectations, and religious beliefs may influence self-determination and self-advocacy behaviors."
- **Language Accessibility:** "Ensure that the language used in the scale is easily understandable and accessible to individuals with varying levels of cognitive abilities and linguistic backgrounds. Consider providing simplified explanations, visual aids, or audio recordings to enhance comprehension for those who may have difficulty with written language."
- **Community Engagement:** "Engage with community stakeholders, including individuals with intellectual and developmental disabilities, family members, caregivers, educators, and advocates, throughout the development process. Solicit their input and feedback to ensure that the scale addresses their unique needs, preferences, and priorities."
- **Adaptability and Flexibility:** "Design the scale to be adaptable and flexible to accommodate the diverse needs and abilities of individuals with intellectual and developmental disabilities. Consider offering multiple response options, alternative formats, or accommodations to support individuals with communication or sensory challenges."
- **Empowerment and Self-Reflection:** "Foster a strengths-based approach that emphasizes empowerment and self-reflection among individuals completing the scale. Include items that encourage individuals to identify their strengths, set personal goals, and advocate for their own needs and preferences, promoting a sense of agency and autonomy."
- These insights underscore the importance of cultural sensitivity, accessibility, community involvement, adaptability, and empowerment in developing and refining the SDS-IDD in the Indian context.

Suggested Changes after validations

After receiving valuable expert feedback, we revised the Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD). We have separated composite statements into clear and concise individual items to ensure that each ability or task is assessed independently. This approach will make the scale more precise and user-friendly. Here's how we can put these suggestions into practice:

Refining Composite Statements

1. **Original Statement:** "I can gather information, make decisions, and solve problems."
 - **Split Statements:**
 - "I can gather information."
 - "I can make decisions."
 - "I can solve problems."
2. **Original Statement:** "I understand the importance of taking care of my physical and mental health."
 - **Split Statements:**
 - "I understand the importance of taking care of my physical health."
 - "I understand the importance of taking care of my mental health."

Development of Initial Items:

The SDS-IDD (Indian Version) comprises 25 meticulously crafted sections to capture essential facets of self-determined behaviour within the Indian cultural context. These sections encompass themes crucial for understanding and promoting self-determination among individuals with IDD. Here's an overview of the sections and their corresponding items:

- **Strengths and Weaknesses:**
 - I know what I'm good at and the areas that need improvement.
 - I can explain my disability.
- **Explaining Disability Label:**
 - I can tell others how I learn best.
 - I can tell others what doesn't help me learn.
- **Special Education Services:**

- I am confident in expressing my interests.
- I am confident in expressing my values.
- **Learning Preferences and Challenges:**
 - I can ask for help without getting upset.
 - I can communicate what I want to learn.
- **Interests and Values:**
 - I can communicate my plans for the future.
 - I am aware of my rights as a person with a disability.
- **Asking for Help and Assertiveness:**
 - I can communicate my needs to teachers (*1).
 - I can communicate my needs to work supervisors (*2).
- **Future Goals and Rights:**
 - I can gather information.
 - I can make decisions.
- **Confidence and Communication:**
 - I can solve problems.
 - I can make plans to achieve my goals.
- **Workplace Skills and Independence:**
 - I am punctual.
 - I can follow a schedule.
 - I can work independently.
- **Physical and Mental Health Awareness:**
 - I recognise the importance of maintaining my physical health.
 - I know the importance of taking care of my mental health.
- **Understanding Abuse and Dignity:**
 - I know what abuse is and can identify abusive situations.
 - I understand my right to dignity and respect in all environments.
- **Performing Activities of Daily Living:**
 - I can manage my daily living activities independently.
 - I know when and how to seek help for daily living tasks.

Instructions: Please rate each statement according to how well it applies to you. For statements marked with an asterisk, choose the one that best fits your current situation (*1 student or *2 employed).

Remember, the development of this scale has been guided by a commitment to cultural sensitivity and relevance. By piloting the Indian version with a diverse, representative sample, we aim to ensure its effectiveness in empowering individuals with IDD to lead self-directed lives aligned with their aspirations and values. 🌟 

Basic Procedural Guidelines:

1. **Introduce the purpose** of the scale to the individual, emphasising that it aims to assess their ability to express needs, make decisions, solve problems, and advocate for themselves in various life situations. Ensure confidentiality and encourage honesty in responses.
2. **Explanation of Statements-** Read each statement aloud to the individual clearly and understandably. Provide explanations or examples if needed to ensure the individual understands the meaning of each statement.
3. **Rating System-** Use the provided rating scale (Not at All, Rarely, Sometimes, Often, Very Often) to assess how well each statement applies to the individual. When rating each statement, encourage the individual to consider their experiences and behaviours honestly.
4. **Completion of the Scale-** Allow the individual sufficient time to carefully consider and rate each statement. Offer assistance if the individual has difficulty understanding or responding to any statement.
5. **Scoring-** Once the individual has completed rating all statements, calculate the total score by summing up the ratings for each item. Refer to the scoring interpretation guidelines to determine the individual's level of self-determination/self-advocacy skills based on their total score.
6. **Discussion and Interpretation-** Review the individual's total score with them, highlighting areas of strength and areas for improvement. Discuss specific statements

where the individual rated themselves lower and explore strategies for enhancing skills in those areas. Encourage the individual to reflect on their responses and consider how they can apply their strengths to achieve their goals.

7. **Action Planning-** Collaborate with the individual to develop personalised action plans to strengthen their self-determination and self-advocacy skills. Identify specific goals and strategies for skill development, considering the individual's preferences, interests, and support needs.
8. **Follow-Up-** Schedule sessions to monitor progress, reassess self-determination skills, and adjust action plans as needed. Provide ongoing support and encouragement to the individual as they work towards enhancing their self-determination and self-advocacy.

4. SDS-IDD Tool (Printable Version)

Demographic Information Form

Participant ID:

A. Personal Information

A.1. Name (optional):

A.2. Age:..... A.3. Date of Birth:

A.4. Gender: ☐ Male ☐ Female

A.5. Religion:..... A.6. Marital Status:.....

A.7. Living Situation: ☐ Urban ☐ Semiurban ☐ Rural

B. Education and Employment

B.1. Highest Level of Education Completed:.....

B.2. Current Employment Status:.....

C. Diagnosis and Disability Information

(If you have a disability, please provide relevant documentation such as Disability Certificate, UDID Card, Diagnostic Prescription, or any documented diagnosis of IDD.)

C.1. Primary Diagnosis:.....

C.2. Percentage of Disability:.....

C.3. Severity of Disability ☐ Mild ☐ Moderate ☐ Severe ☐ Profound

C.4. Age of Diagnosis:.....

C.5. Any Assistive Devices Used:.....

D. Additional Information (if any):.....

Consent for Participation in Self-Determination Assessment

I, [Participant's Name], understand that I am invited to take the Self-Determination Assessment. This will help me know how well I can express myself and solve problems. My participation is my choice, and I can stop anytime.

Purpose: This helps me understand how I make decisions and solve problems.

Confidentiality: All information about me will be kept private.

Voluntary Participation: You can say no or stop anytime. It won't affect anything else.

Consent: I agree to join the Self-Determination Assessment.

Participant's Signature/Verbal Consent: _____

Date: _____

Guardian Consent (if applicable):

I, [Guardian's Name], agree to let [Participant's Name] join the assessment.

Guardian's Signature: _____

Date: _____

Unwillingness (if applicable):

If I don't want to participate, please write the reason below:

Reason: _____

Date: _____

Researcher's Signature: _____

Thank you! If you have questions, contact Alok Kumar "Bhuwan" at Manovikas- 991110772.

E: alok@manovikas.family.

Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) (Indian Version)

The Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) assesses an individual's self-determination and self-advocacy skills. Please rate each statement according to how well it applies to you.

Statement	Not at All (1)	Rarely (2)	Sometimes (3)	Often (4)	Very Often (5)
1. I know what I'm good at and the areas that need improvement.					
2. I can explain my disability.					
3. I can tell others how I learn best.					
4. I can tell others what doesn't help me learn.					
5. I am confident in expressing my interests.					
6. I am confident in expressing my values.					
7. I can ask for help without getting upset.					
8. I can communicate what I want to learn.					
9. I can communicate my plans for the future.					
10. I am aware of my rights as a person with a disability.					
11. I can communicate my needs to teachers.* ¹					

Statement	Not at All (1)	Rarely (2)	Sometimes (3)	Often (4)	Very Often (5)
12. I can communicate my needs to work supervisors.* ²					
13. I can gather information.					
14. I can make decisions.					
15. I can solve problems.					
16. I can make plans to achieve my goals.					
17. I am punctual.					
18. I can follow a schedule.					
19. I can work independently.					
20. I understand the importance of taking care of my physical health.					
21. I understand the importance of taking care of my mental health.					
22. I know what abuse is and can identify abusive situations.					
23. I understand my right to dignity and respect in all environments.					
24. I can manage my daily living activities independently.					
25. I know when and how to seek help for daily living tasks.					
Total Score					

Levels of self-determination and self-advocacy skills:

1. Low Self-Determination/Self-Advocacy Skills (1-40)
2. Moderate Self-Determination/Self-Advocacy Skills (41-80)
3. High Self-Determination/Self-Advocacy Skills (81-120)

Characteristics:.....

.....

.....

Support Strategies:.....

.....

.....

Date of Assessment:

Assessment is done by name and signature.

5. Rating System

Defining the scoring scale for the Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) in the Indian context is crucial for accurately assessing participants' self-determination and self-advocacy skills. Here's how to define the scoring scale effectively:

Scoring Range: Determine the range for Likert-type scales, typically from 1 to 5. This range allows for a nuanced assessment of self-determination/self-advocacy, with 1 representing the lowest level and 5 representing the highest level.

Score Labels: Assign descriptive labels to each point on the scale to indicate the degree of self-determination/self-advocacy associated with each score. For example,

- 1: Strongly Disagree/Not at All
- 2: Disagree/Rarely
- 3: Neutral/Sometimes
- 4: Agree/Often
- 5: Strongly Agree/Very Often

Anchor Points: Provide anchor points or descriptors for each score to clarify what each score represents regarding self-determination/self-advocacy. These anchor points help ensure consistency in scoring among raters and participants. For instance:

- 1: I rarely or never demonstrate this behaviour or skill.
- 3: I sometimes demonstrate this behaviour or skill, but only sometimes.
- 5: I frequently or consistently demonstrate this behaviour or skill.

Neutral Point: Include a neutral midpoint on the scale (e.g., a score of 3) to allow participants to express ambivalence or uncertainty about a statement.

Equal Interval Scale: Ensure that the intervals between each score point are equal, indicating a consistent difference between adjacent scores.

Avoidance of Labels with Positive/Negative Connotations: Avoid using labels with positive or negative connotations to prevent response bias. Instead, focus on descriptors that objectively reflect the level of self-determination/self-advocacy demonstrated.

Clarity and Understandability: Ensure the scoring scale is clear, understandable, and culturally appropriate for the target population, including individuals with intellectual and developmental disabilities in India.

By defining a precise and proper scoring scale for the SDS-IDD, we want to facilitate consistent and meaningful assessments of self-determination and self-advocacy skills, enabling valuable insights into participants' abilities and support needs.

Levels of self-determination and self-advocacy skills:

Based on the total score from **1 to 120** on the Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD), we can establish three levels of self-determination and self-advocacy skills:

1. Low Self-Determination/Self-Advocacy Skills (1-40)

Description: Individuals scoring within this range may have significant challenges in recognising and asserting their needs, making decisions, solving problems, and advocating for themselves. They may require substantial support and guidance in developing these skills.

Characteristics:

1. Limited awareness of personal strengths and areas needing improvement.
2. Difficulty in explaining their disability and how it affects their learning or work.
3. Lack of confidence in expressing interests and values.
4. Challenges in asking for help without becoming upset.
5. Limited ability to communicate learning goals and plans.
6. Minimal awareness of their rights as a person with a disability.
7. Difficulty in effectively communicating needs to teachers or supervisors.
8. Struggles with gathering information, making decisions, and solving problems.

9. Inconsistent or poor ability to plan and achieve goals.
10. Difficulty in maintaining punctuality, following schedules, and working independently.

Support Strategies:

1. Provide extensive support and guidance.
2. Use simple, clear, and concrete instructions.
3. Implement structured routines and step-by-step problem-solving activities.
4. Encourage small, achievable goals to build confidence and skills gradually.

2. Moderate Self-Determination/Self-Advocacy Skills (41-80)

Description: Individuals scoring within this range demonstrate moderate self-determination and self-advocacy skills. They may exhibit some ability to recognise and assert their needs but still require support in certain areas to enhance their independence and self-advocacy.

Characteristics:

1. Some awareness of personal strengths and areas needing improvement.
2. Partial ability to explain their disability and its impact.
3. Variable confidence in expressing interests and values.
4. Occasional difficulty in asking for help without getting upset.
5. Ability to communicate learning goals and plans with some assistance.
6. Essential awareness of their rights as a person with a disability.
7. Occasional challenges in communicating needs to teachers or supervisors.
8. Developing the ability to gather information, make decisions, and solve problems.
9. Emerging skills in planning and goal-setting.
10. Variable ability to maintain punctuality, follow schedules, and work independently.

Support Strategies:

1. Provide targeted support and guidance where needed.
2. Encourage self-reflection and self-assessment.
3. Offer opportunities for practice and reinforcement of self-advocacy skills.
4. Use visual aids, checklists, and reminders to support independent functioning.

3. High Self-Determination/Self-Advocacy Skills (81-120)

Description: Individuals scoring within this range exhibit high self-determination and self-advocacy skills. They can generally recognise and assert their needs, make decisions, solve problems, and advocate for themselves with minimal support.

Characteristics:

1. Strong awareness of personal strengths and areas needing improvement.
2. Apparent ability to explain their disability and its impact on learning or work.
3. Confidence in expressing interests and values.
4. Competence in asking for help without getting upset.
5. Ability to effectively communicate learning goals and plans.
6. Good awareness of their rights as a person with a disability.
7. Effective communication of needs to teachers or supervisors.
8. Proficient in gathering information, making decisions, and solving problems.
9. Well-developed skills in planning and achieving goals.
10. Reliable ability to maintain punctuality, follow schedules, and work independently.

Support Strategies:

1. Provide opportunities for further skill development and leadership.
2. Encourage participation in self-advocacy groups or activities.
3. Facilitate opportunities for peer mentoring or coaching.
4. Support continued personal growth and development through goal-setting and reflection.

By categorising individuals into these three levels based on their total scores, practitioners can tailor interventions and supports to meet the needs of each individual better, fostering their growth in self-determination and self-advocacy skills.

6. Participants

- a. **Participants:** Select a diverse sample/Participants of adults with intellectual and developmental disabilities, representing 14-35 years, age groups, cognitive abilities, and support needs.
- b. **Informed Consent:** Ensure informed consent is obtained from participants or their legal guardians, with clear explanations of the research goals and procedures.

- c. **Participants/Sample Inclusion and Exclusion Criteria: Qualifying Characteristics**

Inclusion Criteria:

A documented diagnosis of IDD, as confirmed by medical records or a relevant disability certificate.

Capacity: The ability to provide informed consent or, in cases where participants had limited communication abilities, the presence of legal guardians who provided consent on their behalf.

Willingness: Willingness to participate in both the Self-Determination Assessment and the Self-Advocacy Curriculum.

Exclusion Criteria

- Age: Individuals below the age of 14 or above 35.
- Lack of IDD Diagnosis
- Limited Capacity for Informed Consent: Individuals who could not provide informed consent and for whom suitable legal guardians were unavailable.
- Unwillingness: Individuals unwilling or unable to participate in the Self-Determination Assessment and Self-Advocacy Curriculum.

7. Reporting System

Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) (Indian Version)

Participant Information

- **Name:** {Name}
- **Date of Assessment:** {Date}
- **Assessor's Name:** {Assessor's Name}
- **Participant ID:** {Auto ID}

Relative Self-Determination Skills Chart

The chart below illustrates Anjali's relative self-determination skills based on normative data from the SDS-IDD ratings and objective test information.

Sl	Areas	Total Score	Average Score	Graph				
				1	2	3	4	5
1	Understanding Strengths and Weaknesses:	1+2	1+2/2					
2	Explaining Disability Label:	3+4	3+4/2					
3	Special Education Services:	5+6	5+6/2					
4	Learning Preferences and Challenges:	7+8	7+8/2					
5	Interests and Values:	9+10	9+10/2					
6	Asking for Help and Assertiveness:	11 or 12	11 or 12 /1					
7	Future Goals and Rights:	13+14	13+14/2					
8	Confidence and Communication:	15+16	15+16/2					
9	Workplace Skills and Independence:	17+18+19	17+18+19/3					
10	Physical and Mental Health Awareness:	20+21	20+21/2					
11	Understanding Abuse and Dignity:	22+23	22+23/2					
12	Performing Activities of Daily Living:	24+25	24+25/2					
	Total Score	total score						

*****{1 to 25 are item numbers} *****

Levels of Self-Determination and Self-Advocacy Skills for Anjali

Based on the total score from 1 to 120 on the Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD), we can establish three levels of self-determination and self-advocacy skills. These levels help categorise Anjali's abilities and clearly understand her strengths and areas needing improvement.

Total Score: {Insert Anjali's total score here}

Level: {Insert corresponding level here based on total score}

Based on Anjali's total score on the SDS-IDD, she falls into the {Low/Moderate/High} self-determination and self-advocacy skills category. This indicates that Anjali has a basic understanding of

{Characteristics:}

She recognises her strengths and weaknesses, makes decisions, seeks help, and advocates for herself. Tailored support strategies should be implemented to help Anjali improve in areas where she faces challenges and further enhance her strengths.

This comprehensive assessment and interpretation clearly explain Anjali's current self-determination and self-advocacy skills. **{Example Interpretation:}**.

The corresponding level here is based on the total score

1. Low Self-Determination/Self-Advocacy Skills (1-40)
2. Moderate Self-Determination/Self-Advocacy Skills (41-80)
3. High Self-Determination/Self-Advocacy Skills (81-120)

1. Low Self-Determination/Self-Advocacy Skills (1-40)

Characteristics:

- **Awareness:** Anjali struggles significantly with identifying her strengths and weaknesses. She often needs to recognise her abilities or areas needing improvement.
- **Decision-Making:** She rarely makes decisions independently and relies on others for guidance and support.
- **Help-Seeking:** Anjali seldom seeks help when needed, often trying to manage tasks independently, which can lead to difficulties.
- **Self-Advocacy:** She needs more confidence in expressing her needs and advocating for herself. Anjali may avoid situations where she needs to stand up for her rights.
- **Goal Setting:** Setting and achieving goals is challenging for Anjali, and she may need more motivation or direction.

Example Interpretation: Anjali scored in the low range, indicating significant challenges in recognising her strengths and weaknesses, making decisions, seeking help, and self-advocacy. She requires substantial support to develop these skills and improve her overall self-determination.

2. Moderate Self-Determination/Self-Advocacy Skills (41-80)

Characteristics:

- **Awareness:** Anjali has a basic understanding of her strengths and weaknesses but needs more consistency in identifying them.
- **Decision-Making:** She sometimes makes decisions independently but often needs reminders and support.
- **Help-Seeking:** Anjali occasionally recognises when she needs help and asks for assistance, though only sometimes.
- **Self-Advocacy:** She has moderate confidence in expressing her needs and advocating for herself, but may require encouragement.
- **Goal Setting:** Anjali can set goals with some support and work towards them moderately.

Example Interpretation: Anjali scored in the moderate range, showing that she understands her strengths and weaknesses and can sometimes make decisions and seek help independently. She has moderate self-advocacy and goal-setting confidence but needs support to improve consistency and effectiveness.

3. High Self-Determination/Self-Advocacy Skills (81-120)

Characteristics:

- **Awareness:** Anjali consistently and independently recognises her strengths and weaknesses. She articulates these areas clearly without external prompts.
- **Decision-Making:** She frequently makes independent decisions confidently and effectively.
- **Help-Seeking:** Anjali often and proactively seeks help when needed, balancing independence with seeking assistance.
- **Self-Advocacy:** She demonstrates high confidence in expressing her needs and advocating for herself. Anjali is comfortable standing up for her rights and communicating her preferences.
- **Goal Setting:** Anjali is proficient in setting realistic and achievable goals and shows strong motivation and direction when working towards them.

Example Interpretation: Anjali scored in the high range, indicating strong self-determination and self-advocacy skills. She consistently recognises her strengths and weaknesses, makes independent decisions, proactively seeks help, and effectively advocates for herself. Her ability to set and achieve goals demonstrates high self-motivation and direction.

Comprehensive Report of Self-Determination Skills

{Assessment Item-1}: {Score}

{Interpretation:}

{Scenario}

{Assessment Item-2}: {Score}

{Interpretation:}

{Scenario}

to

{Assessment Item-25}: {Score}

{Interpretation:}

{Scenario}

If {Assessment Item-1}: I know what I'm good at and the areas that need improvement.

Score: 1 (Not at All)

Interpretation: Anjali needs to learn her strengths and weaknesses. She is still trying to identify areas where she excels or needs improvement. Significant help is required to recognise strengths and weaknesses.

Scenario: When asked what she is good at and what areas she needs to improve, Anjali cannot provide specific examples or regions. The question needs clarification, and she needs significant help recognising her strengths and weaknesses.

Score: 2 (Rarely)

Interpretation: Anjali occasionally recognises her strengths and weaknesses but often needs assistance or prompts to identify these areas. She acknowledges her areas for improvement with significant support.

Scenario: Anjali can occasionally mention that she is good at drawing when prompted by her teacher, but needs to identify other strengths or weaknesses with additional prompts. She acknowledges her areas for improvement with significant support.

Score: 3 (Sometimes)

Interpretation: Anjali sometimes identifies her strengths and weaknesses, but needs to be more consistent. She might need some support or reminders to do so.

Scenario: Anjali sometimes knows she is good at the arts and struggles with math. However, she often needs reminders from her parents or teachers to identify these areas. She can articulate her strengths and weaknesses in familiar situations, but only sometimes.

Score: 4 (Often)

Interpretation: Anjali frequently knows her strengths and weaknesses and can identify them with minimal support.

Scenario: Anjali often recognises that she excels in singing and needs to manage her time. She can usually identify her strengths and weaknesses with minimal support from her counsellor. Anjali is proactive in seeking feedback to understand her areas for improvement.

Score: 5 (Very Often)

Interpretation: Anjali consistently and independently recognises her strengths and weaknesses. She can articulate these areas clearly without any external prompts or support.

Scenario: Anjali consistently and independently identifies her strengths in writing and her need to improve her public speaking skills. She can clearly articulate these areas without prompts and regularly seeks opportunities to enhance her skills. She demonstrates a strong awareness of her abilities and areas for growth.

If {Assessment Item-2}: "I can explain my disability."**Score: 1 (Not at All)**

Interpretation: Anjali cannot explain her disability. She lacks the understanding and the language needed to articulate her disability to others.

Scenario: Anjali struggles to find words or concepts when asked to explain her disability. She cannot provide explicit or specific information about her condition and requires significant assistance and guidance.

Score: 2 (Rarely)

Interpretation: Anjali occasionally recognises and can explain aspects of her disability, but often needs prompts and assistance.

Scenario: Anjali can mention she has a disability when directly asked, but struggles to go into details or describe specific aspects without significant prompting from her parents or teachers. She might say, "I have trouble with some things," but cannot explain further without help.

Score: 3 (Sometimes)

Interpretation: Anjali sometimes can explain her disability, but is not consistent. She may need reminders or prompts to articulate it properly.

Scenario: Anjali knows she has difficulty with specific tasks due to her disability and can sometimes explain this to others. For instance, she might explain, "I have a hard time with reading because of my disability," but only when she is in a familiar or supportive environment and might need occasional reminders.

Score: 4 (Often)

Interpretation: Anjali frequently knows how to explain her disability and can do so with minimal support. She is generally comfortable discussing her condition with others.

Scenario: Anjali often explains her disability to peers and teachers. She might say, "I have a learning disability that makes it hard for me to read quickly, so I need extra time on tests," usually without needing prompts. However, she may still benefit from support in more complex or stressful situations.

Score: 5 (Very Often)

Interpretation: Anjali consistently and independently explains her disability. She is comfortable and articulate in describing her condition to others without external prompts or support.

Scenario: Anjali confidently and clearly explains her disability to anyone who asks. She might say, "I have a learning disability that affects my reading speed and comprehension, so I use special tools and strategies to help me learn better," demonstrating a solid understanding and ability to communicate about her condition independently.

If {Assessment Item-3}: "I can tell others how I learn best."

Score: 1 (Not at All)

Interpretation: Anjali needs to learn how she learns best. She cannot articulate her preferred learning methods and needs significant help understanding and communicating her learning preferences.

Scenario: Anjali cannot provide specific methods or strategies when asked how she learns best. She appears confused and needs help describing any learning techniques that work for her. She requires considerable assistance to identify and communicate her learning preferences.

Score: 2 (Rarely)

Interpretation: Anjali occasionally recognises how she learns best but often needs prompts or assistance to articulate her learning preferences. She may sometimes understand her learning methods, but needs help communicating them effectively.

Scenario: When prompted by her teacher, Anjali sometimes mentions that she learns well through visual aids like pictures and diagrams. However, she often needs additional prompts and support to identify other effective learning strategies and to communicate these preferences to others.

Score: 3 (Sometimes)

Interpretation: Anjali sometimes identifies her preferred learning methods but needs to be more consistent. She might need support or reminders to articulate her learning preferences clearly.

Scenario: Anjali occasionally tells her parents she learns best when physically engaging with the material through hands-on activities. However, she often needs reminders from her teachers or parents to think about and communicate these learning preferences, especially in new or challenging situations.

Score: 4 (Often)

Interpretation: Anjali frequently knows how she learns best and can identify her preferred learning methods with minimal support. She is usually able to communicate her learning preferences effectively.

Scenario: Anjali often tells her counsellor that she excels at learning through group discussions and collaborative projects. She can usually identify and communicate her learning preferences with minimal support, proactively seeking feedback to understand better and utilise her strengths.

Score: 5 (Very Often)

Interpretation: Anjali consistently and independently recognises how she learns best. She can clearly and effectively articulate her preferred learning methods without external prompts or support.

Scenario: Anjali consistently says she learns best through interactive lectures and digital tools. She can clearly explain these methods to her teachers and peers without needing prompts. She regularly seeks opportunities to engage in learning activities that align with her preferences, demonstrating a solid understanding of her optimal learning strategies.

If {Assessment Item-4}: "I can tell others what doesn't help me learn."

Score: 1 (Not at All)

Interpretation: Anjali does not recognise or communicate what factors hinder her learning. She struggles to identify and articulate what doesn't help her learn, requiring significant assistance.

Scenario: When asked what makes learning difficult for her, Anjali cannot provide examples or explanations. She seems confused by the question and needs substantial guidance to understand and communicate the factors that negatively impact her learning.

Score: 2 (Rarely)

Interpretation: Anjali occasionally recognises and communicates what hinders her learning, but often needs prompts or assistance to do so. When specifically asked, she might mention one or two factors, but needs help identifying them independently.

Scenario: With the teacher's prompt, Anjali mentions that noisy environments are distracting. However, she needs to identify other factors that hinder her learning with additional guidance or questions from her teacher.

Score: 3 (Sometimes)

Interpretation: Anjali sometimes recognises and communicates what doesn't help her learn. She can identify a few factors that affect her learning, but needs to be more consistent and might require occasional support or reminders.

Scenario: Anjali sometimes tells her parents that she finds it difficult to focus when there are too many instructions. However, she needs reminders to think about and communicate other factors, such as the room temperature or seating arrangement, that may also affect her learning.

Score: 4 (Often)

Interpretation: Anjali frequently recognises and communicates what hinders her learning. She can often identify factors that negatively impact her learning experience with minimal support.

Scenario: Anjali often tells her counsellor that she struggles to understand math problems when the instructions are too quick. She also mentions that group work is challenging because it can get too noisy. She usually identifies these factors on her own with minimal prompting.

Score: 5 (Very Often)

Interpretation: Anjali consistently and independently recognises and communicates what doesn't help her learn. She can articulate these factors clearly without any external prompts or support, showing a strong awareness of her learning needs.

Scenario: Anjali consistently informs her teachers that she needs a quiet space to concentrate and prefers written instructions to verbal ones. She clearly articulates that too much background noise or unclear instructions hinder her learning. She does this independently and proactively, showing strong self-awareness of her learning environment needs.

If {Assessment Item-5}: "I am confident in expressing my interests."

Score: 1 (Not at All)

Interpretation: Anjali needs to be more confident in expressing her interests. She struggles significantly to articulate what she likes or is passionate about, often feeling unsure or insecure about sharing her interests with others.

Scenario: Anjali remains silent and appears uncomfortable when asked about her hobbies or passions. She avoids eye contact and struggles to name activities or subjects she enjoys. When her teacher prompts her, she still finds it difficult to express any interests confidently, often needing significant encouragement to speak up.

Score: 2 (Rarely)

Interpretation: Anjali rarely feels confident in expressing her interests. While she occasionally mentions things she likes, she often needs prompting and reassurance to do so. She might express her interests in familiar and supportive environments, but needs help in new or less supportive settings.

Scenario: Anjali might occasionally mention that she enjoys drawing or listening to music in a familiar setting with her close friends. However, in a new classroom environment, she remains quiet when asked about her interests, only sharing her thoughts when directly prompted by her teacher and given reassurance that her input is valued.

Score: 3 (Sometimes)

Interpretation: Anjali sometimes feels confident in expressing her interests. She can articulate what she likes in some situations, especially when she feels comfortable and supported. However, her confidence fluctuates and may need occasional reminders or encouragement.

Scenario: During a casual group discussion, Anjali sometimes shares that she enjoys painting and reading books. She participates actively when the topic concerns her interests. Still, in a more formal setting or when presenting in front of the class, she might hesitate and need a nudge from her peers or teacher to express her interests confidently.

Score: 4 (Often)

Interpretation: Anjali often feels confident in expressing her interests. She regularly shares her likes and passions with others, needing minimal support. Her confidence is evident in various settings, and she actively participates in conversations about her interests.

Scenario: In group discussions and one-on-one conversations, Anjali frequently talks about her love for music and her passion for playing the guitar. She volunteers to participate in activities related to her interests and often enthusiastically shares her experiences and achievements, only occasionally needing slight encouragement in more formal situations.

Score: 5 (Very Often)

Interpretation: Anjali is very confident in expressing her interests. She consistently and independently shares what she likes and is passionate about without external prompts or support. Her confidence in expressing her interests is strong across all settings.

Scenario: Anjali confidently expresses her interests in art and dance during class presentations, group discussions, and casual conversations. She initiates conversations about her hobbies, eagerly participates in related activities, and enjoys showcasing her talents and achievements. Her passion and confidence are evident, and she inspires others to share their interests.

If {Assessment Item-6}: "I am confident in expressing my values."

Score: 1 (Not at All)

Interpretation: Anjali does not feel confident in expressing her values. She struggles to articulate her beliefs and principles and often remains silent or goes along with others without voicing her values.

Scenario: Anjali is in a group discussion about environmental conservation. When asked about her thoughts on recycling, she remains silent and does not share her opinion, even though she believes strongly in the importance of recycling. She feels unsure and lacks the confidence to express her values.

Score: 2 (Rarely)

Interpretation: Anjali rarely feels confident in expressing her values. She occasionally shares her beliefs but often needs prompts or significant support. She is more likely to express her values in familiar, supportive environments.

Scenario: During a classroom debate on cultural traditions, Anjali mentions her appreciation for traditional festivals when her teacher asks her explicitly about them. However, she needs to elaborate on her views or speak up during the rest of the discussion, and she needs considerable encouragement to express her values.

Score: 3 (Sometimes)

Interpretation: Anjali sometimes feels confident in expressing her values. She can articulate her beliefs in certain situations, especially when she feels comfortable and supported, but she may still struggle to do so consistently.

Scenario: In a casual conversation with friends about the importance of honesty, Anjali shares that she values honesty and tries to be truthful. However, when the conversation shifts to more controversial topics like politics, she hesitates and refrains from expressing her values.

Score: 4 (Often)

Interpretation: Anjali often feels confident in expressing her values. She frequently articulates her beliefs and principles with minimal support and feels comfortable sharing her views in various settings.

Scenario: Anjali is part of a community group discussing volunteer work. She confidently believes in helping others and suggests organising a charity event. She feels comfortable expressing her values and actively participates in the discussion.

Score: 5 (Very Often)

Interpretation: Anjali consistently and independently feels confident in expressing her values. She articulates her beliefs clearly without any external prompts or support and regularly engages in discussions where she shares her values.

Scenario: During a family gathering, Anjali openly discusses her commitment to sustainability. She discusses her eco-friendly habits and encourages her family to adopt similar practices. She confidently expresses her values and provides thoughtful insights, demonstrating vital self-assurance in her beliefs.

If {Assessment Item-7}: "I can ask for help without getting upset."

Score: 1 (Not at All)

Interpretation: Anjali struggles significantly with asking for help without getting upset. She finds it very challenging to seek assistance and often experiences frustration or distress in these situations.

Scenario: When Anjali faces difficulties with her homework, she gets visibly upset and frustrated instead of calmly asking her teacher or parents for help. She may avoid seeking assistance altogether, resulting in unfinished tasks and heightened anxiety.

Score: 2 (Rarely)

Interpretation: Anjali occasionally recognises the need to ask for help but often struggles to do so without becoming upset. She may require significant support and reassurance to seek assistance calmly.

Scenario: Anjali needs help understanding the instructions during a group activity, but feels embarrassed and hesitant to ask her peers or teacher for help. When she finally does ask, she often appears anxious and on the verge of tears, needing encouragement to stay calm.

Score: 3 (Sometimes)

Interpretation: Anjali sometimes asks for help without getting upset, but needs to be more consistent. She might need reminders or support to approach others calmly when she needs assistance.

Scenario: Anjali can ask her parents for help with household chores when she struggles, but there are times when she becomes frustrated and upset before making the request. In familiar settings, she can ask for help more comfortably, but in new or challenging situations, her anxiety levels rise.

Score: 4 (Often)

Interpretation: Anjali frequently asks for help without getting upset. She usually recognises when she needs assistance and can seek it calmly with minimal support or intervention.

Scenario: In her art class, Anjali often asks her teacher for guidance on improving her techniques. She approaches her teacher confidently and articulates her needs clearly, showing little to no signs of frustration or distress.

Score: 5 (Very Often)

Interpretation: Anjali consistently and independently asks for help without getting upset. She is comfortable seeking assistance and does so calmly and composedly, regardless of the situation.

Scenario: When faced with a complex math problem, Anjali independently approaches her math tutor and explains what she doesn't understand. She remains calm and focused, asking specific questions to get the help she needs, and shows no signs of frustration or anxiety.

If {Assessment Item-8}: "I can communicate what I want to learn."

Score: 1 (Not at All)

Interpretation: Anjali needs to communicate what she wants to learn. She struggles to express her learning interests and requires significant support to articulate her educational preferences.

Scenario: When asked what she wants to learn, Anjali remains silent or gives vague responses. She cannot clearly articulate any specific subjects or skills she is interested in and often looks to others for suggestions or direction.

Score: 2 (Rarely)

Interpretation: Anjali occasionally communicates what she wants to learn but often requires prompts and assistance. She can express her interest in learning with significant support.

Scenario: During a discussion about learning goals, Anjali mentioned that she was curious about science only after several prompts from her teacher. She rarely brings up her learning interests independently and needs external cues to express her educational preferences.

Score: 3 (Sometimes)

Interpretation: Anjali sometimes communicates what she wants to learn. She has moments of clarity when expressing her learning interests, but is inconsistent and may need reminders.

Scenario: In a classroom setting, Anjali sometimes tells her teacher she is interested in learning more about computers, but she needs to do this consistently. There are days when she needs to be asked multiple times before she can articulate her interests.

Score: 4 (Often)

Interpretation: Anjali frequently communicates what she wants to learn. She can generally express her learning interests with minimal support and proactively seeks knowledge.

Scenario: During a project planning session, Anjali often raises her hand and expresses her desire to learn more about environmental science. She actively participates in discussions about her educational goals and usually needs little prompting to share her interests.

Score: 5 (Very Often)

Interpretation: Anjali consistently and independently communicates what she wants to learn. She can clearly and proactively articulate her learning interests without external prompts or support.

Scenario: When allowed to choose her subjects, Anjali immediately expresses a strong interest in learning advanced mathematics. She regularly seeks out resources, asks questions, and communicates her learning goals clearly and confidently without needing any prompts from teachers or peers.

If {Assessment Item-9}: "I can communicate my plans for the future."

Score: 1 (Not at All)

Interpretation: Anjali cannot communicate her plans for the future. She struggles significantly with articulating her goals and aspirations and requires substantial help and guidance.

Scenario: When asked about her plans for the future, Anjali remains silent or gives vague responses such as "I don't know" or "I haven't thought about it." She appears uncertain and uncomfortable discussing her future, indicating a lack of clarity and confidence.

Score: 2 (Rarely)

Interpretation: Anjali occasionally communicates her plans for the future but often needs assistance or prompts. She has ideas about her future but needs support to express them clearly.

Scenario: When prompted by her teacher, Anjali mentions that she might want to become an artist someday, but struggles to provide more details. She needs additional questions and encouragement to elaborate on her plans, and her responses often need more confidence.

Score: 3 (Sometimes)

Interpretation: Anjali sometimes communicates her plans for the future, but needs consistency. She can express her goals in familiar situations but may need reminders or support to do so effectively.

Scenario: In a classroom setting, Anjali can share that she wants to study art in college and possibly work in an art gallery. However, when asked about her plans in a different context, such as a family gathering, she needs prompting to articulate her goals.

Score: 4 (Often)

Interpretation: Anjali frequently communicates her plans for the future and can do so with minimal support. She has a good understanding of her goals and is generally able to express them clearly and confidently.

Scenario: During a career counselling session, Anjali confidently states that she plans to pursue a degree in fine arts and aims to open her art studio. She outlines the steps she needs to take to achieve her goals, such as attending art classes and participating in exhibitions, with minimal prompting.

Score: 5 (Very Often)

Interpretation: Anjali consistently and independently communicates her plans for the future. She articulates her goals clearly and confidently without any external prompts or support.

Scenario: When discussing her plans with a mentor, Anjali clearly and enthusiastically explains her vision of becoming a renowned artist. She details her short-term and long-term goals, including attending a prestigious art school, networking with other artists, and eventually showcasing her work internationally. She demonstrates a strong sense of direction and confidence in her plans.

If {Assessment Item-10}: "I am aware of my rights as a person with a disability."

Score: 1 (Not at All)

Interpretation: Anjali is not aware of her rights as a person with a disability. She does not understand the rights and protections available to her and requires significant support to gain awareness.

Scenario: When asked about her rights as a person with a disability, Anjali cannot mention any specific rights or protections. She needs clarification on the question and needs to demonstrate awareness of her legal rights or entitlements.

Score: 2 (Rarely)

Interpretation: Anjali occasionally recognises her rights as a person with a disability but often needs assistance or prompts to identify and understand them. She has limited awareness and requires support to comprehend her rights fully.

Scenario: When prompted by her teacher, Anjali sometimes mentions that she can access special education services. However, she needs to identify other rights with significant prompts and guidance. Her understanding of her rights needs to be improved and further developed.

Score: 3 (Sometimes)

Interpretation: Anjali sometimes identifies and understands her rights as a person with a disability, but needs to be more consistent. She has an essential awareness but often requires reminders or support to grasp the extent of her rights fully.

Scenario: Anjali knows she has the right to reasonable accommodations at school and can sometimes articulate this right when discussing her needs with teachers. However, she often needs reminders and support to recognise other rights, such as access to public facilities or anti-discrimination protections.

Score: 4 (Often)

Interpretation: Anjali frequently knows and understands her rights as a person with a disability. She can identify and articulate these rights with minimal support and demonstrates a strong awareness of the protections available.

Scenario: Anjali often recognises and articulates her right to equal access to education and reasonable accommodations with little support. She can usually identify her rights in various situations, such as during discussions about school policies or public accessibility, and advocates for herself effectively.

Score: 5 (Very Often)

Interpretation: Anjali consistently and independently recognises and understands her rights as a person with a disability. She can articulate these rights without external prompts or support and knows her legal protections and entitlements.

Scenario: Anjali consistently and independently identifies her right to be free from discrimination in all areas of life, including education, employment, and public services. She can clearly articulate these rights during discussions and regularly seeks opportunities to advocate for herself and others. Anjali demonstrates a robust and thorough understanding of her rights and ensures they are respected and upheld.

If {Assessment Item-11}: "I can communicate my needs to teachers."

Score: 1 (Not at All)

Interpretation: Anjali is unable to communicate her needs to teachers. She finds it very challenging to express what she requires in a classroom setting and does not seek help, even when needed.

Scenario: When Anjali struggles with an assignment, she does not tell her teacher that she needs extra help. She remains silent and avoids eye contact, feeling overwhelmed but unable to ask for assistance.

Score: 2 (Rarely)

Interpretation: Anjali occasionally communicates her needs to teachers but often requires significant prompting and encouragement. She may express her needs in particular situations, but struggles to articulate them.

Scenario: Anjali sometimes tells her teacher she needs a pencil or has a specific question when directly asked, but she rarely initiates these communications independently. She primarily relies on the teacher noticing her needs first.

Score: 3 (Sometimes)

Interpretation: Anjali sometimes communicates her needs to teachers. She can express her needs in familiar situations but often requires reminders or encouragement. Her ability to communicate her needs could be more consistent.

Scenario: Anjali can tell her teacher she needs help understanding a math problem if the teacher is approachable and the classroom environment is quiet. However, she might need to communicate her needs more effectively in chaotic or unfamiliar situations.

Score: 4 (Often)

Interpretation: Anjali frequently communicates her needs to teachers with minimal support. She can generally articulate her needs clearly and seeks help when necessary, though there may still be occasional hesitation in less familiar situations.

Scenario: Anjali often raises her hand and asks for clarification on assignments or requests additional resources when she feels she needs them. She proactively seeks assistance in most classroom settings but might hesitate during new or particularly challenging situations.

Score: 5 (Very Often)

Interpretation: Anjali consistently and independently communicates her needs to teachers. She confidently articulates her needs without any external prompts and regularly seeks help and resources as required.

Scenario: Anjali regularly approaches her teachers before or after class to discuss her needs, such as requesting extra time on assignments, asking for additional materials, or seeking feedback on her performance. She demonstrates self-advocacy skills and does not hesitate to communicate her needs.

If {Assessment Item-12}: "I can communicate my needs to work supervisors."

Score: 1 (Not at All)

Interpretation: Anjali needs to communicate her needs to the work supervisors. She struggles significantly with expressing her needs and requires substantial support.

Scenario: Anjali is facing difficulties with a task assigned by her supervisor. Despite knowing that she needs help, she remains silent and does not communicate her need for assistance. Her supervisor remains unaware of her struggles because Anjali cannot express her needs.

Score: 2 (Rarely)

Interpretation: Anjali occasionally communicates her needs to work supervisors but often requires assistance or prompts. She may express her needs in limited situations, but she needs help with this skill.

Scenario: Anjali occasionally asks for help when her supervisor inquires if she needs assistance. However, in most situations, she hesitates and avoids communicating her needs, even when struggling with her tasks.

Score: 3 (Sometimes)

Interpretation: Anjali sometimes communicates her needs to work supervisors. She consistently expresses her needs but may require reminders or support to do so effectively.

Scenario: Anjali sometimes informs her supervisor when she needs help with specific tasks, especially if she has previously received positive feedback. However, there are instances where she needs to remember or communicate her needs, leading to occasional misunderstandings or unmet needs.

Score: 4 (Often)

Interpretation: Anjali frequently communicates her needs to work with supervisors with minimal support. She proactively seeks help and generally feels comfortable expressing her needs in the workplace.

Scenario: Anjali often approaches her supervisor to discuss her workload and seeks assistance or clarification. She feels confident expressing her needs and usually does so without requiring prompts or reminders.

Score: 5 (Very Often)

Interpretation: Anjali consistently and independently communicates her needs to work supervisors. She proactively seeks support and can articulate her needs clearly without external prompts or support.

Scenario: Anjali regularly communicates with her supervisor about her needs, whether for additional resources, task clarification, or support with challenging assignments. She is confident and self-assured in expressing her needs, ensuring she has the necessary support to perform her job effectively.

If {Assessment Item-13}: "I can gather information."**Score: 1 (Not at All)**

Interpretation: Anjali needs to learn how to gather information. She needs help finding and using resources to obtain information and relies entirely on others for assistance.

Scenario: Anjali is assigned a project on Indian wildlife. She needs to figure out where to start and find relevant information. When asked, she waits for her teacher or parents to provide all the details, showing no initiative to gather information independently.

Score: 2 (Rarely)

Interpretation: Anjali occasionally gathers information but often needs assistance or prompts. She relies heavily on guidance and must be more proactive in seeking information.

Scenario: Anjali needs to prepare for a science quiz. When prompted by her teacher, she looks up a few facts online but quickly needs clarification and waits for further instructions. With continuous guidance, she finds it more accessible to gather comprehensive information.

Score: 3 (Sometimes)

Interpretation: Anjali sometimes gathers information independently but needs more consistency. She can find information in familiar situations but may need support or reminders in more complex tasks.

Scenario: Anjali is working on a history assignment about famous Indian leaders. She can gather basic information from her textbook and the internet, but she needs occasional reminders from her parents to look deeper and verify the sources.

Score: 4 (Often)

Interpretation: Anjali frequently gathers information independently and with minimal support. She shows good initiative and can navigate various resources to find the necessary information.

Scenario: Anjali is planning a school event and needs to find information on different suppliers. She independently searches online, compares prices, and contacts suppliers for quotes. She occasionally checks in with her teacher to ensure she is on the right track.

Score: 5 (Very Often)

Interpretation: Anjali consistently and independently gathers information effectively. She demonstrates strong skills in using various resources and can do so without any external prompts or support.

Scenario: Anjali is tasked with writing a report on climate change. She thoroughly researches academic articles, government websites, and news sources. She organises her findings systematically and presents a comprehensive report without assistance, showing high proficiency in gathering information.

If {Assessment Item-14}: "I can make decisions."

Score: 1 (Not at All)

Interpretation: Anjali needs to work on making decisions. She often relies on others to make choices for her and has difficulty understanding the decision-making process. She needs substantial guidance and support to make decisions.

Scenario: When asked what she wants to eat for lunch, Anjali cannot decide and looks to her caregiver to choose for her. She shows hesitation and uncertainty, indicating a need for more confidence in making decisions independently.

Score: 2 (Rarely)

Interpretation: Anjali occasionally makes decisions but often needs assistance or prompts. She shows some understanding of the decision-making process but needs more confidence and tends to defer to others for final decisions.

Scenario: Anjali can sometimes choose which clothes to wear for the day, but she usually needs prompts from her parents. If given a choice between two outfits, she might make a decision, but more often, she asks her mother which one she should wear.

Score: 3 (Sometimes)

Interpretation: Anjali sometimes makes decisions independently but needs to be more consistent. She understands the basics of decision-making but may need reminders or support to follow through. Her confidence in making decisions varies depending on the situation.

Scenario: Anjali can decide which game to play during her free time at school. However, when choosing a topic for a class project, she requires suggestions and reassurance from her teacher before making a decision.

Score: 4 (Often)

Interpretation: Anjali frequently makes decisions independently with minimal support. She understands the decision-making process well and shows confidence in making choices. Anjali only occasionally seeks guidance or validation from others.

Scenario: Anjali can decide what to cook for dinner with some help. She often chooses her favourite recipes and can plan the meal. While she might occasionally ask her sibling for an opinion, she generally feels confident in her decisions.

Score: 5 (Very Often)

Interpretation: Anjali consistently makes decisions independently and confidently. She fully understands the decision-making process and rarely needs prompts or assistance. Anjali articulates her choices clearly and takes responsibility for her decisions.

Scenario: When planning her weekend activities, Anjali confidently visits a museum she wants to see. She arranges the details, including transportation and ticket purchase, without seeking external help. She feels secure in her ability to make and execute decisions.

If {Assessment Item-15}: "I can solve problems."

Score: 1 (Not at All)

Interpretation: Anjali needs to learn how to solve problems independently. She requires significant assistance and often relies on others to help her navigate problem-solving situations.

Scenario: When her computer stops working, Anjali cannot troubleshoot or seek help. She does not know where to begin and feels overwhelmed, needing someone else to resolve the issue for her completely.

Score: 2 (Rarely)

Interpretation: Anjali rarely solves problems on her own. She occasionally makes attempts but generally needs much guidance and support to find a solution.

Scenario: When her computer stops working, Anjali might try restarting it, but doesn't know what to do if that doesn't work. She may call a friend or a teacher for detailed step-by-step guidance on what to try next, rarely feeling confident to take the initiative.

Score: 3 (Sometimes)

Interpretation: Anjali sometimes solves problems independently but needs more consistency. She can handle straightforward issues but often needs reminders or support for more complex situations.

Scenario: When her computer stops working, Anjali might try restarting it and checking the power connections. If those steps don't solve the problem, she knows she should look online for troubleshooting tips, but might need someone to remind her or assist her with the search.

Score: 4 (Often)

Interpretation: Anjali often solves problems on her own. She shows good problem-solving skills and usually requires minimal assistance. She is proactive in finding solutions.

Scenario: When her computer stops working, Anjali tries restarting it, checks the power connections, and searches online for troubleshooting steps. If she cannot solve it herself, she knows to contact tech support and can explain the steps she has already taken.

Score: 5 (Very Often)

Interpretation: Anjali consistently and independently solves problems. She is confident in her problem-solving abilities and rarely needs assistance. She can articulate her problem-solving process clearly and effectively.

Scenario: When her computer stops working, Anjali systematically goes through various troubleshooting steps, such as restarting, checking power connections, and looking up solutions online. She is confident in diagnosing and fixing the issue and can clearly explain her process to others if needed.

If {Assessment Item-16}: "I can make plans to achieve my goals."**Score: 1 (Not at All)**

Interpretation: Anjali is unable to make plans to achieve her goals. She lacks the necessary skills and understanding to set and follow through with goal-oriented plans, and she requires significant support and guidance to develop these skills.

Scenario: When asked about her future aspirations and how she plans to achieve them, Anjali cannot articulate any specific goals or steps she might take. She struggles to understand the concept of planning and needs substantial help from others to begin thinking about her goals.

Score: 2 (Rarely)

Interpretation: Anjali occasionally recognises the need to make plans to achieve her goals, but often struggles with the process. She requires frequent prompts and substantial assistance to outline and follow her plans.

Scenario: Anjali mentions wanting to improve her math skills, but rarely outlines specific steps. When prompted by her teacher, she might mention attending tutoring sessions, but she often needs reminders and encouragement to follow through.

Score: 3 (Sometimes)

Interpretation: Anjali sometimes plans to achieve her goals, but her efforts could be more consistent. She needs support and occasional reminders to stay focused and follow her plans. She has a basic understanding of goal-setting but requires more practice.

Scenario: Anjali sets a goal to participate in an upcoming art competition. She outlines some steps, such as practising her drawing skills daily and seeking feedback from her art teacher. However, she occasionally needs reminders from her parents to stay on track and complete her practice sessions.

Score: 4 (Often)

Interpretation: Anjali frequently makes plans to achieve her goals and can usually outline the necessary steps with minimal support. She understands goal-setting well and proactively seeks resources and assistance when needed.

Scenario: Anjali wants to improve her public speaking skills. She creates a plan that includes joining a debate club, practising speeches at home, and attending public speaking workshops. She follows through with her plan and seeks feedback from her teacher to refine her skills, needing only occasional guidance.

Score: 5 (Very Often)

Interpretation: Anjali consistently and independently makes detailed plans to achieve her goals. She has a strong understanding of goal-setting and follows through with her plans effectively. She seeks out necessary resources and support without needing external prompts.

Scenario: Anjali aims to get into a prestigious college for her higher education. She outlines a comprehensive plan, including researching colleges, preparing for entrance exams, participating in extracurricular activities, and maintaining high academic performance. She diligently follows her plan, regularly reviews her progress, and adjusts her strategies as needed, all on her initiative.

If {Assessment Item-17}: "I am punctual."

Score: 1 (Not at All)

Interpretation: Anjali needs to improve with punctuality. She often needs to manage her time effectively and consistently arrives late for appointments and commitments. This indicates a need for substantial support and interventions to improve her time management skills.

Scenario: Anjali frequently arrives late for school and appointments. Despite reminders from her parents and teachers, she finds leaving the house on time challenging. She often misses the bus and disrupts her schedule, leading to a rushed and stressful start to her day.

Score: 2 (Rarely)

Interpretation: Anjali occasionally demonstrates punctuality but often needs assistance or prompts to manage her time effectively. She sometimes arrives late due to a lack of consistent time management habits.

Scenario: Anjali sometimes arrives on time for her extracurricular activities but often requires reminders from her parents. For example, she may be on time for a music class one week but arrive late the next because she is distracted and needs to keep track of time.

Score: 3 (Sometimes)

Interpretation: Anjali is sometimes punctual but needs to be more consistent. She occasionally manages her time well but often needs support or reminders to stay on track.

Scenario: Anjali occasionally arrives on time for her tutoring sessions, especially when she sets reminders on her phone. However, she still needs to catch up on time while engaged in other activities and is late.

Score: 4 (Often)

Interpretation: Anjali frequently demonstrates punctuality and can manage her time with minimal support. She usually arrives on time for her commitments and has developed good time management habits.

Scenario: Anjali often arrives on time for school and extracurricular activities. She has set routines and uses a planner to keep track of her schedule. Occasionally, she might be a few minutes late if unexpected events occur, but she is reliable and punctual overall.

Score: 5 (Very Often)

Interpretation: Anjali consistently and independently demonstrates punctuality. She effectively manages her time and always arrives on time for her commitments without needing external prompts or support.

Scenario: Anjali consistently arrives on time for all her appointments and school. She independently sets alarms and plans her day to ensure she leaves the house with ample time to reach her destination. Her punctuality is evident in all aspects of her daily life, from school to social events.

If {Assessment Item-18}: "I can follow a schedule."

Score: 1 (Not at All)

Interpretation: Anjali needs to work on following a schedule. She often forgets her tasks and requires constant reminders and assistance to adhere to a planned routine.

Scenario: Anjali is given a daily schedule to follow, but consistently needs to attend appointments and deadlines. She requires frequent reminders from her parents and teachers to stay on track and is often made aware of the importance of the schedule.

Score: 2 (Rarely)

Interpretation: Anjali occasionally follows a schedule but often needs prompts and reminders. She finds it challenging to adhere to a routine and frequently deviates from planned activities.

Scenario: Anjali sometimes remembers to attend her extracurricular classes but often needs her mother to remind her about homework deadlines and mealtimes. She can follow a schedule with significant support, but rarely independently.

Score: 3 (Sometimes)

Interpretation: Anjali sometimes follows a schedule but needs more consistency. She can adhere to a routine in familiar situations but often requires reminders and assistance in new or complex scenarios.

Scenario: Anjali can follow her school timetable and remember important events like exams and school trips. However, she occasionally needs to place more frequent activities, such as dentist appointments and needs her teacher or parents to remind her.

Score: 4 (Often)

Interpretation: Anjali frequently follows a schedule and can do so with minimal support. She is generally reliable in adhering to planned routines and only occasionally needs assistance or reminders.

Scenario: Anjali regularly attends music lessons and completes her homework on time. She uses a planner to keep track of her tasks and usually only needs a gentle reminder for unusual or one-off activities.

Score: 5 (Very Often)

Interpretation: Anjali consistently and independently follows a schedule. She can plan and adhere to her routine without external prompts or support, demonstrating a solid ability to manage her time effectively.

Scenario: Anjali independently organises her daily activities, including schoolwork, extracurricular activities, and social events. She uses a calendar app to manage her schedule and rarely needs reminders. She confidently adjusts her plans as required.

If {Assessment Item-19}: "I can work independently."

Score: 1 (Not at All)

Interpretation: Anjali cannot work independently and requires constant supervision and assistance to complete tasks. She struggles to manage tasks independently and relies heavily on others for guidance.

Scenario: When given a task to complete, Anjali often waits for instructions and guidance from others. She finds initiating or completing tasks challenging without continuous support and supervision. For instance, she might need help setting up her workspace, understanding the steps required, and staying focused until the task is completed.

Score: 2 (Rarely)

Interpretation: Anjali can occasionally work independently but needs significant prompts and assistance. She occasionally attempts to perform tasks independently but quickly becomes dependent on others when faced with difficulties.

Scenario: Anjali might start a simple task like organising her desk, but often stops midway, seeking help from her teacher or peers. She only completes tasks with frequent reminders and guidance. For example, she may begin cleaning her room but soon ask for help figuring out where to place items or how to organise them effectively.

Score: 3 (Sometimes)

Interpretation: Anjali sometimes demonstrates the ability to work independently. She can manage tasks independently under familiar circumstances but often needs support and reminders to stay on track and complete tasks effectively.

Scenario: Anjali can work independently on familiar tasks, such as following a routine or completing a simple worksheet. However, she needs occasional reminders and support to focus and complete more complex tasks. For example, she might start a homework assignment independently but require prompts to stay focused and complete it within the allotted time.

Score: 4 (Often)

Interpretation: Anjali often works independently with minimal support. She can manage tasks independently and occasionally needs assistance or guidance to overcome specific challenges.

Scenario: Anjali frequently demonstrates her ability to work independently in various settings. She can initiate and complete tasks with little supervision, such as preparing a simple meal or following a daily schedule. She may occasionally ask for help when faced with unfamiliar tasks or specific difficulties. For instance, she might need help understanding a new concept in a project, but can continue with minimal guidance afterwards.

Score: 5 (Very Often)

Interpretation: Anjali consistently and independently manages tasks without needing supervision or assistance. She demonstrates strong self-reliance and the ability to handle various tasks independently.

Scenario: Anjali consistently works independently, efficiently managing her responsibilities without prompts or supervision. She can handle complex tasks such as planning her study schedule, completing assignments on time, and confidently managing her daily activities. For example, she might independently plan and execute a small event, handling all details from start to finish without seeking help.

If {Assessment Item-20}: "I understand the importance of taking care of my physical health."

Score: 1 (Not at All)

Interpretation: Anjali needs to understand the importance of maintaining her physical health. She requires significant support to recognise this and to learn how to do so.

Scenario: When asked about her daily habits, Anjali needs to become more aware of basic health practices such as eating nutritious meals, exercising, and maintaining personal hygiene. She seems indifferent to the consequences of neglecting physical health and does not engage in any health-related activities without direct supervision.

Score: 2 (Rarely)

Interpretation: Anjali occasionally recognises the importance of physical health but often needs assistance and reminders to follow through with healthy practices.

Scenario: When her parents remind her, Anjali knows eating fruits and vegetables is good for her health. However, she rarely initiates these actions on her own. If not prompted by a caregiver, she might skip meals or neglect personal hygiene.

Score: 3 (Sometimes)

Interpretation: Anjali sometimes understands the importance of taking care of her physical health and follows healthy practices inconsistently. She might need occasional support and reminders.

Scenario: Anjali sometimes remembers to exercise and eat a balanced diet. For example, she might go for a walk a few times a week and choose healthy snacks, but she needs reminders to do so regularly. She understands the concept of physical health but doesn't consistently prioritise it.

Score: 4 (Often)

Interpretation: Anjali often understands the importance of caring for her physical health and follows healthy practices with minimal support.

Scenario: Anjali frequently engages in activities that promote her physical health, such as regular exercise and eating balanced meals. She maintains good hygiene and makes healthy choices without frequent reminders, though she may still benefit from occasional guidance.

Score: 5 (Very Often)

Interpretation: Anjali consistently understands the importance of caring for her physical health and follows healthy practices independently. She can articulate the benefits of physical health and actively maintains it.

Scenario: Anjali is proactive about her physical health, regularly exercising, eating nutritious meals, and maintaining personal hygiene. She understands the benefits of these practices and incorporates them into her daily routine without any external prompts. Anjali can explain why physical health is essential and encourages others to adopt healthy habits.

If {Assessment Item-21}: "I understand the importance of taking care of my mental health."

Score: 1 (Not at All)

Interpretation: Anjali does not understand the importance of taking care of her mental health. She is unaware of the factors that contribute to mental well-being and does not recognise the need for mental health care.

Scenario: When asked about mental health, Anjali shows confusion and cannot articulate why it is essential. She does not engage in activities or practices promoting mental well-being and needs significant help to understand their importance.

Score: 2 (Rarely)

Interpretation: Anjali rarely understands the importance of caring for her mental health. She may occasionally recognise the need for mental health care, but often requires prompts and assistance to do so.

Scenario: Anjali can occasionally mention that feeling happy and relaxed is essential when prompted by her teacher, but she does not consistently engage in practices that support her mental health. She might acknowledge mental health sporadically, but lacks a deep understanding of its importance.

Score: 3 (Sometimes)

Interpretation: Anjali sometimes understands the importance of taking care of her mental health. She recognises the need for mental well-being in certain situations, but is inconsistent in her awareness or actions.

Scenario: Anjali knows that activities like talking to friends or doing hobbies make her feel better, but she often needs reminders from her parents or teachers to engage in these activities. She can articulate the importance of mental health in familiar situations, but not consistently.

Score: 4 (Often)

Interpretation: Anjali often understands the importance of taking care of her mental health. She frequently recognises the need for mental well-being and engages in activities that promote it with minimal support.

Scenario: Anjali often recognises that taking breaks, engaging in hobbies, and talking about her feelings is essential for her mental health. She can usually identify practices that support her mental well-being and seeks minimal support from her counsellor. Anjali is proactive in engaging in mental health-promoting activities.

Score: 5 (Very Often)

Interpretation: Anjali consistently and independently understands the importance of taking care of her mental health. She can articulate why mental health is essential and regularly engages in practices that promote her mental well-being without external prompts or support.

Scenario: Anjali consistently practices mindfulness, maintains a balanced lifestyle, and seeks help when needed to support her mental health. She can clearly articulate the importance of mental health and regularly seeks opportunities to enhance her mental well-being. She demonstrates a strong awareness of the factors contributing to mental health and takes proactive steps to maintain it.

If {Assessment Item-22}: "I know what abuse is and can identify abusive situations."

Score: 1 (Not at All)

Interpretation: Anjali does not know what abuse is and cannot identify abusive situations. She lacks understanding and awareness of abuse and is unable to recognise when she is in an abusive situation.

Scenario: When asked about different types of abuse, Anjali cannot provide any examples or explanations. She does not understand what constitutes abuse and fails to recognise signs of abusive behaviour in various situations.

Score: 2 (Rarely)

Interpretation: Anjali occasionally recognises what abuse is and can identify some abusive situations, but she often needs significant assistance and prompts. Her understanding is minimal and inconsistent.

Scenario: Anjali can sometimes identify physical abuse if it is pronounced, such as hitting, when prompted by her teacher. However, she struggles to recognise other forms of abuse, like emotional or verbal abuse, and often needs additional prompts and explanations.

Score: 3 (Sometimes)

Interpretation: Anjali sometimes knows what abuse is and can identify abusive situations, but her recognition is inconsistent. She may need support or reminders to understand and identify various forms of abuse fully.

Scenario: Anjali can identify some forms of abuse, like physical and verbal abuse, in familiar situations. For instance, she knows that hitting or shouting is wrong. However, she might not always recognise more subtle forms of abuse, such as manipulation or neglect, without reminders from her parents or teachers.

Score: 4 (Often)

Interpretation: Anjali frequently knows what abuse is and can identify abusive situations with minimal support. She has a good understanding of different types of abuse and can usually recognise when she or others are in abusive situations.

Scenario: Anjali can recognise physical, verbal, and emotional abuse in various settings. She often identifies abusive behaviour, such as a classmate being bullied or manipulated, and understands that it is wrong. She might occasionally seek confirmation or reassurance from a trusted adult to ensure her understanding is correct.

Score: 5 (Very Often)

Interpretation: Anjali consistently and independently knows what abuse is and can identify abusive situations. She has a strong understanding of abuse in all its forms and can articulate these situations clearly without external prompts or support.

Scenario: Anjali consistently recognises and understands various forms of abuse, including physical, emotional, verbal, and financial abuse. She can clearly articulate what constitutes abuse and confidently identifies abusive situations, such as when a peer is being manipulated or controlled. She does this independently and without needing prompts or support from

If {Assessment Item-23}: "I understand my right to dignity and respect in all environments."

Score: 1 (Not at All)

Interpretation: Anjali must understand her right to dignity and respect in all environments. She needs significant support to recognise and assert these rights.

Scenario: When Anjali is in a group setting, such as a classroom, she does not recognise when she is being disrespected or mistreated. She cannot articulate her right to be treated with dignity and respect, and often accepts mistreatment without objection or seeking help.

Score: 2 (Rarely)

Interpretation: Anjali occasionally understands that she is suitable for dignity and respect, but often needs assistance or prompts to recognise and assert these rights.

Scenario: When Anjali is spoken to harshly by peers, she sometimes realises that she deserves to be treated better, but she rarely stands up for herself. She may occasionally seek help from a teacher when prompted, but she generally needs support to understand and assert her right to dignity and respect.

Score: 3 (Sometimes)

Interpretation: Anjali sometimes understands her right to dignity and respect and occasionally asserts these rights. She needs to be more consistent and might need some support or reminders.

Scenario: Anjali knows she should be treated with respect in most environments. She sometimes speaks up for herself when she feels disrespected, such as being ignored during group activities. However, she often needs teachers' or caregivers' encouragement to assert her right to dignity and respect.

Score: 4 (Often)

Interpretation: Anjali frequently understands her right to dignity and respect and can assert these rights with minimal support.

Scenario: In most environments, such as at school or social gatherings, Anjali recognises when she is not treated with dignity and respect. She often speaks up for herself when disrespected and seeks support only occasionally. For instance, if a classmate makes a rude comment, Anjali will likely address it directly or report it to a teacher without hesitation.

Score: 5 (Very Often)

Interpretation: Anjali consistently and independently understands her suitability for dignity and respect. She can articulate these rights clearly without any external prompts or support.

Scenario: Anjali is highly aware of her right to be treated with dignity and respect in all environments. She consistently stands up for herself when disrespected at home, school or the community. She confidently addresses situations where her rights are violated and takes proactive steps to ensure she is treated fairly. For example, if a service provider speaks to her dismissively, Anjali would immediately address the issue and ensure her concerns are heard and respected.

If {Assessment Item-24}: "I can manage my daily living activities independently."

Score: 1 (Not at All)

Interpretation: Anjali is unable to manage her daily living activities independently. She relies heavily on others for most tasks and needs more support.

Scenario: Anjali requires help with basic tasks such as dressing, bathing, and preparing meals. She cannot perform these activities without constant supervision and support from a caregiver.

Score: 2 (Rarely)

Interpretation: Anjali occasionally manages some of her daily activities independently but often needs assistance. She can perform simple tasks independently but requires significant support for more complex activities.

Scenario: Anjali can occasionally dress herself if her clothes are laid out for her, but needs help with tasks like cooking or managing personal hygiene. She often needs reminders and assistance from family members to complete these activities.

Score: 3 (Sometimes)

Interpretation: Anjali sometimes manages her daily living activities independently. She can perform some tasks without help, but requires occasional support or reminders from others.

Scenario: Anjali can independently manage simple tasks like making a sandwich or brushing her teeth. However, she needs occasional reminders to take her medication or assistance with more complex tasks like grocery shopping.

Score: 4 (Often)

Interpretation: Anjali frequently manages her daily living activities independently. She can perform most tasks with minimal support and only needs assistance in certain situations.

Scenario: Anjali can independently handle most daily activities, such as cooking basic meals, doing laundry, and maintaining personal hygiene. She may need minimal support for tasks that require more complex planning or execution, like managing a budget.

Score: 5 (Very Often)

Interpretation: Anjali consistently manages her daily living activities independently. She is highly self-sufficient and rarely requires assistance, demonstrating strong skills in managing her daily routine.

Scenario: Anjali independently manages all her daily activities, including cooking, cleaning, and managing her finances. She is confident and self-reliant, rarely needing help from others. She effectively plans and executes her daily tasks without supervision.

If {Assessment Item-25}: "I know when and how to seek help for daily living tasks."

Score: 1 (Not at All)

Interpretation: Anjali must recognise when she needs help with daily living tasks. She rarely, if ever, seeks help from others and struggles significantly with managing daily tasks independently.

Scenario: Anjali consistently attempts to manage her daily living tasks, such as cooking, cleaning, and personal hygiene, without seeking any assistance, even when she is struggling. For example, she tries to cook meals without knowing how to use kitchen appliances safely, resulting in inedible or unsafe meals. She does not ask for help and often ends up in challenging situations due to her lack of awareness about when and how to seek assistance.

Score: 2 (Rarely)

Interpretation: Anjali occasionally recognises the need for help but does not often act on it. She may struggle with asking for help due to a lack of understanding or confidence and seldom seeks assistance, preferring to manage independently even when it leads to difficulties.

Scenario: Anjali rarely asks for help with daily grocery shopping or laundry tasks. She might sometimes acknowledge that she needs help, for instance, when she cannot reach items on high shelves or struggles with operating the washing machine. However, she still needs to attempt to complete these tasks independently, resulting in partially completed or incorrectly done chores.

Score: 3 (Sometimes)

Interpretation: Anjali sometimes recognises when she needs help and occasionally asks for assistance. She has a basic understanding of when help is necessary, but may not consistently seek it. She might ask for help in more challenging situations, but tries to handle more manageable tasks independently.

Scenario: Anjali sometimes asks for help managing her medication schedule, recognising the importance of taking medications correctly. For example, she occasionally seeks assistance from a caregiver to ensure she takes the proper doses at the correct times. However, she often tries to manage independently for more straightforward tasks like meal preparation and only asks for help when struggling.

Score: 4 (Often)

Interpretation: Anjali often recognises when she needs help and frequently asks for assistance. She understands her limitations well and is comfortable seeking help when needed. She manages daily tasks independently but quickly asks for help in more challenging situations.

Scenario: Anjali frequently asks for help with complex financial tasks, such as paying bills or managing a budget. She understands the importance of these tasks and regularly seeks assistance from her parents or a financial advisor to ensure they are completed correctly. She handles routine tasks like cleaning or organising her room independently, but will ask for help if something unexpected arises.

Score: 5 (Very Often)

Interpretation: Anjali consistently recognises when she needs help and proactively seeks assistance. She has a strong understanding of her limitations and is very comfortable asking for help. She manages daily tasks effectively by balancing independence and seeking help as needed.

Scenario: Anjali often asks for help with daily living tasks when she recognises a need. For example, she consistently seeks assistance when learning new cooking techniques or handling repairs around the house. She proactively seeks help from her family, friends, or professionals, ensuring she completes tasks efficiently and safely. Her ability to balance independence with seeking help demonstrates high self-awareness and self-determination.

Basic Support Strategies Recommended for Anjali:

Levels of Self-Determination and Self-Advocacy Skills help categorise Anjali's abilities and clearly understand her strengths and areas needing improvement. Each level comes with tailored support strategies to enhance Anjali's skills.

{Support Strategies:}

1. Low Self-Determination/Self-Advocacy Skills (1-40)

Support Strategies:

1. Provide Extensive Support and Guidance:

- Ensure that Anjali has consistent access to a supportive environment where she can receive guidance and encouragement.

2. Use Simple, Clear, and Concrete Instructions:

- Straightforwardly communicate instructions, breaking down complex tasks into smaller, manageable steps.

3. Implement Structured Routines and Step-by-Step Problem-Solving Activities:

- Develop daily routines that Anjali can follow, including step-by-step problem-solving exercises to build her confidence and skills.

4. Encourage Small, Achievable Goals to Build Confidence and Skills Gradually:

- Set small, attainable goals for Anjali, gradually celebrating her achievements to build her self-esteem and motivation.

2. Moderate Self-Determination/Self-Advocacy Skills (41-80)

Support Strategies:

1. Provide Targeted Support and Guidance Where Needed:

- Identify specific areas where Anjali needs support and provide targeted assistance to help her improve.

2. Encourage Self-Reflection and Self-Assessment:

- Promote activities that encourage Anjali to reflect on her strengths and weaknesses, helping her develop a more consistent understanding of her abilities.

3. Offer Opportunities for Practice and Reinforcement of Self-Advocacy Skills:

- Create scenarios where Anjali can practice self-advocacy skills, reinforcing her confidence in expressing her needs and standing up for her rights.

4. Use Visual Aids, Checklists, and Reminders to Support Independent Functioning:

- Provide visual aids, checklists, and reminders to help Anjali manage her tasks independently and enhance her organisational skills.

3. High Self-Determination/Self-Advocacy Skills (81-120)

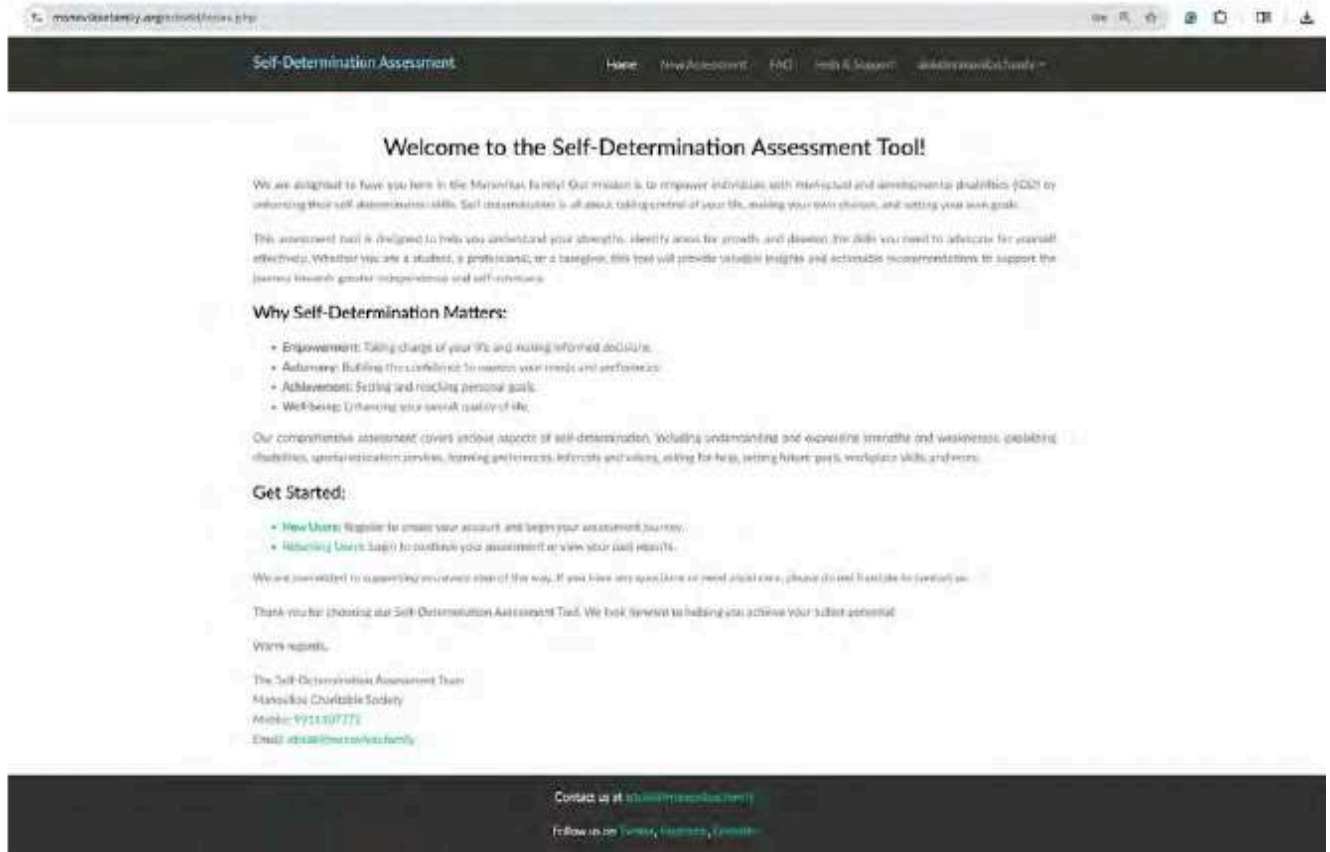
Support Strategies:

- 1. Provide Opportunities for Further Skill Development and Leadership:**
 - Offer Anjali roles and responsibilities that challenge her skills and promote further development, such as leadership positions in group activities.
- 2. Encourage Participation in Self-Advocacy Groups or Activities:**
 - Facilitate Anjali's involvement in self-advocacy groups or activities where she can share her experiences and learn from others.
- 3. Facilitate Opportunities for Peer Mentoring or Coaching:**
 - Encourage Anjali to mentor or coach peers, allowing her to reinforce her skills while helping others develop theirs.
- 4. Support Continued Personal Growth and Development Through Goal-Setting and Reflection:**
 - Help Anjali set new, challenging goals and regularly reflect on her progress, fostering a continuous growth mindset.

8. Web Application of SDS-IDD

The Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) (Indian Version) is a **free web-based application available to the public**.

The digital platform, accessible at **<https://manovikasfamily.org/sdsidd/>**, was designed to ensure accessibility, ease of use, and reliability for individuals with intellectual and developmental disabilities (IDD) and their supporting stakeholders.



1. Home Page

Features:

- Introduction to the Self-Determination Assessment
- Overview of the process and its importance
- Navigation links to other pages

Components:

- Welcome message
- Brief description of the application
- Navigation menu

Self-Determination Scale for

Individuals with Intellectual and Developmental Disabilities

(SDS-IDD) (Indian Version)

Navigation menu

Home: Links to the homepage where users can learn about the assessment tool.

Register: Allows new users to sign up and create an account.

Login: This is for returning users to log into their accounts.

Dashboard: The main page for logged-in users, showing an overview of their assessments and options to start a new one or view past reports.

New Assessment: Direct link to start a new self-determination assessment.

Profile: This page allows users to manage and update their personal information.

Reports: Access to view and download past assessment reports.

Help & Support: Provides FAQs, contact information, and resources for additional support.

Logout: Allows users to log out of their account securely.

Welcome Message

Welcome to the Self-Determination Assessment Tool!

We are delighted to have you here in the Manovikas Family! Our mission is to empower individuals with intellectual and developmental disabilities (IDD) by enhancing their self-determination skills. Self-determination is all about taking control of your life, making your own choices, and setting your own goals.

This assessment tool is designed to help you understand your strengths, identify areas for growth, and develop the skills you need to advocate for yourself effectively. Whether you are a student, a professional, or a

caregiver, this tool will provide valuable insights and actionable recommendations to support the journey towards greater independence and self-advocacy.

Why Self-Determination Matters:

- **Empowerment:** Taking charge of your life and making informed decisions.
- **Autonomy:** Building the confidence to express your needs and preferences.
- **Achievement:** Setting and reaching personal goals.
- **Well-being:** Enhancing your overall quality of life.

Our comprehensive assessment covers various aspects of self-determination, including understanding and expressing strengths and weaknesses, explaining disabilities, special education services, learning preferences, interests and values, asking for help, setting future goals, workplace skills, and more.

Get Started:

- **New Users:** Register to create your account and begin your assessment journey.
- **Returning Users:** Log in to continue your assessment or view your past reports.

We are committed to supporting you every step of the way. If you have any questions or need assistance, please do not hesitate to contact us.

Thank you for choosing our Self-Determination Assessment Tool. We look forward to helping you achieve your fullest potential!

Warm regards,

The Self-Determination Assessment Team
Manovikas Charitable Society

M: 9911107772

E: sdsidd@manovikas.family

Introduction to the Self-Determination Assessment

Empowering Individuals with Intellectual and Developmental Disabilities

The Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) (Indian Version) was developed by the Manovikas Charitable Society in Delhi, India. Self-determination is a critical aspect of personal growth and autonomy, especially for individuals with intellectual and developmental disabilities (IDD). It encompasses the ability to make choices, set goals, and take control of one's own life. The Self-Determination Assessment is a comprehensive tool designed to evaluate and enhance these essential skills, empowering individuals with IDD to lead more independent and fulfilling lives. [\(Read More\)](#)

What is the Self-Determination Assessment?

The Self-Determination Assessment is a structured evaluation tool that measures an individual's ability to self-advocate, make decisions, and manage their own lives. It is specifically tailored for individuals with IDD, considering their unique needs and challenges. The assessment covers various aspects of self-determination, including:

1. **Understanding and Expressing Strengths and Weaknesses:** Evaluate the individual's awareness of their abilities and areas for improvement.
2. **Explaining Disability:** Assesses how well the individual can describe their disability and communicate their needs.
3. **Special Education Services:** Looks at confidence in expressing interests and values in educational settings.
4. **Learning Preferences and Challenges:** Identifies preferred learning methods and barriers to learning.
5. **Interests and Values:** Examines the individual's ability to communicate their plans and awareness of their rights.
6. **Asking for Help and Assertiveness:** Measures comfort in seeking assistance and asserting needs.

7. **Future Goals and Rights:** Evaluate the ability to gather information, make decisions, and set goals.
8. **Confidence and Communication:** Assesses problem-solving skills and the ability to plan for goals.
9. **Workplace Skills and Independence:** Measures punctuality, ability to follow a schedule, and work independently.
10. **Physical and Mental Health Awareness:** Evaluate the importance of caring for physical and mental health.
11. **Understanding Abuse and Dignity:** This course assesses the ability to recognise abusive situations and understand the right to dignity and respect.
12. **Performing Activities of Daily Living:** Measures the ability to manage daily living activities independently.

Why is Self-Determination Important?

Self-determination is foundational to personal empowerment and quality of life. For individuals with IDD, it provides the tools needed to:

- Make informed choices and decisions.
- Advocate for their own needs and rights.
- Set and achieve personal goals.
- Enhance their participation in educational, social, and vocational settings.
- Improve their overall well-being and sense of autonomy.

How Does the Assessment Work?

The Self-Determination Assessment involves a series of structured questions that individuals respond to, indicating how well each statement applies to them. The responses are then analysed to determine the individual's level of self-advocacy and self-determination, categorised as low, moderate, or high. Based on the results, a detailed report is generated, highlighting strengths, areas for improvement, and specific recommendations for enhancing self-determination skills.

Using the Assessment

The assessment can be used by educators, caregivers, and professionals working with individuals with IDD. It provides valuable insights that can inform individualised support plans and interventions to foster greater independence and self-determination.

Conclusion

The Self-Determination Assessment is vital in empowering individuals with intellectual and developmental disabilities (IDD). Understanding and enhancing self-determination skills can help IDD individuals achieve their full potential and lead more self-directed, satisfying lives.

2. User Registration and Login

Features:

- User registration form
- Login form for returning users
- Password recovery option

Components:

- Input fields for user details (name, email, password)
- Buttons for registration and login
- Links to password recovery and registration

Features Breakdown

1. User Registration Form:

- Collects user information, including name, email, mobile number and password.
- Includes a password confirmation field to ensure the user enters the correct password.

- Provides feedback if passwords do not match.
- 2. Login Form for Returning Users:**
 - Collects email and password for user authentication.
 - Redirects users to their dashboard upon successful login.
- 3. Password Recovery Option:**
 - Provides a link to a password recovery page.
 - Allows users to reset their password if they forget it.

3. Dashboard

Features:

- Overview of the user's assessments
- Navigation to start a new evaluation or view past reports

Components:

- Summary of completed assessments
- Button to start a new assessment
- Links to view detailed reports

Components: Dashboard Features

The dashboard is the central hub for users to manage their self-determination assessments. Here are the key components and features of the dashboard:

1. Overview of the User's Assessments

Description: This section provides a snapshot of the user's assessment activity. It includes basic statistics such as the number of assessments completed, the date of the last evaluation, and the overall self-advocacy level.

Components:

- **Assessment Summary Card:** A visual card displaying the total number of assessments completed.
- **Last Assessment Date:** The date of the most recent assessment.
- **Overall Self-Advocacy Level:** A quick view of the user's current self-advocacy status.

2. Navigation to Start a New Evaluation or View Past Reports

Description: This section provides easy navigation for users to start a new assessment or to view their past reports. It prominently encourages users to take new assessments or review their progress.

Components:

- **New Assessment Button:** A button that directs the user to the latest assessment form.
- **View Past Reports Link:** A page where users can access detailed reports of their previous assessments.

3. Summary of Completed Assessments

Description: This section summarises each completed assessment, including the date, self-advocacy level, and a link to the detailed report.

Components:

- **Assessment List:** A list of past assessments with key details.
- **Report Link:** A link to view the full report of each assessment.

4. Button to Start a New Assessment

Description: A prominent button that allows users to begin a new self-determination assessment. This feature is essential for users to continuously monitor and improve their self-advocacy skills.

Components:

- **New Assessment Button:** Clearly labelled and styled to stand out.

5. Links to View Detailed Reports

Description: This service gives users access to detailed reports of their completed assessments. Each report includes comprehensive feedback on their self-determination skills, strengths, areas for improvement, and personalised recommendations.

Components:

- **Report Links:** Direct links to detailed assessment reports.

4. New Assessment

Features:

- Form to input:
 1. Demographic Data
 2. Consent Form
 3. Self-Determination Assessment
- Progress indicator to show completion status

Components:

- Input fields and radio buttons for
 - 1 Demographic Data
 2. Consent Form
 3. Self-Determination Assessment [\(Link to Use File\)](#)
- Progress bar
- Submit button

5. Assessment Processing

Features:

- Backend processing of the assessment data
- Calculation of self-advocacy levels and other metrics

Components:

- Invisible to users, the backend handles this

Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (IDD) (Indian Version)

To exit full screen, press and hold esc

Consent for Participation in Self-Determination Assessment

Demographic Information Form

Personal Information

Name:

Date of Birth:

Age:

Gender:

Religion:

Marital Status:

Living Situation:

Education and Employment

Highest Level of Education Completed:

Current Employment Status:

Diagnosis and Disability Information

If you have a disability, please provide relevant documents or such as Disability Certificate, UDID Card, Diagnostic Prescription, or any other relevant documents.

1. Data Processing

Description: Processes the raw data to calculate assessment scores, levels of self-advocacy, and other metrics.

Components:

- **Scoring Algorithms:** To calculate scores based on user responses.
- **Level Determination:** To classify users into different self-advocacy levels (Low, Moderate, High).

4. Data Analysis

Description: Analyses the processed data to identify strengths and areas for improvement and generates recommendations.

Components:

- **Strength and Weakness Analysis:** To identify key areas where the user excels or needs improvement.
- **Recommendation Engine:** To provide personalised suggestions based on the analysis.

5. Report Generation

Description: Generates detailed assessment reports based on the analysis, which can be viewed online or downloaded as PDFs.

Components:

- **HTML Report Renderer:** To create web-based reports.
- **PDF Generation Library:** To generate downloadable PDF reports.

6. Notification System (Optional)

Description: Sends notifications to users about their assessment results and recommendations.

Components:

- **Email Notification Service:** Send alerts with assessment summaries and links to detailed reports.

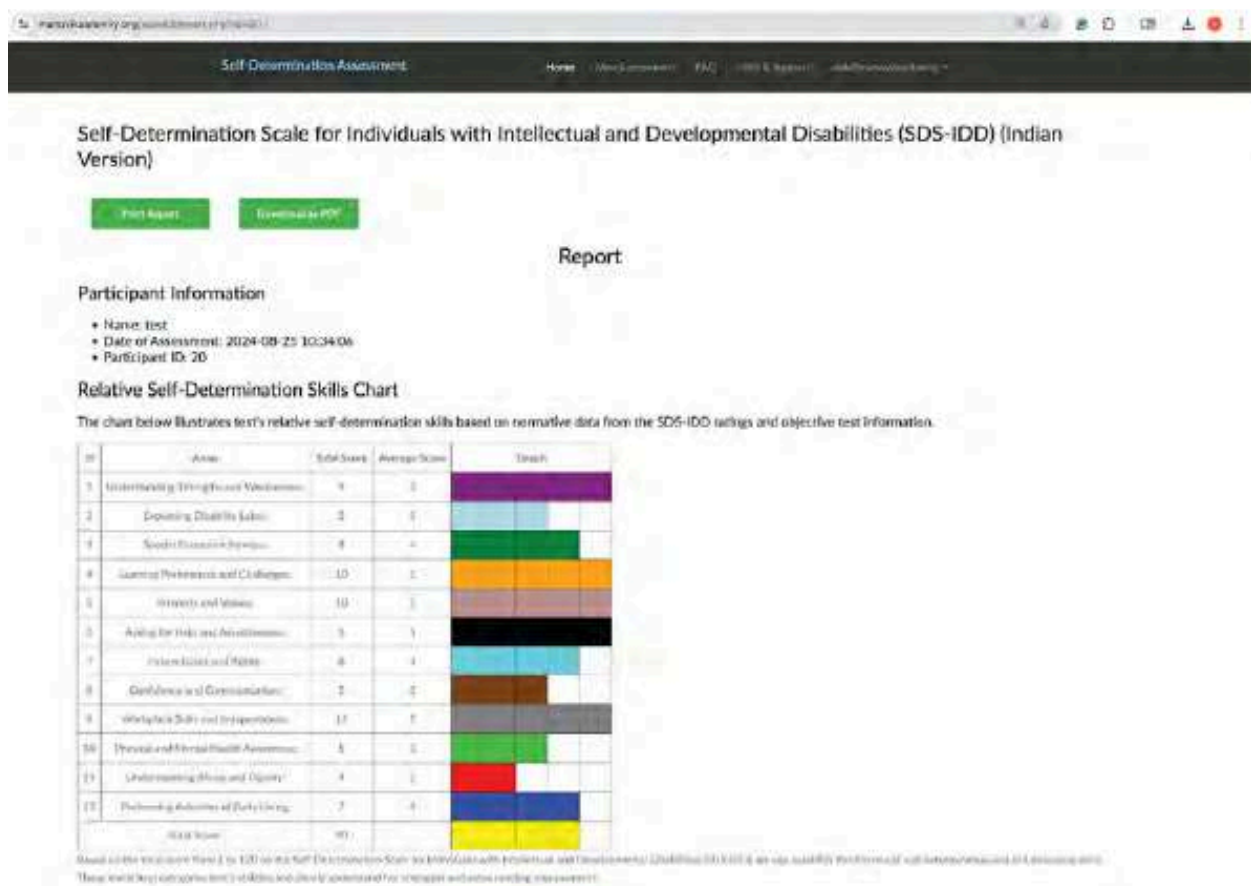
6. Assessment Report

Features:

- Display of the assessment results
- Detailed report including levels of self-advocacy, strengths, areas for improvement, and recommendations
- Option to download the report as a PDF

Components:

- Sections for overall results, strengths, areas for improvement, and recommendations
- Button to download the report as a PDF



7. Profile Management

Features:

- User profile details and management
- Update personal information
- Change password

Components:

- Input fields for updating profile details
- Button to save changes
- Link to change password

8. Admin Panel Features:

- Manage users and assessments
- View and edit assessments
- **Generate aggregate reports**

Components:

- User management section
- Assessment management section
- Reporting tools

9. Help and Support

Features:

- FAQs about the assessment process ([View Doc](#))
- Contact form for support
- Resource links

Components:

- [List of frequently asked questions](#)
- Contact form with input fields for name, email, and message
- Links to external resources and documentation

10. Logout

Features:

- Log the user out of their account and return to the home page

Components:

- Logout button

FAQs About the Self-Determination Assessment Process

Q1: What is the Self-Determination Assessment?

A: The Self-Determination Assessment evaluates and enhances self-determination and self-advocacy skills in individuals with intellectual and developmental disabilities (IDD). It measures various aspects of self-determination, including decision-making, goal-setting, and self-advocacy.

Q2: Who should take the Self-Determination Assessment?

A: The assessment is intended for individuals with IDD, their caregivers, educators, and professionals working with this population. It helps identify strengths and areas for improvement and provides actionable recommendations for fostering greater independence and self-advocacy.

Q3: How long does the assessment take to complete?

A: The assessment typically takes between 20 to 30 minutes to complete, depending on the individual's pace and level of understanding.

Q4: What types of questions are included in the assessment?

A: The assessment includes various questions that evaluate different aspects of self-determination. These questions are designed to be easy to understand and answer, covering areas such as understanding and expressing strengths and weaknesses, explaining disabilities, learning preferences, and more.

Q5: How is the assessment scored?

A: Each question in the assessment is rated on a scale from 1 to 5, with higher scores indicating a higher level of self-determination. The total score is then used to classify the individual into one of three levels of self-advocacy: Low, Moderate, or High.

Q6: What happens after I complete the assessment?

A: After completing the assessment, your responses will be processed and analysed. You will receive a detailed report that includes your overall self-advocacy level, strengths, areas for improvement, and personalised recommendations for enhancing your self-determination skills.

Q7: Can I retake the assessment?

A: Yes, you can retake the assessment as often as needed. This can be useful for tracking your progress over time and adjusting your personal development plan accordingly.

Q8: Is my assessment data confidential?

A: Yes, all information collected during the assessment is kept confidential. Your data is securely stored and only accessible to authorised personnel involved in the assessment process. We adhere to strict privacy policies to protect your information.

Q9: Can caregivers or educators assist with the assessment?

A: Yes, caregivers or educators can assist individuals with IDD in understanding and responding to the assessment questions. However, the responses must reflect the individual's perceptions and experiences.

Q10: How are the recommendations generated?

A: Based on the analysis of your assessment responses, the system generates recommendations. It identifies key areas where you excel and where you may need additional support, providing personalised suggestions to help you improve your self-determination skills.

Q11: What should I do if I need help understanding the assessment results?

A: Contact our support team if you need help understanding your assessment results. We are here to help you interpret the findings and develop a plan to enhance your self-determination skills.

Q12: How can I access my past assessment reports?

A: You can access your past assessment reports by logging into your account on our platform. Navigate to the "Reports" section to view and download detailed information about your previous assessments.

9. Reference

While we can't provide an exhaustive bibliography due to the limitation of response length, we can offer you a selection of key references and sources relevant to this research on empowering independence and self-determination in adults with intellectual and developmental disabilities.

Books:

1. Wehmeyer, M. L. (Ed.). (2001). "Self-determination and individuals with significant disabilities: Examining meanings and misinterpretations." Paul H Brookes Publishing.
2. Powers, L. E., Geenen, S., Powers, J., & Pommier-Satya, S. (Eds.). (2012). "The road ahead: Transition to adult life for persons with disabilities." Paul H Brookes Publishing.

Research Articles:

1. Abery, B. H., Stancliffe, R. J., Smith, J., & Cumming, T. (2003). "Assessment of self-determination in young adults with mental retardation." *Journal of Developmental and Physical Disabilities*, 15(2), 135-153.
2. Shogren, K. A., Lopez, S. J., Wehmeyer, M. L., Little, T. D., & Pressgrove, C. L. (2006). "The role of positive psychology constructs in predicting life satisfaction in adolescents with and without cognitive disabilities: An exploratory study." *The Journal of Positive Psychology*, 1(1), 37-52.
3. Palmer, S. B., Wehmeyer, M. L., Davies, D. K., & Stock, S. E. (2011). "Family members' and friends' perceptions of the social interactions of adults with intellectual disability who use facilitated communication: A comparative study." *Journal of Intellectual and Developmental Disability*, 36(1), 26-35.
4. AAIDD, *Intellectual Disability: Definition, Diagnosis, Classification, and Systems of Supports*, (2021) 12th Edition, Edition: 12, ISBN: 978-0-9983983-6-5, 2021
5. Abery, B., & Stancliffe, R. (2003). An ecological theory of self-determination:
6. Theoretical foundations. In M.L. Wehmeyer, B. Abery, D. Mithaug, & R. Stancliffe (Eds.), *Theory in self-determination: Foundations for educational practice* (pp. 25-42). Springfield, IL: Charles C. Thomas Publishing Co.

7. Agran, M., Snow, K., & Swaner, J. (1999). Teacher perceptions of self-determination: Benefits, characteristics, strategies. *Education and Training in Mental Retardation and Developmental Disabilities*, 293-301.
8. Alkin, M. C. (2004). *Evaluation roots: Tracing theorists' views and influences*. Thousand Oaks, CA: Sage Publications.
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10. Ankeny, E. M., & Lehmann, J. P. (2011). Journey Toward Self-Determination: Voices of Students With Disabilities Who Participated in a Secondary Transition Program on a Community College Campus. *Remedial and Special Education*, 32(4), 279- 289.

Government Reports and Policy Documents:

1. National Education Policy 2020, Ministry of Human Resource Development, Government of India
2. The National Education Policy 2020, 2 Years of Implementation, November 2022, Department of School Education, Ministry of Education
3. Rights of Persons with Disabilities Act, 2016,
4. The United Nations General Assembly adopted the United Nations Convention on the Rights of Persons with Disabilities adopted its Convention on the Rights of Persons with Disabilities on the 13th day of December 2006. Retrieved from <https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-ppersons-with-disabilities.html>
5. U.S. Department of Education. (2017). "Transition guide to postsecondary education and employment for students and youth with disabilities." Retrieved from <https://www2.ed.gov/about/offices/list/osers/transition/products/postsecondary-tttransition-guide-2017.pdf>

Academic Journals:

1. Intellectual and Developmental Disabilities Journal, published by the American Association on Intellectual and Developmental Disabilities, contains numerous relevant articles.

Websites and Organisations:

1. Manovikas: <https://manovikasfamily.org/gyanshala/>
2. American Association on Intellectual and Developmental Disabilities (AAIDD): <https://www.aaidd.org/>
3. The Arc: <https://www.thearc.org/>
4. National Down Syndrome Society (NDSS): <https://www.ndss.org/>
5. The Centre for Self-Determination: <https://www.centerforselfdetermination.com/>

10. Appendix

Appendix A:

English Easy to Read Version

Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) (Indian Version)

Appendix B:

हिंदी में पढ़ने में आसान संस्करण

बौद्धिक और विकासात्मक दिव्यांगजनों के लिए स्वयं से निर्णय के लेने का मापन
(एसडीएस-आईडीडी) (भारतीय संस्करण)

Appendix A:

English Easy to Read Version

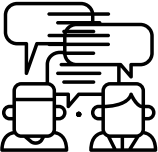
Self-Determination Scale for Individuals with
Intellectual and Developmental Disabilities
(SDS-IDD) (Indian Version)



Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) (Indian Version)

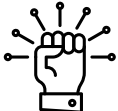


This scale assesses an individual's self-determination and self-advocacy skills. Please rate each statement according to how well it applies to you.

	Statement	 Not at All (1)	 Rarely (2)	 Sometimes (3)	 Often (4)	 Very Often (5)
	(1) I know what I'm good at and the areas that need improvement.					
	(2) I can explain my disability.					
	(3) I can tell others how I learn best.					

	Statement	 Not at All (1)	 Rarely (2)	 Sometimes (3)	 Often (4)	 Very Often (5)
	(4) I can tell others what doesn't help me learn.					
	(5) I am confident in expressing my interests.					
	(6) I am confident in expressing my values.					
	(7) I can ask for help without getting upset.					
	(8) I can communicate what I want to learn.					

	Statement	 Not at All (1)	 Rarely (2)	 Sometimes (3)	 Often (4)	 Very Often (5)
	(9) I can communicate my ' plans for the future.					
	(10) I can make plans to achieve my goals.					
	(11) I can communicate my needs to teachers.*1					
	(12) I can communicate my needs to work supervisors.*2					
	(13) I can gather information.					

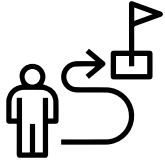
	Statement	 Not at All (1)	 Rarely (2)	 Sometimes (3)	 Often (4)	 Very Often (5)
	(14) I can make decisions.					
	(15) I can solve problems.					
	(16) I can make plans to achieve my goals.					
	(17) I am punctual.					
	(18) I can follow a schedule.					

	Statement	 Not at All (1)	 Rarely (2)	 Sometimes (3)	 Often (4)	 Very Often (5)
	(19) I can work independently.					
	(20) I understand the importance of taking care of my physical health.					
	(21) I understand the importance of taking care of my mental health.					
	(22) I know what abuse is and can identify abusive situations.					
	(23) I understand my right to dignity and respect in all environments.					

	Statement	 Not at All (1)	 Rarely (2)	 Sometimes (3)	 Often (4)	 Very Often (5)
	(24) I can manage my daily living activities independently.					
	(25) I know when and how to seek help for daily living tasks.					
	Total Score					



Scoring



Setting clear scoring criteria involves defining what each response option (1 to 5) represents regarding the measured construct—in this case, self-determination and self-advocacy levels.



Here's how to establish clear scoring criteria for the questions:



(1) I know what I'm good at and the areas that need improvement.



1 Not at All (1): The individual must know their strengths and weaknesses. They are still trying to identify areas where they excel or need improvement.



2 Rarely (2): The individual occasionally recognises their strengths and weaknesses but often needs assistance or prompts to identify these areas.



3 Sometimes (3): The individual sometimes identifies their strengths and weaknesses but needs to be more consistent. They might need some support or reminders to do so.



4 Often (4): The individual frequently knows their strengths and weaknesses and can identify them with minimal support.



5 Very Often (5): The individual consistently and independently recognises their strengths and weaknesses. They can articulate these areas clearly without any external prompts or support.



Example Scenarios



Score: 1 (Not at All) Scenario: Ramesh is asked what he is good at and what areas he needs to improve. He cannot provide specific examples or regions, and the question needs clarification. He needs to recognise his strengths and weaknesses with significant help.



Score: 2 (Rarely) Scenario: Priya can occasionally mention that she is good at drawing when prompted by her teacher but needs to identify other strengths or weaknesses with additional prompts. She acknowledges her areas for improvement with significant support.



Score: 3 (Sometimes) Scenario: Vikram sometimes knows he is good at sports and struggles with math. However, he often needs reminders from his parents or teachers to identify these areas. He can articulate his strengths and weaknesses in familiar situations, but only sometimes.



Score: 4 (Often) Scenario: Anjali often recognises that she excels in singing and needs to manage her time. She can usually identify her strengths and weaknesses with minimal support from her counsellor. Anjali is proactive in seeking feedback to understand her areas for improvement.



Score: 5 (Very Often) Scenario: Sanjay consistently and independently identifies his strengths in writing and his need to improve his public speaking skills. He can clearly articulate these areas without prompts and regularly seeks opportunities to enhance his skills. He demonstrates a strong awareness of his abilities and areas for growth.



(2) I can explain my disability.



1 (Not at All): The individual cannot explain their disability. They have no understanding or awareness of their condition.



2 (Rarely): The individual can only explain their disability in a limited way and often struggles to understand or articulate it.



3 (Sometimes): The individual can explain their disability in some situations but may lack consistency and depth in their understanding and explanation.



4 (Often): The individual can usually explain their disability accurately and with some detail but may occasionally require assistance or prompts.



5 (Very Often): The individual can consistently and independently explain their disability clearly, accurately, and with confidence in various contexts.



Example Scenarios



Score 1: Not at All Scenario: Ravi, a young man with a developmental disability, is asked by his teacher about his condition. He looks confused and says, "I don't know." He is unable to provide any details or demonstrate any understanding of his disability.



Score 2: Rarely Scenario: Sita, who has an intellectual disability, can occasionally mention her disability when asked. However, she struggles to explain what it is or how it affects her daily life, often giving vague or incorrect answers.



Score 3: Sometimes Scenario: Arjun, a teenager with a learning disability, can sometimes explain that his disability makes reading and writing difficult for him. However, he often needs to catch up on essential details and consistently provide a clear explanation, depending on his comfort level and who he is talking to.

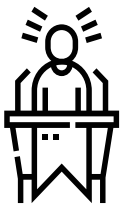


Score 4: Often Scenario: Priya, an adult with a physical disability, usually explains her condition accurately. She can tell others that she has cerebral palsy, which affects her muscle control and movement. She explains this well in most situations but occasionally needs reminders or assistance to provide complete information.



Score 5: Very Often Scenario: Aman, a young adult with autism, can consistently and independently explain that he has autism, which affects how he communicates and interacts with others. He describes specific challenges he faces and the strategies he uses to manage them, doing so confidently and clearly in various settings, such as at school, work, or social gatherings.

Application of Scoring Criteria: When administering this question, the evaluator should consider the individual's ability to explain their disability across different contexts and over time. The evaluator should look for consistency, depth of understanding, and the individual's ability to articulate their condition clearly and confidently.



(3) I can tell others how I learn best.



1 (Not at All): The individual cannot express how they learn best. They might need help understanding their learning preferences or communicating them to others.



2 (Rarely): The individual can occasionally express how they learn best but struggles to do so consistently. They might only communicate their learning preferences when prompted by someone else.



3 (Sometimes): The individual sometimes can tell others how they learn best, but it is not a regular practice. They can express their preferences in familiar settings or with familiar people but struggle in new or challenging situations.



4 (Often): The individual frequently tells others how they learn best and can do so in most situations. They are generally aware of their learning preferences and can communicate them to teachers, supervisors, or peers without hesitation.



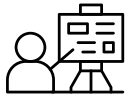
5 (Very Often): The individual consistently and confidently tells others how they learn best in various settings and situations. They are self-aware of their learning preferences and proactively communicate with them to ensure they receive the necessary support.



Example Scenarios



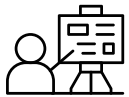
Score: 1 (Not at All) Scenario: Raj is in a classroom setting where the teacher asks students about their preferred learning methods. Raj cannot articulate his preferences and stays silent or gives an unrelated answer.



Explanation: Raj does not know how to communicate his learning preferences and has difficulty understanding or expressing them.



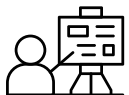
Score: 2 (Rarely) Scenario: Priya occasionally tells her parents that she learns better with visual aids. However, at school, she seldom informs her teachers and follows whatever method is provided without commenting.



Explanation: Priya can express her learning preferences but does so infrequently and mainly when prompted by a familiar person.



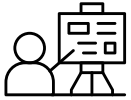
Score: 3 (Sometimes) Scenario: Aman can sometimes tell his tutor that he understands concepts better through hands-on activities. However, he needs help communicating this preference in a more extensive classroom or a new environment.



Explanation: Aman knows his learning preferences and can express them in certain situations, but needs more consistency and confidence in diverse settings.



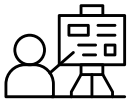
Score: 4 (Often) Scenario: Deepa often informs her teachers that she learns best through group discussions and practical examples. She usually speaks up about learning strategies during parent-teacher meetings or classroom discussions.



Explanation: Deepa frequently confidently communicates her learning preferences in most settings.



Score: 5 (Very Often) Scenario: Arjun consistently tells his instructors and peers that he learns best through visual aids and interactive sessions. He proactively discusses his learning needs at the beginning of each course and ensures that his preferences are known in various settings, including new ones.



Explanation: Arjun is self-aware and proactive in communicating his learning preferences, ' ensuring his needs are understood and met across different contexts.



(4) I can tell others what doesn't help me learn.



1 (Not at All): The individual must communicate what doesn't help them learn. They might feel unable to express their difficulties or are unaware of how to communicate these issues.



2 (Rarely): The individual must communicate what doesn't help them learn. They may occasionally express their difficulties, but they are inconsistent or occur only with significant prompting.



3 (Sometimes): The individual sometimes communicates what doesn't help them learn. They can express their difficulties in certain situations but might struggle to do so consistently or in various contexts.



4 (Often): The individual often communicates what doesn't help them learn. They regularly express their difficulties and can usually do so across different settings and with other people.



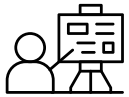
5 (Very Often): The individual very often or always communicates what doesn't help them learn. They consistently and proactively express their difficulties clearly and effectively across all settings and with various people.



Example Scenarios



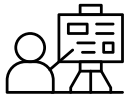
Score: 1 (Not at All) Scenario: Ravi is in a classroom where the teacher gives many verbal instructions. Ravi finds it difficult to follow verbal instructions but never communicates this to the teacher or asks for help. He struggles silently, and his performance suffers.



Explanation: Ravi needs to express what doesn't help him learn, indicating a shallow level of self-determination and self-advocacy.



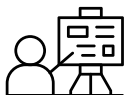
Score: 2 (Rarely) Scenario: Anjali occasionally tells her mother that she can't concentrate when there's too much noise at home. However, she rarely tells her teachers or classmates about this issue, even when it affects her learning.



Explanation: Anjali's communication about what hinders her learning could be more frequent and limited to certain people, showing low self-determination and self-advocacy.



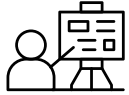
Score: 3 (Sometimes) Scenario: Samir sometimes tells his tutor that he finds it hard to understand written instructions without visual aids. However, he doesn't always communicate this need in his regular school classes, leading to inconsistent support.



Explanation: Samir can express his difficulties in some situations but only sometimes across all settings, reflecting moderate self-determination and self-advocacy.



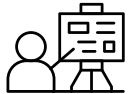
Score: 4 (Often) Scenario: Priya often informs her teachers and family members that she struggles with group work because it makes her anxious. As a result, they provide her with alternative assignments that she can do individually.



Explanation: Priya regularly communicates her difficulties and usually gets the support she needs, showing high self-determination and self-advocacy.



Score: 5 (Very Often) Scenario: Arjun consistently tells his teachers, parents, and peers that he has difficulty understanding when too many instructions are given. He actively seeks accommodations such as written step-by-step instructions and frequently checks in with teachers to meet his needs.



Explanation: Arjun proactively and effectively communicates what doesn't help him learn in all settings, indicating a high level of self-determination and self-advocacy.



(5) I am confident in expressing my interests.



1 (Not at All): Individuals need more confidence in expressing their interests. They rarely or never share their likes, preferences, or passions with others, and they may feel hesitant or unsure about asserting themselves.



2 (Rarely): The individual occasionally expresses their interests but needs more consistent confidence. They may share their likes or preferences with some people or in certain situations but often hesitate or hold back.



3 (Sometimes): The individual demonstrates moderate confidence in expressing their interests. They can share their likes or preferences with others in certain situations but may still feel hesitant or unsure at times.



4 (Often): The individual frequently expresses their interests with confidence. They are comfortable sharing their likes, preferences, or passions with others and do so confidently and assertively in most situations.



5 (Very Often): The individual consistently demonstrates high confidence in expressing their interests. They readily share their likes, preferences, or passions with others and do so confidently and assertively in nearly all situations.



Example Scenarios



Score: 1 (Not at All) Example: "I rarely talk about my hobbies or interests with others because I'm afraid they won't find them interesting."



Score: 2 (Rarely): Example: "I sometimes mention my favorite movies or music, but only if someone asks me directly. Otherwise, I tend to keep it to myself."



Score: 3 (Sometimes): Example: "I'm comfortable sharing my interests with close friends or family members, but I still hesitate to talk about them in larger groups or with people I don't know well."



Score: 4 (Often): Example: "I enjoy discussing my hobbies and interests with anyone who's interested. I don't hesitate to share my passions, whether it's with friends, classmates, or new acquaintances."



Score: 5 (Very Often): Example: "I'm always excited to share my interests with others, and I do so confidently in any situation. Whether it's at school, work, or social gatherings, I never shy away from expressing what I love."



(6 I am confident in expressing my values.



1 (Not at All): The individual rarely expresses their values. They avoid discussing their beliefs or opinions with others. They often feel uncomfortable or hesitant when asked about their values.



2 (Rarely): The individual occasionally expresses their values. They may share their beliefs or opinions with close friends or family but rarely in other settings. They feel somewhat hesitant or unsure when discussing their values.



3 (Sometimes): The individual sometimes expresses their values. Depending on the context, they feel moderately comfortable discussing their beliefs or opinions with others.

They may express their values more confidently in familiar or supportive environments.



4 (Often): The individual frequently expresses their values. They feel confident sharing their beliefs or opinions with various people and situations. They are comfortable discussing their values and advocating for what they believe in.



5 (Very Often): Individuals consistently and confidently express their values. They actively seek opportunities to share their beliefs or opinions with others. They are skilled at advocating for their values and influencing others positively.



Example Scenarios



Score: 1 (Not at All) Scenario: An individual rarely discusses their cultural or religious beliefs with others, even when prompted. They avoid expressing their opinions on social or political issues, fearing disagreement or conflict.



Score: 2 (Rarely) Scenario: An individual occasionally shares their views on specific topics with close friends but avoids discussing them in larger groups or public settings. They may hesitate to express their opinions if they perceive others as disagreeing.



Score: 3 (Sometimes) Scenario: An individual feels moderately comfortable discussing their values with classmates or coworkers but may withhold their opinions in more formal settings. They express their beliefs more confidently among friends or family members who share similar values.



Score: 4 (Often) Scenario: An individual frequently converses about their values and beliefs with peers, coworkers, and community members. They actively participate in discussions on topics they are passionate about and are not deterred by differing viewpoints.



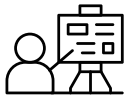
Score: 5 (Very Often) Scenario: An individual consistently speaks up about their values and beliefs in various contexts, including public forums, social gatherings, and work meetings. They are known for their confidence and conviction when advocating for causes they believe in, inspiring others to take action.



(7) I can ask for help without getting upset



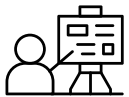
1 (Not at All): Indicates that the individual rarely or never asks for help; when they do, they often get upset or frustrated. They may avoid seeking assistance altogether because they fear feeling embarrassed, incompetent, or judged.



Example: The individual avoids asking for help with tasks, even when they are struggling because they are worried about looking foolish in front of others.



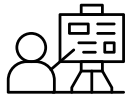
2 (Rarely): Suggests that the individual occasionally asks for help but tends to become upset or frustrated when doing so. They may find it challenging to seek assistance due to concerns about their abilities or fear of rejection.



Example: The individual sometimes asks for help with complex tasks but often feels discouraged or embarrassed when they do.



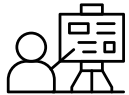
3 (Sometimes): Indicates that the individual can ask for help without getting upset in certain situations but may struggle in others. They may feel more comfortable seeking assistance from certain people or in specific contexts.



Example: The individual can ask for help with simple tasks without feeling upset but may struggle to seek assistance for more complex issues.



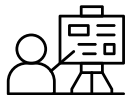
4 (Often): Suggests that the individual frequently asks for help and remains calm and composed. They are confident in their ability to seek assistance and accept support from others without becoming upset.



Example: The individual is proactive about asking for help when needed and can do so without feeling anxious or frustrated.



5 (Very Often): Indicates that the individual consistently and confidently asks for help whenever necessary without experiencing significant distress or negative emotions. They possess solid self-advocacy skills and are comfortable seeking assistance to overcome challenges.



Example: The individual demonstrates high levels of self-determination and self-advocacy by regularly seeking help and maintaining a positive attitude throughout the process.



Example Scenarios



Score: 1 (Not at All) Scenario: A student with intellectual disabilities struggles with a math assignment but refuses to ask the teacher for help because they fear appearing incompetent in front of their classmates. They become increasingly frustrated and agitated as they attempt to complete the task independently.



Score: 2-3 (Rarely and Sometimes) Scenario: An employee with developmental disabilities feels comfortable asking their supervisor for clarification on a task they are unfamiliar with. However, they hesitate to seek help from coworkers as they worry about being judged for their lack of knowledge.



Score: 4-5 (Often and Very Often) Scenario: A young adult with intellectual disabilities confidently approaches their support worker to request assistance with using public transportation. They remain calm and composed throughout the interaction and express gratitude for the help provided.



(8) I can communicate what I want to learn



1 (Not at All): Individuals need help communicating their learning preferences and interests. They have difficulty expressing what they want to learn and may rely heavily on others to decide.



2 (Rarely): The individual occasionally communicates their learning preferences and interests. They may express general ideas about what they want to learn but need help articulating specific details.



3 (Sometimes): The individual sometimes communicates their learning preferences and interests effectively. They can express what they want to learn in certain situations but may struggle with others or require assistance with practical communication.



4 (Often): Individuals frequently communicate their learning preferences and interests. They can consistently express what they want to learn across various situations and effectively advocate for their educational needs.



5 (Very Often): Individuals consistently and confidently communicate their learning preferences and interests. They actively discuss their educational goals, express specific interests, and advocate for opportunities to pursue them.



Example Scenarios



Score: 1 (Not at All) Scenario: An individual with intellectual disabilities finds it challenging to express their learning preferences during meetings with their teachers. They often rely on their parents or caregivers to communicate on their behalf.



Score: 2 (Rarely) Scenario: A young adult with developmental disabilities occasionally mentions their interest in art but struggles to provide specific details about what aspects of art they want to learn more about.



Score: 3 (Sometimes) Scenario: A student with autism spectrum disorder (ASD) can sometimes express their interest in science during classroom discussions but may require visual aids or alternative communication methods to convey their preferences fully.



Score: 4 (Often) Scenario: A college student with Down syndrome frequently communicates their desire to learn computer skills to enhance employability. They actively participate in discussions with their academic advisor to explore relevant course options.



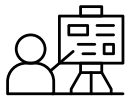
Score: 5 (Very Often) Scenario: A young woman with cerebral palsy consistently expresses her passion for literature and advocates for opportunities to participate in academic and social programmes, writing workshops, and literary events. She confidently communicates her preferences during meetings with her support team and actively seeks out resources to pursue her interests.



(9) I can communicate my plans for the future



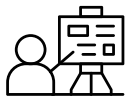
1 (Not at All): The individual cannot communicate plans or goals for their future.



Example: The individual struggles to articulate aspirations or goals for their future, even when prompted.



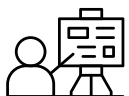
2 (Rarely): The individual occasionally communicates vague or limited plans for their future.



Example: The individual may express general desires or wishes for their future but cannot provide specific details or timelines.



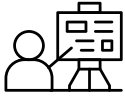
3 (Sometimes): The individual can communicate some plans for their future, but with limited clarity or consistency.



Example: The individual can articulate specific goals or aspirations for their future, but their plans may change frequently or lack concrete steps.



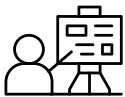
4 (Often): The individual frequently communicates clear and well-defined plans for their future.



Example: The individual consistently discusses their future goals and aspirations with others, providing specific details and demonstrating a clear understanding of their objectives.



5 (Very Often): The individual consistently and confidently communicates their plans for the future in various situations.



Example: The individual actively discusses their plans, confidently expressing their goals, aspirations, and strategies for achieving them.



Example Scenarios



Score: 1 (Not at All) Scenario: An individual with intellectual and developmental disabilities struggles to articulate plans or goals for their future during a discussion with their support team.



Score: 2-3 (Rarely and Sometimes) Scenario: A young adult with disabilities occasionally shares vague aspirations for their future during family gatherings, but their plans lack specificity and consistency.



Score: 4-5 (Often and Very Often) Scenario: A college student with disabilities confidently discusses their long-term career goals and outlines specific steps they are taking to achieve them during a meeting with their academic advisor.



(10) I am aware of my rights as a person with a disability.



1 (Not at All): The individual is unaware of their rights as a person with a disability. They may need to gain more knowledge about their rights, protections, or accommodations available to them.



2 (Rarely): The individual has minimal awareness of their rights as a person with a disability. They may have some basic understanding but need more comprehensive knowledge or experience of their rights.



3 (Sometimes): The individual demonstrates occasional awareness of their rights as a person with a disability. They may be aware of some rights or protections in certain situations but may not consistently apply this knowledge.



4 (Often): The individual frequently demonstrates awareness of their rights as a person with a disability. They consistently seek out information and actively advocate for their rights when necessary.



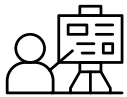
5 (Very Often): The individual consistently and proactively demonstrates a high awareness of their rights as a person with a disability. They are well-informed, assertive, and effective advocates for themselves, actively exercising their rights in various situations.



Example Scenarios



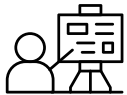
Score: 1 (Not at All) Scenario: An individual with a disability unaware of their rights and protections under disability laws.



Example: A student or person with a disability who is unaware they can request reasonable accommodations in the school or workplace.



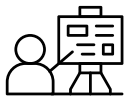
Score: 2 (Rarely) Scenario: An individual with a disability who has heard about their rights but lacks detailed knowledge or understanding.



Example: A student with a disability knows they have some rights at school but is unsure about the specific accommodations they are entitled to.



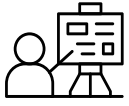
Score: 3 (Sometimes) Scenario: An individual with a disability who is aware of their rights in some situations but may not consistently assert them.



Example: A person with a disability occasionally speaks up about their need for accommodations but hesitates in specific social settings.



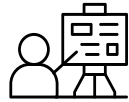
Score: 4 (Often) Scenario: An individual with a disability who actively seeks information about their rights and confidently advocates for themselves when needed.



Example: A worker with a disability who frequently discusses their accommodations with their employer and ensures they receive the support they need to perform their job effectively.



Score: 5 (Very Often) Scenario: An individual with a disability who consistently and assertively exercises their rights in various aspects of life.



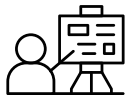
Example: A person with a disability actively involved in disability advocacy groups, knows their rights inside out, and effectively challenges discriminatory practices when encountered.



(11) I can communicate my needs to teachers.



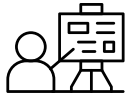
1 (Not at All): Individuals rarely or never communicate their needs to teachers.



Example: The individual struggles to express their needs or preferences to teachers and often remains silent even when encountering difficulties.



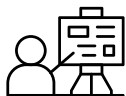
2 (Rarely): The individual occasionally communicates their needs to teachers, but only sometimes.



Example: The individual may express their needs to teachers in certain situations or when prompted, but they are hesitant to do so most of the time.



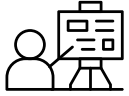
3 (Sometimes): The individual sometimes communicates their needs to teachers.



Example: The individual can express their needs to teachers in specific situations or when they feel comfortable, but they may still avoid doing so in other instances.



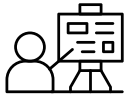
4 (Often): The individual frequently communicates their needs to teachers.



Example: The individual confidently communicates their needs to teachers in various situations, such as requesting accommodations, seeking clarification, or expressing concerns.



5 (Very Often): The individual consistently and effectively communicates their needs to teachers in all relevant situations.



Example: The individual actively engages with teachers, advocating for their needs, preferences, and goals, and effectively communicates any challenges or barriers they encounter.



Example Scenarios



Score: 1 (Not at All) Scenario: An individual with intellectual and developmental disabilities rarely speaks up in class, even when they don't understand the material. They prefer to remain silent rather than ask questions or seek help from their teachers.



Score: 2 (Rarely) Scenario: A student occasionally asks their teacher to clarify assignments but often struggles to articulate their specific needs or challenges. They may feel uncomfortable or embarrassed about asking for help.



Score: 3 (Sometimes) Scenario: A student with intellectual and developmental disabilities communicates their needs to teachers during one-on-one meetings or small group settings but hesitates to do so in front of the whole class.



Score: 4 (Often) Scenario: An individual regularly communicates their needs to teachers, whether requesting extra time for assignments, seeking accommodations for exams, or discussing concerns about classroom dynamics.



Score: 5 (Very Often) Scenario: A student actively participates in class discussions, asks questions when they don't understand something, and regularly meets with their teachers to discuss their progress and any challenges they face. They are proactive in advocating for their needs and preferences.



(12) I can communicate my needs to work supervisors



1 (Not at All): The individual feels they need more confidence in communicating their needs to work supervisors. They may refrain from discussing their needs or feel unable to express them effectively.



2 (Rarely): The individual occasionally attempts to communicate their needs to work supervisors but struggles to do so consistently. They may only address urgent or critical needs and avoid discussing other concerns.



3 (Sometimes): The individual can communicate some of their needs to work supervisors but may hesitate or struggle. They may express their needs only when prompted or when they feel it is necessary.



4 (Often): The individual frequently communicates their needs to work supervisors with confidence and clarity. They proactively address their needs and advocate for themselves in the workplace.



5 (Very Often): The individual consistently and effectively communicates their needs to work supervisors. They are assertive, proactive, and skilled in advocating for themselves in work-related situations.



Example Scenarios



Score: 1 (Not at All) Scenario: I need help talking to my work supervisor about any problems I'm having. I usually just keep quiet and try to deal with them alone.



Score: 2 (Rarely) Scenario: Sometimes, when I have a problem at work, I might mention it to my supervisor, but I don't always feel comfortable doing so.



Score: 3 (Sometimes) Scenario: I can talk to my supervisor about some things, like if I need time off or struggle with a task, but I only sometimes speak up about everything.



Score: 4 (Often) Scenario: I'm pretty good at communicating my needs to my supervisor. If I have a question or a concern, I'm not afraid to bring it up, and I usually feel like I'm heard.



Score: 5 (Very Often) Scenario: I always communicate any needs or concerns I have to my supervisor. Whether I'm asking for help with a task or discussing my work schedule, I'm confident in speaking up and advocating for myself.



(13) I can gather information.



1 (Not at All): The individual indicates that they need help to gather information independently or with minimal assistance. They may rely heavily on others for information gathering or need help accessing and understanding information.



2 (Rarely): The individual gathers information infrequently and may require significant support or guidance. They may need help identifying relevant information sources or understanding complex information.



3 (Sometimes): The individual can gather information independently in some situations but may require occasional support or guidance. They may need some help with organizing or synthesizing information.



4 (Often): The individual consistently gathers information independently across various situations. They demonstrate a proactive approach to seeking information and can effectively organize and synthesize it.



5 (Very Often): The individual demonstrates a high level of proficiency in gathering information independently. They actively seek out information, demonstrate strong organizational skills, and effectively synthesize complex information from multiple sources.



Example Scenarios



Score: 1 (Not at All) Scenario: A person with intellectual and developmental disabilities (IDD) who struggles to navigate online resources or understand written materials without significant assistance. They may rely entirely on caregivers or support staff to gather information.



Score: 2 (Rarely) Scenario: An individual with IDD who occasionally uses visual aids or simplified materials to gather information but often requires assistance or clarification from others. They may need help with retaining or understanding information beyond introductory concepts.



Score: 3 (Sometimes) Scenario: A person with IDD who can gather information independently on familiar topics or tasks but may require assistance or guidance when faced with new or complex information. They may occasionally need support in identifying credible sources or understanding technical terms.



Score: 4 (Often) Scenario: An individual with IDD who regularly seeks out information independently using various resources such as books, websites, or community programs. With minimal assistance, they can effectively organize and summarize information to meet their needs.



Score: 5 (Very Often) Scenario: A person with IDD who consistently demonstrates strong information-gathering skills across various tasks and situations. They proactively seek out information, demonstrate excellent organizational skills, and can critically evaluate sources to obtain accurate and relevant information independently.



(14) I can make decisions.



1 (Not at All): The individual needs help making decisions independently. They rely heavily on others to make decisions for them, demonstrating a lack of confidence in their decision-making abilities.



2 (Rarely): The individual occasionally makes decisions independently but often seeks guidance or approval from others. Shows hesitation or uncertainty when faced with decision-making tasks. Demonstrates limited confidence in their decision-making abilities.



3 (Sometimes): The individual can make decisions independently in some situations. They seek input or advice from others but ultimately make their own decisions. They demonstrate moderate confidence in their decision-making abilities.



4 (Often): The individual frequently makes decisions independently across various life situations. Rarely seeks input or advice from others and trusts their judgment. Demonstrates confidence and competence in decision-making abilities.



5 (Very Often): The individual consistently makes informed decisions independently. Demonstrates strong problem-solving skills and exercises autonomy in decision-making. Confidently handles complex decision-making tasks with ease.



Example Scenarios



Score: 1 (Not at All) Scenario: Jagdish relies entirely on his parents to make decisions about his daily activities, including what to eat and wear.



Score: 2 (Rarely) Scenario: Siya occasionally makes decisions about her hobbies but often asks her friends for suggestions before finalising her choice.



Score: 3 (Sometimes) Scenario: Dinesh can decide which movie to watch on his own, but he prefers to discuss significant decisions, like choosing a college, with his family.



Score: 4 (Often) Scenario: Deepika usually decides her career path without consulting others and feels confident in her choices.



Score: 5 (Very Often) Scenario: Manuj consistently makes decisions about his finances, healthcare, and personal goals independently, demonstrating a high level of self-assurance and autonomy.



(15) I can solve problems.



1 (Not at All): The individual rarely attempts to solve problems independently. They consistently rely on others to solve problems for them. Even with assistance, they need help to identify solutions to simple issues.



2 (Rarely): The individual occasionally attempts to solve problems independently but often gives up quickly. They may seek assistance from others prematurely if they try to solve the problem themselves. Their problem-solving attempts could be more effective and efficient.



3 (Sometimes): The individual sometimes attempts to solve problems independently and demonstrates some degree of persistence. They may seek assistance from others when faced with more complex problems but can solve more straightforward issues independently. Their problem-solving attempts are moderately effective but may require occasional guidance or support.



4 (Often): The individual frequently attempts to solve problems independently and demonstrates resilience in facing challenges. They actively seek solutions to a wide range of issues and are persistent in problem-solving. Their problem-solving attempts are generally effective and require minimal assistance from others to achieve successful outcomes.



5 (Very Often): The individual consistently demonstrates solid problem-solving skills and exhibits high self-determination and self-advocacy. They proactively identify and address problems, utilizing creative and strategic approaches. They rarely require assistance from others to solve the issues and can independently overcome even complex challenges.



Example Scenarios



Score: 1 (Not at All) Scenario: An individual consistently avoids attempting to solve problems, preferring to rely entirely on others for assistance. When faced with a simple problem, such as difficulty completing a task, they immediately seek help without trying to find a solution independently.



Score: 2 (Rarely) Scenario: An individual occasionally tries to solve problems independently but tends to give up quickly if they encounter any obstacles. When faced with a minor issue, such as a disagreement with a peer, they may attempt to resolve it themselves but quickly become frustrated and seek help from an authority figure.



Score: 3 (Sometimes) Scenario: An individual tries to solve problems independently, especially when encountering familiar or straightforward challenges. When faced with a moderately difficult task, such as completing a homework assignment, they may initially try to work through it independently but seek clarification or assistance if they encounter difficulties.



Score: 4 (Often) Scenario: Individuals actively engage in problem-solving activities, persisting in their efforts even when faced with significant obstacles. When confronted with a complex problem, such as planning a project or resolving a conflict, they demonstrate initiative and resourcefulness, seeking out information and considering multiple solutions before resolving.



Score: 5 (Very Often) Scenario: An individual consistently demonstrates exceptional problem-solving skills, approaching challenges with confidence and creativity. Whether faced with personal, academic, or social difficulties, they exhibit a proactive and systematic approach to problem-solving, rarely requiring assistance from others to achieve successful outcomes.



(16) I can make plans to achieve my goals.



1 (Not at All): The individual needs to demonstrate the ability to make plans to achieve their goals. They may need help to set goals or create actionable plans to accomplish them.



2 (Rarely): The individual occasionally demonstrates the ability to make plans to achieve their goals. They may set goals sporadically but often need help to create detailed or feasible plans to reach them.



3 (Sometimes): The individual sometimes demonstrates the ability to make plans to achieve their goals. They can set goals and create plans but may need consistency or thoroughness.



4 (Often): The individual frequently demonstrates the ability to make plans to achieve their goals. They consistently set goals and create detailed plans, showing a proactive approach to goal-setting and planning.



5 (Very Often): The individual consistently demonstrates the ability to make plans to achieve their goals. They excel in setting meaningful goals and developing comprehensive plans, demonstrating high self-determination and self-advocacy.



Example Scenarios



Score: 1 (Not at All) Scenario: The individual rarely sets goals for themselves and seldom makes any plans to achieve those goals. They may feel overwhelmed or need help with how to proceed with goal-setting and planning.



Score: 2 (Rarely) Scenario: The individual occasionally sets goals but struggles to create actionable plans. They may need help breaking down their goals into smaller, achievable steps or more consistency in their planning efforts.



Score: 3 (Sometimes) Scenario: The individual can set goals and create plans, but their planning efforts need to be more consistent. They may develop plans for some goals but not others, and their plans may need more detail or specificity.



Score: 4 (Often) Scenario: The individual frequently sets meaningful goals and consistently creates detailed plans. They demonstrate a proactive approach to goal-setting and planning, regularly breaking down their goals into actionable steps and adjusting their plans as needed.



Score: 5 (Very Often) Scenario: The individual consistently sets ambitious yet achievable goals and develops comprehensive plans. They exhibit strong self-determination and self-advocacy skills, demonstrating a proactive and strategic approach to goal-setting and planning.



(17) I am punctual.



1 (Not at All): The individual is consistently late or frequently misses appointments or scheduled activities without valid reasons. They need help managing their time effectively and often disregard punctuality.



2 (Rarely): The individual is occasionally punctual but often tends to be late. They may need help prioritizing tasks or managing their time efficiently, resulting in occasional tardiness.



3 (Sometimes): The individual demonstrates moderate punctuality, being on time for most appointments or scheduled activities. However, they may occasionally arrive late due to unforeseen circumstances or occasional lapses in time management.



4 (Often): The individual consistently demonstrates punctuality, arriving on time for appointments or scheduled activities in most instances. They prioritize punctuality and demonstrate practical time management skills in their daily routines.



5 (Very Often): The individual consistently exhibits exceptional punctuality, rarely, if ever, being late for appointments or scheduled activities. They consistently prioritize punctuality, manage their time effectively, and firmly commit to being on time.



Example Scenarios



Score: 1 (Not at All) Scenario: An individual consistently arrives late for classes, appointments, or work without valid reasons. They often need to plan or allocate sufficient time for tasks, resulting in frequent tardiness.



Score: 2 (Rarely) Scenario: An individual occasionally arrives late for classes or appointments due to unexpected delays or minor disruptions. While they try to be punctual, they occasionally struggle with time management.



Score: 3 (Sometimes) Scenario: An individual generally arrives on time for classes or appointments, but there is occasional tardiness due to unforeseen circumstances such as traffic delays or last-minute changes in plans.



Score: 4 (Often) Scenario: An individual consistently arrives punctually for classes, appointments, or work commitments. They prioritise punctuality and demonstrate practical time management skills, only being late in exceptional circumstances.



Score: 5 (Very Often) Scenario: An individual is consistently punctual, always arriving on time for classes, appointments, or work commitments. They demonstrate exceptional time management skills, rarely, if ever, being late and consistently prioritising punctuality in their daily routines.



(18) I can follow a schedule.



1 (Not at All): The individual needs help to follow a schedule independently and requires constant reminders and supervision to stay on track. They often miss appointments or deadlines and have difficulty managing their time effectively.



2 (Rarely): The individual occasionally struggles to follow a schedule independently and may need occasional reminders or assistance to stay organized. They may sometimes miss appointments or deadlines but can generally manage their time with moderate support.



3 (Sometimes): The individual can follow a schedule independently most of the time but may occasionally need reminders or assistance to stay on track. They usually meet appointments or deadlines but may experience occasional lapses in time management.



4 (Often): The individual consistently follows a schedule independently and rarely requires reminders or assistance to stay organized. They effectively manage their time and meet appointments or deadlines with minimal supervision.



5 (Very Often): The individual consistently follows a schedule independently and proactively manages their time without any reminders or assistance. They are highly organized and rarely miss appointments or deadlines.



Example Scenarios



Score: 1 (Not at All) Scenario: The individual frequently forgets essential appointments or tasks. They struggle to plan their day and often feel overwhelmed by their schedule. Despite repeated reminders, they have difficulty adhering to deadlines.



Score: 2 (Rarely) Scenario: The individual occasionally forgets appointments but can usually manage their schedule with assistance. They may struggle with time management during busy periods but can stay organized with moderate support. While they can follow a schedule most of the time, they occasionally miss deadlines due to poor planning.



Score: 3 (Sometimes) Scenario: The individual can typically follow a schedule independently but may need occasional reminders to stay on track. They manage their time effectively for the most part but may experience occasional lapses in organization. Despite occasional challenges, they generally meet appointments and deadlines with moderate effort.



Score: 4 (Often) Scenario: The individual consistently follows a schedule independently and rarely requires reminders or assistance. They are proactive in managing their time and seldom miss appointments or deadlines. With minimal supervision, they effectively prioritize tasks and stay organized throughout the day.



Score: 5 (Very Often) Scenario: The individual proactively follows a schedule without any reminders or assistance. They excel in time management and are highly organized in planning their day. Even during busy periods, they consistently meet appointments and deadlines with ease.



(19) I can work independently.



1 (Not at All): The individual rarely or never works independently. They heavily rely on constant supervision and assistance from others to complete tasks.



2 (Rarely): The individual occasionally attempts to work independently but often requires frequent guidance, reminders, or assistance from others to complete tasks successfully.



3 (Sometimes): The individual can work independently on familiar tasks but may struggle or require occasional guidance or support when faced with new or complex tasks.



4 (Often): The individual consistently demonstrates an ability to work independently on a wide range of tasks. They may seek assistance or clarification but can typically complete tasks without constant supervision.



5 (Very Often): The individual consistently works independently across various tasks and situations. They demonstrate confidence in their abilities, rarely requiring assistance or supervision from others.



Example Scenarios



Score: 1 (Not at All) Scenario: The individual with a developmental disability requires constant one-on-one support from a caregiver or supervisor to complete basic tasks, such as personal hygiene or meal preparation.



Score: 2 (Rarely) Scenario: The individual attempts to complete household chores independently but often forgets steps or requires frequent reminders and assistance from family members to finish the tasks correctly.



Score: 3 (Sometimes) Scenario: The individual can independently complete routine tasks like organizing their room or doing laundry but may seek clarification or help when encountering unfamiliar tasks, such as using a new household appliance.



Score: 4 (Often) Scenario: The individual can independently manage their daily routine, including personal care tasks, meal preparation, and household chores, with minimal assistance or supervision. They may occasionally ask for help or advice but can handle most tasks independently.



Score: 5 (Very Often) Scenario: The individual consistently demonstrates a high level of independence across various domains, such as managing their finances, organizing transportation, and completing work or school assignments without significant support from others.



(20) I understand the importance of taking care of my physical health.



1 (Not at All): The individual needs to demonstrate more understanding or awareness of the importance of physical health care. They may need to recognise the significance of maintaining bodily health or have limited knowledge about health-related practices.



2 (Rarely): The individual has some awareness of the importance of physical health care but may not consistently prioritize it or take proactive steps to maintain their physical well-being. They may occasionally engage in health-promoting behaviors but may lack consistency.



3 (Sometimes): The individual demonstrates moderate awareness and understanding of the importance of physical health care. They may try to engage in health-promoting behaviors occasionally but struggle to maintain or prioritize their physical well-being consistently.



4 (Often): The individual consistently demonstrates awareness of the importance of physical health care and regularly engages in health-promoting behaviors. They prioritize their physical well-being and take proactive steps to maintain or improve their health.



5 (Very Often): The individual consistently demonstrates a high awareness and understanding of the importance of physical health care. They consistently prioritize their physical well-being and engage in health-promoting behaviors to maintain optimal health.



Example Scenarios



Score: 1 (Not at All) **Scenario:** The individual does not recognise the importance of regular exercise or healthy eating habits. They may disregard medical advice or neglect routine health screenings.



Score: 2 (Rarely) **Scenario:** The individual occasionally participates in physical activities but does not exercise regularly. They may occasionally eat unhealthy foods but must consistently follow a balanced diet.



Score: 3 (Sometimes) **Scenario:** The individual acknowledges the importance of exercise and tries to incorporate it into their routine occasionally. They may occasionally try to improve their diet but need help consistently maintaining healthy eating habits.



Score: 4 (Often) **Scenario:** The individual exercises regularly and follows a balanced diet to maintain physical health. They actively seek out opportunities for physical activity and make conscious choices to eat nutritious foods.



Score: 5 (Very Often) **Scenario:** The individual prioritises their physical health above other activities and consistently engages in regular exercise and healthy eating habits. They actively educate themselves about health-related topics and take proactive steps to prevent illness and maintain optimal well-being.



(21) I understand the importance of taking care of my mental health.



1 (Not at All): The individual demonstrates little to no understanding of the importance of mental health care and may not recognise its relevance to their overall well-being.



2 (Rarely): The individual occasionally acknowledges the importance of mental health care but may not prioritize it or fully **grasp its significance**.



3 (Sometimes): The individual recognises the importance of mental health care and tries to attend to their well-being, but this understanding may not consistently guide their actions.



4 (Often): The individual demonstrates a strong understanding of the importance of mental health care and regularly incorporates practices to support their well-being into their daily life.



5 (Very Often): The individual consistently prioritizes their mental health, actively engages in practices to maintain and improve it, and may actively advocate for mental health awareness and support.



Example Scenarios



Score: 1 (Not at All) Scenario: The individual expresses little awareness of mental health concerns and may dismiss the importance of seeking support or engaging in self-care practices. They may view mental health care as irrelevant or unimportant.



Score: 2 (Rarely) Scenario: The individual occasionally acknowledges the importance of mental health care but may not consistently engage in practices to support their well-being. They may recognise the relevance of mental health but may prioritize other aspects of their life over self-care.



Score: 3 (Sometimes) Scenario: The individual recognises the importance of mental health care and may engage in self-care practices intermittently. They may attend to their mental health when prompted or feeling particularly stressed or overwhelmed.



Score: 4 (Often) Scenario: The individual demonstrates a strong understanding of the importance of mental health care and consistently incorporates self-care practices into their routine. They actively seek resources and support when needed and prioritize their mental well-being and other responsibilities.



Score: 5 (Very Often) Scenario: The individual prioritizes their mental health as a fundamental aspect of their overall well-being. They consistently engage in self-care practices, seek needed support, and advocate for mental health awareness and stigmatization within their community.



(22) I know what abuse is and can identify abusive situations.



1 (Not at All): The individual does not recognise physical, emotional, social, or any other forms of abuse. Cannot identify abusive behaviour even when it's extreme and obvious.



2 (Rarely): The individual recognises evident and extreme forms of physical abuse. Struggles to identify emotional or psychological abuse. Often believes that abusive behaviour is normal or justified.



3 (Sometimes): The individual identifies common physical and verbal abuse forms. Occasionally recognises emotional and social abuse but may miss subtle cues. Sometimes, they doubt their perception of abuse or rationalise the behaviour.



4 (Often): The individual recognises most forms of physical, emotional, and social abuse. Understands the impact of abusive behaviour and can identify it in most situations. Rarely misses signs of abuse but may need some reassurance in complex situations.



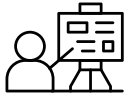
5 (Very Often): The individual consistently identifies all forms of abuse, including physical, emotional, social, financial, and psychological.



Example Scenarios



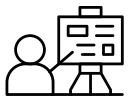
Score: 1 (Not at All) Scenario: A caregiver frequently yells at and insults the individual, but the individual does not recognise this as abuse and thinks it's normal behaviour.



Explanation: The individual does not recognise verbal abuse and does not know that being yelled at and insulted is a form of abuse.



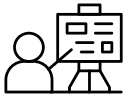
Score: 2 (Rarely) Scenario: An individual is aware that physical hitting is wrong but does not understand that being isolated from friends or family by a caregiver is also a form of abuse.



Explanation: The individual can identify physical abuse in obvious cases but fails to recognise emotional or social abuse.



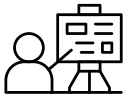
Score: 3 (Sometimes) Scenario: The individual recognises that being hit or yelled at is abuse but is unsure about more subtle forms, such as manipulation or controlling behaviour by a caregiver.



Explanation: The individual can identify some common forms of abuse but may miss more subtle or psychological forms of abuse.



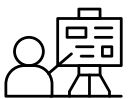
Score: 4 (Often) Scenario: The individual knows that being hit, yelled at, isolated, or controlled by a caregiver is abuse and can identify these behaviours when they occur.



Explanation: The individual can identify most abusive situations, including physical, emotional, and social abuse, but might occasionally miss more complex or nuanced forms of abuse.



Score: 5 (Very Often) Scenario: The individual consistently recognises various forms of abuse, including physical, emotional, social, financial, and psychological abuse. For example, they can identify when a caregiver is taking their money without permission or when someone is subtly undermining their confidence.



Explanation: The individual comprehensively understands and can identify abuse in various contexts and forms, including complex and nuanced situations.



(23) I understand my right to dignity and respect in all environments.



1 (Not at All): Does not recognise or respond to violations of dignity and respect.



2 (Rarely): Infrequently recognises and seldom responds to violations of dignity and respect.



3 (Sometimes): Occasionally recognises and sometimes responds to violations of dignity and respect.



4 (Often): Frequently recognises and responds to violations of dignity and respect.



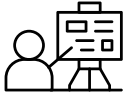
5 (Very Often): Consistently recognises and always responds to violations of dignity and respect.



Example Scenarios



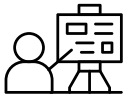
Score: 1 (Not at All) Scenario: Jay is frequently subjected to unfair treatment at his workplace but never recognises it as a violation of his rights. When a colleague repeatedly makes demeaning comments, Jay doesn't realise he has the right to speak up or seek help.



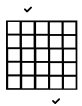
Explanation: Jay does not understand his right to dignity and respect in any environment and does not recognise disrespectful behaviour or know how to respond to it.



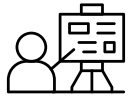
Score: 2 (Rarely) Scenario: Maya occasionally recognises when she is being treated unfairly but usually does not take any action. For instance, when her teacher makes an unfair remark about her abilities, she feels bad but doesn't think she has the right to report it or ask for an apology.



Explanation: Maya needs to understand her right to dignity and respect. She might recognise disrespectful behaviour infrequently but lacks the confidence or knowledge to address it.



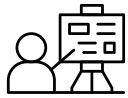
Score: 3 (Sometimes) Scenario: Ajay acknowledges when his rights are violated and occasionally takes steps to address them. For example, when a peer makes fun of his disability, Ajay feels upset and, on some occasions, tells a teacher or parent about the incident.



Explanation: Ajay has a moderate understanding of his right to dignity and respect. He recognises and responds to violations sporadically but does not consistently stand up for his rights.



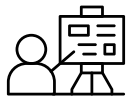
Score: 4 (Often) Scenario: Priya often understands and asserts her right to be treated respectfully. When a classmate excludes her from group activities because of her disability, Priya confidently addresses the issue by discussing it with the classmate and informing her teacher.



Explanation: Priya frequently understands and acts on her right to dignity and respect. She recognises disrespectful behaviour in most situations and often takes appropriate actions to address it.



Score: 5 (Very Often) Scenario: Raj almost always recognises and asserts his right to dignity and respect in all environments. When a public transportation staff member condescendingly speaks to him, Raj firmly but politely explains that he expects to be treated respectfully and informs the appropriate authorities if necessary.



Explanation: Raj consistently understands and asserts his right to dignity and respect. He recognises disrespectful behaviour in nearly all situations and takes immediate and effective action to address it, ensuring his rights are upheld.



(24) I can manage my daily living activities independently.



1 (Not at All): The individual can only manage daily living activities with significant assistance from others.



2 (Rarely): The individual can manage some daily activities but requires frequent assistance.



3 (Sometimes): The individual can manage daily living activities independently on some occasions but still needs assistance from others.



4 (Often): The individual can manage most daily living activities independently, requiring assistance only for complex or unfamiliar tasks.



5 (Very Often): The individual can manage daily living activities independently almost all the time, requiring minimal or no assistance.



Example Scenarios



Score: 1 (Not at All) Scenario: Jitendra requires help with all aspects of his daily routine, including bathing, dressing, eating, and toileting. He cannot perform these tasks independently and relies entirely on his caregiver for support.



Score: 2 (Rarely) Scenario: Meera can feed herself with assistance in preparing the meal, but she needs help with bathing and dressing. She can brush her teeth with guidance but struggles with more complex tasks like managing her medication.



Score: 3 (Sometimes) Scenario: Ashok can dress and prepare simple meals, such as making nongas and cooking items like sandwiches, but he needs to help clean clothes and manage shopping. He can follow a morning routine but requires reminders and occasional supervision.



Score: 4 (Often) Scenario: Ina can handle most of her daily routine, including bathing, dressing, cooking simple meals, and managing her schedule. She occasionally needs help with tasks like grocery shopping or organising her medication but is largely self-sufficient.



Score: 5 (Very Often) Scenario: Dutta manages all his daily activities, including personal hygiene, dressing, meal preparation, and household chores. He organises his medication and appointments without help and only occasionally seeks assistance for very complex tasks.



(25) I know when and how to seek help for daily living tasks.



1 (Not at All): The individual does not recognise when they need help with daily tasks. They rarely, if ever, seek help from others. They need help managing daily tasks independently.



2 (Rarely): The individual occasionally recognises the need for help but does not often act on it. They may need help asking for help due to a lack of understanding or confidence. They seldom seek assistance and prefer to manage themselves, even when this leads to difficulties.



3 (Sometimes): The individual recognises when they need help and occasionally asks for assistance. They have a basic understanding of when help is necessary but may not consistently seek it. They might ask for help in more challenging situations but try to handle more manageable tasks independently.



4 (Often): The individual recognises when they need help and frequently asks for assistance. They understand their limitations well and are comfortable seeking help when needed. They manage daily tasks independently but quickly ask for help in more challenging situations.



5 (Very Often): The individual consistently recognises when they need help and proactively seeks assistance. They have a strong understanding of their limitations and are very comfortable asking for help. They manage daily tasks effectively by balancing independence and seeking help as needed.



Example Scenarios



Score: 1 (Not at All) Scenario: An individual consistently attempts to cook meals without assistance or guidance despite learning how to use kitchen appliances safely. They do not ask for help and often end up with inedible or unsafe meals.



Score: 2 (Rarely) Scenario: An individual seldom asks for help with laundry, resulting in clothes being improperly washed or damaged. They may sometimes acknowledge they need help but choose not to ask for assistance.



Score: 3 (Sometimes) Scenario: An individual sometimes asks for help with grocery shopping, such as reaching items on high shelves or understanding product labels. However, they often try to complete the task independently and only ask for help when struggling.



Score: 4 (Often) Scenario: An individual asks for help managing their medication schedule. They understand the importance of taking medications correctly and regularly seek caregiver assistance to ensure they take the proper doses at the correct times.



Score: 5 (Very Often) Scenario: An individual asks for help with complex financial tasks, such as paying bills or managing a budget. They recognise the importance of these tasks and proactively seek assistance to ensure they are completed correctly and on time.

Appendix B:

हिंदी में पढ़ने में आसान संस्करण

बौद्धिक और विकासात्मक दिव्यांगजनों के लिए स्वयं से निर्णय के लेने का मापन (एसडीएस-आईडीडी) (भारतीय संस्करण)



बौद्धिक और विकासात्मक दिव्यांगजनों के लिए स्वयं से निर्णय के लेने का मापन यएसडीएसणआईडीडीद्ध यभारतीय संस्करणद्ध



यह पैमाना ध्यापन किसी व्यक्ति के स्वयं निर्णय और स्वयं-वकालत करने के कौशल का आकलन करता है। कृपया प्रत्येक कथन को इस आधार पर रेटिंग दें कि यह आपके लिए कितना उपयुक्त है।

	कथन	 बिलकुल नहीं ⁽¹⁾	 शायद ही कभी ⁽²⁾	 कभी-कभी ⁽³⁾	 अक्सर ⁽⁴⁾	बहुत बार ⁽⁵⁾ 
	(1) मैं अपनी ताकत और कमजोरियों को जानता हूँ।					
	(2) मैं अपनी दिव्यांगता के बारे में बता सकता हूँ					
	(3) मैं दूसरों को बता सकता हूँ कि मैं सबसे अच्छा कैसे सीखता हूँ।					

	कथन	 बिलकुल नहीं (1)	 शायद ही कभी (2)	 कभी-कभी (3)	 अक्सर (4)	बहुत बार (5) 
	(4) मैं दूसरों को बता सकता हूँ कि मुझे क्या सीखने में मदद नहीं करता है।					
	(5) मैं अपनी रुचियों को व्यक्त करने में आश्वस्त हूँ।					
	(6) मैं अपने मूल्यों को व्यक्त करने में आश्वस्त हूँ।					
	(7) मैं परेशान हुए बिना मदद मांग सकता हूँ					
	(8) मैं जो सीखना चाहता हूँ, उसे बता सकता हूँ					

	कथन	 बिलकुल नहीं ⁽¹⁾	 शायद ही कभी ⁽²⁾	 कभी-कभी ⁽³⁾	 अक्सर ⁽⁴⁾	 बहुत बार ⁽⁵⁾
	(9) मैं भविष्य के लिए अपनी योजनाओं के बारे में बता सकता हूँ					
	(10) मैं एक दिव्यांगजन के रूप में अपने अधिकारों के बारे में जानता हूँ।					
	(11) मैं अपनी ज़रूरतों को शिक्षकों को बता सकता हूँ।					
	(12) मैं अपनी ज़रूरतों को कार्य पर्यवेक्षकों को बता सकता हूँ					
	(13) मैं जानकारी इकट्ठा कर सकता हूँ					

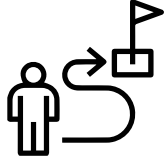
	कथन	 बिलकुल नहीं ⁽¹⁾	 शायद ही कभी ⁽²⁾	 कभी-कभी ⁽³⁾	 अक्सर ⁽⁴⁾	 बहुत बार ⁽⁵⁾
	(14) मैं निर्णय ले सकता हूँ।					
	(15) मैं समस्याओं का समाधान कर सकता हूँ।					
	(16) मैं अपने लक्ष्यों को प्राप्त करने के लिए योजनाएँ बना सकता हूँ।					
	(17) मैं समय का पाबंद हूँ।					
	(18) मैं शेड्यूल का पालन कर सकता हूँ।					

	कथन	 बिलकुल नहीं ⁽¹⁾	 शायद ही कभी ⁽²⁾	 कभी-कभी ⁽³⁾	 अक्सर ⁽⁴⁾	बहुत बार ⁽⁵⁾ 
	(19) मैं स्वतंत्र रूप से काम कर सकता हूँ।					
	(20) मैं अपने शारीरिक स्वास्थ्य की देखभाल करने के महत्व को समझता हूँ।					
	(21) मैं अपने मानसिक स्वास्थ्य की देखभाल करने के महत्व को समझता हूँ।					
	(22) मैं जानता हूँ कि दुर्यवहार क्या होता है और मैं अपमानजनक स्थितियों की पहचान कर सकता हूँ।					
	(23) मैं सभी वातावरणों में गरिमा और सम्मान के लिए अपने अधिकार को समझता हूँ।					

	कथन	 बिलकुल नहीं ⁽¹⁾	 शायद ही कभी ⁽²⁾	 कभी-कभी ⁽³⁾	 अक्सर ⁽⁴⁾	 बहुत बार ⁽⁵⁾
	(24) मैं अपने दैनिक जीवन की गतिविधियों को स्वतंत्र रूप से कर सकता हूँ।					
	(25) मैं जानता हूँ कि दैनिक जीवन के कार्यों के लिए कब और कैसे मदद मांगनी है।					
	कुल स्कोर					



स्कोरिंग:



स्पष्ट स्कोरिंग मानदंड व्यक्ति के स्व-निर्णय और स्वयं-वकालत स्तर को निर्धारित और परिभाषित करता है। इसके मापन के लिए प्रत्येक प्रतिक्रिया के 1 से 5 विकल्प हैं।



यहां प्रश्न के लिए स्पष्ट स्कोरिंग मानदंड स्थापित करने का तरीका बताया गया है:



मैं अपनी ताकत और कमजोरियों को जानता हूँ।



1 (बिल्कुल नहीं): व्यक्ति को अपनी ताकत और कमजोरियों का पता नहीं होता। वे अभी भी यह पहचानने की कोशिश कर रहे हैं कि वे किन क्षेत्रों में बेहतर हैं या किनमें सुधार की ज़रूरत है।



2 (शायद): व्यक्ति कभी-कभी अपनी ताकत और कमजोरियों को पहचान लेता है, लेकिन इन क्षेत्रों को पहचानने के लिए अक्सर सहायता या संकेतों की आवश्यकता होती है।



3 (कभी-कभी): व्यक्ति कभी-कभी अपनी ताकत और कमजोरियों को पहचान लेता है, लेकिन उन्हें इसे और ज़्यादा नियमित रूप से करने की ज़रूरत होती है। ऐसा करने के लिए उन्हें थोड़े से सहायता या याद दिलाने की आवश्यकता हो सकती है।



4 (अक्सर): व्यक्ति अक्सर अपनी ताकत और कमजोरियों को जानता है और उन्हें न्यूनतम सहायता के साथ पहचान सकता है।



5 (बहुत बार): व्यक्ति लगातार और स्वतंत्र रूप से अपनी ताकत और कमजोरियों को पहचानता है। वे बाहरी संकेतों या सहायता के बिना इन क्षेत्रों को स्पष्ट रूप से बता सकते हैं।



उदाहरण परिदृश्य



स्कोर 1: (बिल्कुल नहीं) परिदृश्य: रमेश से पूछा जाता है कि वह किस चीज में अच्छा है और किन क्षेत्रों में उसे सुधार करने की आवश्यकता है। वह कोई विशिष्ट उदाहरण या क्षेत्र नहीं बता सकता है, और सवाल को स्पष्टीकरण की आवश्यकता है। उसे अपनी ताकत और कमजोरियों को पहचानने के लिए महत्वपूर्ण मदद की ज़रूरत है।



स्कोर 2: (शायद) परिदृश्य: प्रिया कभी-कभी अपने शिक्षक द्वारा पूछे जाने पर यह बता सकती है कि वह चित्र बनाने में अच्छी है, लेकिन उसे अतिरिक्त संकेतों के साथ अन्य ताकतों या कमजोरियों की पहचान करने की आवश्यकता है। वह महत्वपूर्ण सहायता के साथ अपने सुधार के क्षेत्रों को स्वीकार करती है।



स्कोर 3: (कभी-कभी) परिदृश्य: विक्रम को कभी-कभी पता होता है कि वह खेलों में अच्छा है और गणित में कमजोर है। हालांकि, उसे अक्सर अपने माता-पिता या शिक्षकों से इन क्षेत्रों की पहचान कराने के लिए याद दिलाने की ज़रूरत होती है। वह परिचित स्थितियों में अपनी ताकत और कमजोरियों को बता सकता है, लेकिन केवल कभी-कभी।



स्कोर 4: (अक्सर) परिदृश्य: अंजलि को अक्सर पता चलता है कि वह गायन में अच्छा है और उसे अपना समय प्रबंधित करने की आवश्यकता है। वह आम तौर पर अपने परामर्शदाता से न्यूनतम सहायता के साथ अपनी ताकत और कमजोरियों की पहचान कर सकती है। अंजलि अपने सुधार के क्षेत्रों को समझने के लिए फीडबैक लेने में सक्रिय रहती है।



स्कोर 5: (बहुत बार) परिदृश्य: संजय लगातार और स्वतंत्र रूप से लेखन में अपनी ताकत और सार्वजनिक बोलने के कौशल को सुधारने की अपनी आवश्यकता को पहचानता है। वह बिना किसी संकेत के इन क्षेत्रों को स्पष्ट रूप से बता सकता है और नियमित रूप से अपने कौशल को बढ़ाने के अवसरों की तलाश करता है। वह अपनी क्षमताओं और वृद्धि के क्षेत्रों के बारे में मजबूत जागरूकता प्रदर्शित करता है।



(2) मैं अपनी दिव्यांगता के बारे में बता सकता हूँ



1 (बिल्कुल नहीं): व्यक्ति अपनी दिव्यांगता के बारे में नहीं बता सकता। उसे अपनी स्थिति के बारे में कोई समझ या जानकारी नहीं है।



2 (शायद): व्यक्ति अपनी दिव्यांगता के बारे में सीमित तरीके से ही बता सकता है और अक्सर उसे समझने या उसे व्यक्त करने में संघर्ष करना पड़ता है।



3 (कभी-कभी): व्यक्ति कुछ स्थितियों में अपनी दिव्यांगता के बारे में बता सकता है, लेकिन उसकी समझ और व्याख्या में निरंतरता और गहराई की कमी हो सकती है।



4 (अक्सर): व्यक्ति आमतौर पर अपनी दिव्यांगता को सटीक और कुछ विवरण के साथ बता सकता है, लेकिन कभी-कभी उसे सहायता या संकेत की आवश्यकता हो सकती है।



5 (बहुत बार): व्यक्ति लगातार और स्वतंत्र रूप से अपनी दिव्यांगता को विभिन्न संदर्भों में स्पष्ट, सटीक और आत्मविश्वास के साथ बता सकता है।



उदाहरण परिदृश्य



स्कोर 1: (बिल्कुल नहीं) परिदृश्य: रवि, एक युवा व्यक्ति जो विकासात्मक दिव्यांगता से पीड़ित है, से उसके शिक्षक ने उसकी स्थिति के बारे में पूछा। वह भ्रमित दिखता है और कहता है, "मुझे नहीं पता।" वह कोई विवरण देने या अपनी दिव्यांगता के बारे में कोई समझ प्रदर्शित करने में असमर्थ है।



स्कोर 2: (शायद ही कभी) परिदृश्य: सीता, जिसे बौद्धिक दिव्यांगता है, कभी-कभी पूछे जाने पर अपनी दिव्यांगता का उल्लेख कर सकती है। हालांकि, वह यह समझाने में संघर्ष करती है कि यह क्या है या यह उसके दैनिक जीवन को कैसे प्रभावित करता है, अक्सर अस्पष्ट या गलत उत्तर देती है।



स्कोर 3: (कभी-कभी) परिदृश्य: अर्जुन, सीखने की अक्षमता वाला एक किशोर, कभी-कभी समझा सकता है कि उसकी दिव्यांगता उसके लिए पढ़ना और लिखना मुश्किल बनाती है। हालांकि, उसे अक्सर आवश्यक विवरणों को पकड़ने और लगातार एक स्पष्ट स्पष्टीकरण देने की आवश्यकता होती है, जो उसके आराम के स्तर और वह किससे बात कर रहा है, इस पर निर्भर करता है।

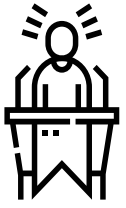


स्कोर 4: (अक्सर) परिदृश्य: प्रिया, शारीरिक दिव्यांगता वाली एक वयस्क, आमतौर पर अपनी स्थिति को सही ढंग से समझाती है। वह दूसरों को बता सकती है कि उसे सेरेब्रल पाल्सी है, जो उसके मांसपेशियों के नियंत्रण और आंदोलन को प्रभावित करती है। वह ज्यादातर स्थितियों में इसे अच्छी तरह से समझाती है, लेकिन कभी-कभी पूरी जानकारी देने के लिए उसे अनुस्मारक या सहायता की आवश्यकता होती है।



स्कोर 5: (बहुत बार) परिदृश्य: अमन, ऑटिज्म से पीड़ित एक युवा वयस्क, लगातार और स्वतंत्र रूप से समझा सकता है कि उसे ऑटिज्म है, जो प्रभावित करता है कि वह कैसे संवाद करता है और दूसरों के साथ बातचीत करता है। वह अपने सामने आने वाली विशिष्ट चुनौतियों और उन्हें प्रबंधित करने के लिए जिन रणनीतियों का उपयोग करता है, उनका वर्णन करता है, ऐसा वह स्कूल, काम या सामाजिक समारोहों जैसी विभिन्न स्थितियों में आत्मविश्वास और स्पष्ट रूप से करता है।

स्कोरिंग मानदंड का अनुप्रयोग: इस प्रश्न को प्रशासित करते समय, मूल्यांकनकर्ता को व्यक्ति की विभिन्न संदर्भों और समय के साथ अपनी दिव्यांगता को समझाने की क्षमता पर विचार करना चाहिए। मूल्यांकनकर्ता को स्थिरता, समझ की गहराई और व्यक्ति की अपनी स्थिति को स्पष्ट और आत्मविश्वास से व्यक्त करने की क्षमता पर ध्यान देना चाहिए।



(3) मैं दूसरों को बता सकता हूँ कि मैं सबसे अच्छा कैसे सीखता हूँ।



1 (बिल्कुल नहीं): व्यक्ति यह व्यक्त नहीं कर सकता कि वह सबसे अच्छा कैसे सीखता है। उसे अपनी सीखने की प्राथमिकताओं को समझने या दूसरों को बताने में मदद की ज़रूरत हो सकती है।



2 (शायद): व्यक्ति कभी-कभी यह व्यक्त कर सकता है कि वह सबसे अच्छा कैसे सीखता है, लेकिन लगातार ऐसा करने में उसे संघर्ष करना पड़ता है। वह अपनी सीखने की प्राथमिकताओं को तभी बता सकता है जब कोई और उसे बताए।



3 (कभी-कभी): व्यक्ति कभी-कभी दूसरों को बता सकता है कि वह सबसे अच्छा कैसे सीखता है, लेकिन यह नियमित अभ्यास नहीं है। वह अपनी प्राथमिकताओं को परिचित परिस्थितियों में या परिचित लोगों के साथ व्यक्त कर सकता है, लेकिन नई या चुनौतीपूर्ण परिस्थितियों में संघर्ष करता है।



4 (अक्सर): व्यक्ति अक्सर दूसरों को बताता है कि वह सबसे अच्छा कैसे सीखता है और ज़्यादातर परिस्थितियों में ऐसा कर सकता है। वह आम तौर पर अपनी सीखने की प्राथमिकताओं से वाकिफ़ होता है और बिना किसी हिचकिचाहट के शिक्षकों, पर्यवेक्षकों या साथियों को बता सकता है।



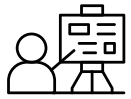
5 (बहुत बार): व्यक्ति लगातार और आत्मविश्वास से दूसरों को बताता है कि वह विभिन्न परिस्थितियों और परिस्थितियों में सबसे अच्छा कैसे सीखता है। वह अपनी सीखने की प्राथमिकताओं के बारे में खुद-ब-खुद जानता है और यह सुनिश्चित करने के लिए सक्रिय रूप से उनसे संवाद करता है कि उसे ज़रूरी सहायता मिले।



उदाहरण परिदृश्य



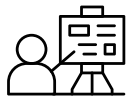
स्कोर: 1 (बिल्कुल नहीं) परिदृश्य: राज एक कक्षा में है जहाँ शिक्षक छात्रों से उनकी पसंदीदा शिक्षण विधियों के बारे में पूछता है। राज अपनी प्राथमिकताओं को स्पष्ट रूप से नहीं बता पाता है और चुप रहता है या कोई असंबंधित उत्तर देता है।



स्पष्टीकरण: राज को नहीं पता कि अपनी सीखने की प्राथमिकताओं को कैसे संप्रेषित किया जाए और उन्हें समझने या व्यक्त करने में उसे कठिनाई होती है।



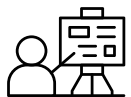
स्कोर: 2 (शायद ही कभी) परिदृश्य: प्रिया कभी-कभी अपने माता-पिता को बताती है कि वह दृश्य सहायता से बेहतर सीखती है। हालाँकि, वह शायद ही कभी स्कूल में अपने शिक्षकों को बताती है और बिना टिप्पणी किए जो भी तरीका दिया जाता है उसका पालन करती है।



स्पष्टीकरण: प्रिया अपनी सीखने की प्राथमिकताओं को व्यक्त कर सकती है लेकिन ऐसा बहुत कम करती है और मुख्य रूप से किसी परिचित व्यक्ति द्वारा प्रेरित किए जाने पर करती है।



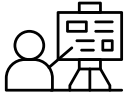
स्कोर: 3 (कभी-कभी) परिदृश्य: अमन कभी-कभी अपने शिक्षक को बता सकता है कि वह व्यावहारिक गतिविधियों के माध्यम से अवधारणाओं को बेहतर ढंग से समझता है। हालाँकि, उसे इस प्राथमिकता को अधिक व्यापक कक्षा या नए वातावरण में संप्रेषित करने में सहायता की आवश्यकता है।



स्पष्टीकरण: अमन अपनी सीखने की प्राथमिकताओं को जानता है और उन्हें कुछ स्थितियों में व्यक्त कर सकता है, लेकिन उसे विविध सेटिंग्स में अधिक स्थिरता और आत्मविश्वास की आवश्यकता है।



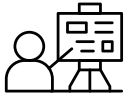
स्कोर: 4 (अक्सर) परिदृश्य: दीपा अक्सर अपने शिक्षकों को बताती है कि वह समूह चर्चा और व्यावहारिक उदाहरणों के माध्यम से सबसे अच्छा सीखती है। वह आमतौर पर अभिभावक-शिक्षक बैठकों या कक्षा चर्चाओं के दौरान सीखने की रणनीतियों के बारे में बोलती है।



स्पष्टीकरण: दीपा अक्सर अधिकांश सेटिंग्स में अपनी सीखने की प्राथमिकताओं को आत्मविश्वास से बताती है।



स्कोर: 5 (बहुत बार) परिदृश्य: अर्जुन लगातार अपने प्रशिक्षकों और साथियों को बताता है कि वह दृश्य सहायता और इंटरैक्टिव सत्रों के माध्यम से सबसे अच्छा सीखता है। वह प्रत्येक पाठ्यक्रम की शुरुआत में अपनी सीखने की ज़रूरतों पर सक्रिय रूप से चर्चा करता है और सुनिश्चित करता है कि उसकी प्राथमिकताएँ विभिन्न सेटिंग्स में जानी जाती हैं, जिनमें नई भी शामिल हैं।



स्पष्टीकरण: अर्जुन अपनी सीखने की प्राथमिकताओं को संप्रेषित करने में आत्म-जागरूक और सक्रिय है, यह सुनिश्चित करता है कि उसकी ज़रूरतों को विभिन्न संदर्भों में समझा जाए और पूरा किया जाए।



(4) मैं दूसरों को बता सकता हूँ कि मुझे क्या सीखने में मदद नहीं करता है।



1 (बिल्कुल नहीं): व्यक्ति को वह बताना चाहिए जो उसे सीखने में मदद नहीं करता है। वे अपनी कठिनाइयों को व्यक्त करने में असमर्थ महसूस कर सकते हैं या इन मुद्दों को कैसे संप्रेषित किया जाए, इस बारे में अनभिज्ञ हैं।



2 (शायद ही कभी): व्यक्ति को वह बताना चाहिए जो उसे सीखने में मदद नहीं करता है। वे कभी-कभी अपनी कठिनाइयों को व्यक्त कर सकते हैं, लेकिन वे असंगत हैं या केवल महत्वपूर्ण संकेत के साथ होते हैं।



3 (कभी-कभी): व्यक्ति कभी-कभी वह बताता है जो उसे सीखने में मदद नहीं करता है। वे कुछ स्थितियों में अपनी कठिनाइयों को व्यक्त कर सकते हैं, लेकिन लगातार या विभिन्न संदर्भों में ऐसा करने के लिए संघर्ष कर सकते हैं।



4 (अक्सर): व्यक्ति अक्सर वह बताता है जो उसे सीखने में मदद नहीं करता है। वे नियमित रूप से अपनी कठिनाइयों को व्यक्त करते हैं और आमतौर पर विभिन्न सेटिंग्स और अन्य लोगों के साथ ऐसा कर सकते हैं।



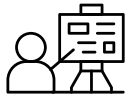
5 (बहुत बार): व्यक्ति बहुत बार या हमेशा वह बताता है जो उसे सीखने में मदद नहीं करता है। वे लगातार और सक्रिय रूप से सभी सेटिंग्स और विभिन्न लोगों के साथ अपनी कठिनाइयों को स्पष्ट और प्रभावी ढंग से व्यक्त करते हैं।



उदाहरण परिदृश्य



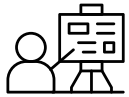
स्कोर: 1 (बिल्कुल नहीं) परिदृश्य: रवि एक कक्षा में है जहाँ शिक्षक कई मौखिक निर्देश देता है। रवि को मौखिक निर्देशों का पालन करना मुश्किल लगता है लेकिन वह कभी भी शिक्षक को यह नहीं बताता या मदद नहीं माँगता। वह चुपचाप संघर्ष करता है, और उसका प्रदर्शन प्रभावित होता है।



स्पष्टीकरण: रवि को यह व्यक्त करने की आवश्यकता है कि उसे क्या सीखने में मदद नहीं करता है, जो आत्मनिर्णय और आत्म-वकालत के उथले स्तर को दर्शाता है।



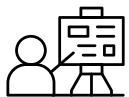
स्कोर: 2 (शायद ही कभी) परिदृश्य: अंजलि कभी-कभी अपनी माँ से कहती है कि जब घर में बहुत अधिक शोर होता है तो वह ध्यान केंद्रित नहीं कर पाती है। हालाँकि, वह शायद ही कभी अपने शिक्षकों या सहपाठियों को इस मुद्दे के बारे में बताती है, भले ही इससे उसकी पढ़ाई प्रभावित हो।



स्पष्टीकरण: अंजलि का अपने सीखने में बाधा डालने वाली चीज़ों के बारे में संचार अधिक बार और कुछ लोगों तक सीमित हो सकता है, जो कम आत्मनिर्णय और आत्म-वकालत को दर्शाता है।



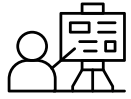
स्कोर: 3 (कभी-कभी) परिदृश्य: समीर कभी-कभी अपने शिक्षक से कहता है कि उसे दृश्य सहायता के बिना लिखित निर्देशों को समझने में कठिनाई होती है। हालाँकि, वह हमेशा अपनी नियमित स्कूल कक्षाओं में इस ज़रूरत के बारे में नहीं बताता, जिससे असंगत सहायता मिलता है।



स्पष्टीकरण: समीर कुछ स्थितियों में अपनी कठिनाइयों को व्यक्त कर सकता है, लेकिन कभी-कभी सभी परिस्थितियों में, मध्यम आत्मनिर्णय और आत्म-वकालत को दर्शाता है।



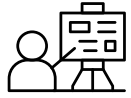
स्कोर: 4 (अक्सर) परिदृश्य: प्रिया अक्सर अपने शिक्षकों और परिवार के सदस्यों को बताती है कि उसे समूह कार्य में कठिनाई होती है क्योंकि यह उसे चिंतित करता है। नतीजतन, वे उसे वैकल्पिक असाइनमेंट देते हैं जो वह व्यक्तिगत रूप से कर सकती है।



स्पष्टीकरण: प्रिया नियमित रूप से अपनी कठिनाइयों के बारे में बताती है और आमतौर पर उसे वह सहायता मिलता है जिसकी उसे ज़रूरत होती है, जो उच्च आत्मनिर्णय और आत्म-वकालत को दर्शाता है।



स्कोर: 5 (बहुत बार) परिदृश्य: अर्जुन लगातार अपने शिक्षकों, माता-पिता और साथियों को बताता है कि जब बहुत सारे निर्देश दिए जाते हैं तो उसे समझने में कठिनाई होती है। वह सक्रिय रूप से लिखित चरण-दर-चरण निर्देशों जैसे समायोजन की तलाश करता है और अपनी ज़रूरतों को पूरा करने के लिए अक्सर शिक्षकों से संपर्क करता है।



स्पष्टीकरण: अर्जुन सक्रिय रूप से और प्रभावी ढंग से बताता है कि सभी परिस्थितियों में उसे क्या सीखने में मदद नहीं करता है, जो उच्च स्तर के आत्मनिर्णय और आत्म-वकालत को दर्शाता है।



(5) मैं अपनी रुचियों को व्यक्त करने में आश्वस्त हूँ।



1 (बिल्कुल नहीं): व्यक्तियों को अपनी रुचियों को व्यक्त करने में अधिक आत्मविश्वास की आवश्यकता होती है। वे शायद ही कभी या कभी भी अपनी पसंद, प्राथमिकताएँ या जुनून दूसरों के साथ साझा नहीं करते हैं, और वे खुद को व्यक्त करने में संकोच या अनिश्चित महसूस कर सकते हैं।



2 (शायद ही कभी): व्यक्ति कभी-कभी अपनी रुचियों को व्यक्त करता है, लेकिन उसे अधिक निरंतर आत्मविश्वास की आवश्यकता होती है। वे अपनी पसंद या प्राथमिकताएँ कुछ लोगों के साथ या कुछ स्थितियों में साझा कर सकते हैं, लेकिन अक्सर संकोच करते हैं या पीछे हट जाते हैं।



3 (कभी-कभी): व्यक्ति अपनी रुचियों को व्यक्त करने में मध्यम आत्मविश्वास प्रदर्शित करता है। वे कुछ स्थितियों में अपनी पसंद या प्राथमिकताएँ दूसरों के साथ साझा कर सकते हैं, लेकिन फिर भी कभी-कभी संकोच या अनिश्चित महसूस कर सकते हैं।



4 (अक्सर): व्यक्ति अक्सर अपनी रुचियों को आत्मविश्वास के साथ व्यक्त करता है। वे अपनी पसंद, प्राथमिकताएँ या जुनून दूसरों के साथ साझा करने में सहज होते हैं और अधिकांश स्थितियों में आत्मविश्वास और दृढ़ता के साथ ऐसा करते हैं।



5 (बहुत बार): व्यक्ति अपनी रुचियों को व्यक्त करने में लगातार उच्च आत्मविश्वास प्रदर्शित करता है। वे अपनी पसंद, प्राथमिकताएँ या जुनून दूसरों के साथ आसानी से साझा करते हैं और लगभग सभी स्थितियों में आत्मविश्वास और दृढ़ता के साथ ऐसा करते हैं।



उदाहरण परिदृश्य:



स्कोर: 1 (बिल्कुल नहीं) परिदृश्य: "मैं शायद ही कभी दूसरों के साथ अपने शौक या रुचियों के बारे में बात करता हूँ क्योंकि मुझे डर है कि उन्हें वे दिलचस्प नहीं लगेंगे।"



स्कोर: 2 (शायद ही कभी) परिदृश्य: "मैं कभी-कभी अपनी पसंदीदा फिल्मों या संगीत का जिक्र करता हूँ, लेकिन केवल तभी जब कोई मुझसे सीधे पूछे। अन्यथा, मैं इसे अपने तक ही सीमित रखता हूँ।"



स्कोर: 3 (कभी-कभी) परिदृश्य: "मैं अपने करीबी दोस्तों या परिवार के सदस्यों के साथ अपनी रुचियों को साझा करने में सहज हूँ, लेकिन मैं अभी भी बड़े समूहों में या उन लोगों के साथ उनके बारे में बात करने में संकोच करता हूँ जिन्हें मैं अच्छी तरह से नहीं जानता।"



स्कोर: 4 (अक्सर) परिदृश्य: "मुझे अपने शौक और रुचियों के बारे में किसी भी ऐसे व्यक्ति के साथ चर्चा करना अच्छा लगता है जो इसमें रुचि रखता हो। मैं अपने जुनून को साझा करने में संकोच नहीं करता, चाहे वह दोस्तों, सहपाठियों या नए परिचितों के साथ हो।"



स्कोर: 5 (बहुत बार) परिदृश्य: "मैं हमेशा दूसरों के साथ अपनी रुचियों को साझा करने के लिए उत्साहित रहता हूँ, और मैं किसी भी स्थिति में आत्मविश्वास के साथ ऐसा करता हूँ। चाहे वह स्कूल, काम या सामाजिक समारोह हो, मैं कभी भी अपनी पसंद की बातें व्यक्त करने से नहीं कतराता।"



(6) मैं अपने मूल्यों को व्यक्त करने में आश्वस्त हूँ।



1 (बिल्कुल नहीं): व्यक्ति शायद ही कभी अपने मूल्यों को व्यक्त करता है। वे दूसरों के साथ अपने विश्वासों या विचारों पर चर्चा करने से बचते हैं। जब उनसे उनके मूल्यों के बारे में पूछा जाता है, तो वे अक्सर असहज या झिझक महसूस करते हैं।



2 (शायद ही कभी): व्यक्ति कभी-कभी अपने मूल्यों को व्यक्त करता है। वे अपने विश्वासों या विचारों को करीबी दोस्तों या परिवार के साथ साझा कर सकते हैं, लेकिन शायद ही कभी अन्य परिस्थितियों में। वे अपने मूल्यों पर चर्चा करते समय कुछ हद तक झिझक या अनिश्चित महसूस करते हैं।



3 (कभी-कभी): व्यक्ति कभी-कभी अपने मूल्यों को व्यक्त करता है। संदर्भ के आधार पर, वे दूसरों के साथ अपने विश्वासों या विचारों पर चर्चा करने में मध्यम रूप से सहज महसूस करते हैं। वे अपने मूल्यों को परिचित या सहायक वातावरण में अधिक आत्मविश्वास से व्यक्त कर सकते हैं।



4 (अक्सर): व्यक्ति अक्सर अपने मूल्यों को व्यक्त करता है। वे विभिन्न लोगों और स्थितियों के साथ अपने विश्वासों या विचारों को साझा करने में आत्मविश्वास महसूस करते हैं। वे अपने मूल्यों पर चर्चा करने और जिस पर वे विश्वास करते हैं, उसके लिए वकालत करने में सहज हैं।



5 (बहुत बार): व्यक्ति लगातार और आत्मविश्वास से अपने मूल्यों को व्यक्त करते हैं। वे दूसरों के साथ अपने विश्वासों या विचारों को साझा करने के लिए सक्रिय रूप से अवसरों की तलाश करते हैं। वे अपने मूल्यों की वकालत करने और दूसरों को सकारात्मक रूप से प्रभावित करने में कुशल हैं।



उदाहरण परिदृश्य:



स्कोर: 1 (बिल्कुल नहीं) परिदृश्य: कोई व्यक्ति शायद ही कभी दूसरों के साथ अपनी सांस्कृतिक या धार्मिक मान्यताओं पर चर्चा करता है, भले ही उसे ऐसा करने के लिए कहा जाए। वे असहमति या संघर्ष के डर से सामाजिक या राजनीतिक मुद्दों पर अपनी राय व्यक्त करने से बचते हैं।



स्कोर: 2 (शायद ही कभी) परिदृश्य: कोई व्यक्ति कभी-कभी अपने करीबी दोस्तों के साथ विशिष्ट विषयों पर अपने विचार साझा करता है, लेकिन बड़े समूहों या सार्वजनिक सेटिंग्स में उन पर चर्चा करने से बचता है। अगर उन्हें लगता है कि दूसरे लोग असहमत हैं, तो वे अपनी राय व्यक्त करने में संकोच कर सकते हैं।



स्कोर: 3 (कभी-कभी) परिदृश्य: कोई व्यक्ति अपने सहपाठियों या सहकर्मियों के साथ अपने मूल्यों पर चर्चा करने में सहज महसूस करता है, लेकिन अधिक औपचारिक सेटिंग्स में अपनी राय को रोक सकता है। वे अपने विश्वासों को उन दोस्तों या परिवार के सदस्यों के बीच अधिक आत्मविश्वास से व्यक्त करते हैं जो समान मूल्यों को साझा करते हैं।



स्कोर: 4 (अक्सर) परिदृश्य: कोई व्यक्ति अक्सर अपने साथियों, सहकर्मियों और समुदाय के सदस्यों के साथ अपने मूल्यों और मान्यताओं के बारे में बातचीत करता है। वे उन विषयों पर चर्चा में सक्रिय रूप से भाग लेते हैं जिनके बारे में वे भावुक हैं और अलग-अलग दृष्टिकोणों से विचलित नहीं होते हैं।



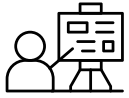
स्कोर: 5 (बहुत बार) परिदृश्य: एक व्यक्ति सार्वजनिक मंचों, सामाजिक समारोहों और कार्य बैठकों सहित विभिन्न संदर्भों में अपने मूल्यों और विश्वासों के बारे में लगातार बोलता है। वे अपने विश्वास और दृढ़ विश्वास के लिए जाने जाते हैं जब वे उन कारणों की वकालत करते हैं जिन पर वे विश्वास करते हैं, दूसरों को कार्रवाई करने के लिए प्रेरित करते हैं।



(7) मैं परेशान हुए बिना मदद मांग सकता हूँ



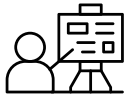
1 (बिल्कुल नहीं): यह दर्शाता है कि व्यक्ति शायद ही कभी या कभी मदद नहीं मांगता; जब वे मांगते हैं, तो वे अक्सर परेशान या निराश हो जाते हैं। वे सहायता मांगने से पूरी तरह से बच सकते हैं क्योंकि उन्हें शर्मिंदा, अक्षम या आलोचना महसूस होने का डर होता है।



उदाहरण: व्यक्ति कामों में मदद मांगने से बचता है, तब भी जब वे संघर्ष कर रहे होते हैं क्योंकि उन्हें दूसरों के सामने मूर्ख दिखने की चिंता होती है।



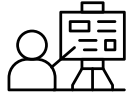
2 (शायद ही कभी): यह दर्शाता है कि व्यक्ति कभी-कभी मदद मांगता है लेकिन ऐसा करने पर वह परेशान या निराश हो जाता है। उन्हें अपनी क्षमताओं के बारे में चिंताओं या अस्वीकृति के डर के कारण सहायता मांगना चुनौतीपूर्ण लग सकता है।



उदाहरण: व्यक्ति कभी-कभी जटिल कार्यों में मदद मांगता है लेकिन ऐसा करने पर अक्सर हतोत्साहित या शर्मिंदा महसूस करता है।



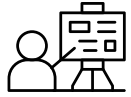
3 (कभी-कभी): यह दर्शाता है कि व्यक्ति कुछ स्थितियों में परेशान हुए बिना मदद मांग सकता है लेकिन अन्य में संघर्ष कर सकता है। वे कुछ लोगों से या विशिष्ट संदर्भों में सहायता मांगने में अधिक सहज महसूस कर सकते हैं।



उदाहरण: व्यक्ति परेशान हुए बिना सरल कार्यों में मदद मांग सकता है लेकिन अधिक जटिल मुद्दों के लिए सहायता लेने में संघर्ष कर सकता है।



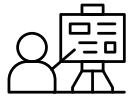
4 (अक्सर): यह दर्शाता है कि व्यक्ति अक्सर मदद मांगता है और शांत और संयमित रहता है। वे सहायता मांगने और परेशान हुए बिना दूसरों से सहायता स्वीकार करने की अपनी क्षमता में आश्वस्त हैं।



उदाहरण: व्यक्ति ज़रूरत पड़ने पर मदद मांगने के बारे में सक्रिय है और बिना किसी चिंता या निराशा के ऐसा कर सकता है।



5 (बहुत बार): यह दर्शाता है कि व्यक्ति लगातार और आत्मविश्वास से बिना किसी महत्वपूर्ण संकट या नकारात्मक भावनाओं का अनुभव किए जब भी आवश्यक हो मदद मांगता है। उनके पास ठोस आत्म-वकालत कौशल हैं और चुनौतियों पर काबू पाने के लिए सहायता मांगने में सहज हैं।



उदाहरण: व्यक्ति नियमित रूप से मदद मांगकर और पूरी प्रक्रिया के दौरान सकारात्मक दृष्टिकोण बनाए रखकर उच्च स्तर के आत्म-निर्णय और आत्म-वकालत का प्रदर्शन करता है।



उदाहरण परिदृश्य:



स्कोर: 1 (बिल्कुल नहीं) परिदृश्य: बौद्धिक अक्षमता वाला एक छात्र गणित के असाइनमेंट को पूरा करने में संघर्ष करता है, लेकिन शिक्षक से मदद मांगने से इनकार कर देता है क्योंकि उन्हें अपने सहपाठियों के सामने अक्षम दिखने का डर है। जैसे-जैसे वे स्वतंत्र रूप से कार्य पूरा करने का प्रयास करते हैं, वे अधिक से अधिक निराश और उत्तेजित होते जाते हैं।



स्कोर: 2-3 (शायद ही कभी और कभी-कभी) परिदृश्य: विकासात्मक दिव्यांगता वाले एक कर्मचारी को अपने सुपरवाइजर (पर्यवेक्षक) से उस कार्य के बारे में सहायता, समझने के लिए स्पष्टीकरण मांगने में सहजता महसूस होती है, जिसके बारे में वे नहीं जानते हैं। हालाँकि, वे सहकर्मियों से मदद लेने में संकोच करते हैं क्योंकि उन्हें अपने ज्ञान की कमी के लिए आलोचना किए जाने की चिंता होती है।



स्कोर: 4-5 (अक्सर और बहुत बार) परिदृश्य: बौद्धिक दिव्यांगता वाला एक युवा वयस्क सार्वजनिक परिवहन का उपयोग करने में सहायता के लिए आत्मविश्वास से अपने सहायक कार्यकर्ता के पास जाता है। वे पूरी बातचीत के दौरान शांत और संयमित रहते हैं और प्रदान की गई सहायता के लिए आभार व्यक्त करते हैं।



(8) मैं जो सीखना चाहता हूँ, उसे बता सकता हूँ



1 (बिल्कुल नहीं): व्यक्तियों को अपनी सीखने की प्राथमिकताओं और रुचियों को बताने में मदद की ज़रूरत होती है। उन्हें यह बताने में कठिनाई होती है कि वे क्या सीखना चाहते हैं और वे निर्णय लेने के लिए दूसरों पर बहुत अधिक निर्भर हो सकते हैं।



2 (शायद ही कभी): व्यक्ति कभी-कभी अपनी सीखने की प्राथमिकताओं और रुचियों को बताता है। वे जो सीखना चाहते हैं, उसके बारे में सामान्य विचार व्यक्त कर सकते हैं, लेकिन उन्हें विशिष्ट विवरण स्पष्ट करने में मदद की ज़रूरत होती है।



3 (कभी-कभी): व्यक्ति कभी-कभी अपनी सीखने की प्राथमिकताओं और रुचियों को प्रभावी ढंग से बताता है। वे कुछ स्थितियों में जो सीखना चाहते हैं, उसे व्यक्त कर सकते हैं, लेकिन दूसरों के साथ संघर्ष कर सकते हैं या व्यावहारिक संचार के लिए सहायता की आवश्यकता हो सकती है।



4 (अक्सर): व्यक्ति अक्सर अपनी सीखने की प्राथमिकताओं और रुचियों को बताते हैं। वे लगातार व्यक्त कर सकते हैं कि वे विभिन्न स्थितियों में क्या सीखना चाहते हैं और अपनी शैक्षिक आवश्यकताओं के लिए प्रभावी ढंग से वकालत कर सकते हैं।



5 (बहुत बार): व्यक्ति लगातार और आत्मविश्वास से अपनी सीखने की प्राथमिकताओं और रुचियों को बताते हैं। वे अपने शैक्षिक लक्ष्यों पर सक्रिय रूप से चर्चा करते हैं, विशिष्ट रुचियों को व्यक्त करते हैं, और उन्हें आगे बढ़ाने के अवसरों की वकालत करते हैं।



उदाहरण परिदृश्य:



स्कोर: 1 (बिल्कुल नहीं) परिदृश्य: बौद्धिक अक्षमता वाले व्यक्ति को अपने शिक्षकों के साथ बैठकों के दौरान अपनी सीखने की प्राथमिकताओं को व्यक्त करना चुनौतीपूर्ण लगता है। वे अक्सर अपनी ओर से संवाद करने के लिए अपने माता-पिता या देखभाल करने वालों पर निर्भर रहते हैं।



स्कोर: 2 (शायद ही कभी) परिदृश्य: विकासात्मक दिव्यांगता वाला एक युवा वयस्क कभी-कभी कला में अपनी रुचि का उल्लेख करता है, लेकिन कला के किन पहलुओं के बारे में वे अधिक जानना चाहते हैं, इसके बारे में विशिष्ट विवरण देने में संघर्ष करता है।



स्कोर: 3 (कभी-कभी) परिदृश्य: ऑटिज्म स्पेक्ट्रम विकार (**ASD**) वाला एक छात्र कभी-कभी कक्षा में चर्चा के दौरान विज्ञान में अपनी रुचि व्यक्त कर सकता है, लेकिन अपनी प्राथमिकताओं को पूरी तरह से व्यक्त करने के लिए उसे दृश्य सहायता या वैकल्पिक संचार विधियों की आवश्यकता हो सकती है।



स्कोर: 4 (अक्सर) परिदृश्य: डाउन सिंड्रोम वाला एक कॉलेज छात्र अक्सर रोजगार क्षमता बढ़ाने के लिए कंप्यूटर कौशल सीखने की अपनी इच्छा व्यक्त करता है। वे प्रासंगिक पाठ्यक्रम विकल्पों का पता लगाने के लिए अपने शैक्षणिक सलाहकार के साथ चर्चा में सक्रिय रूप से भाग लेते हैं।



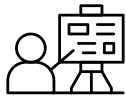
स्कोर: 5 (बहुत बार) परिदृश्य: सेरेब्रल पाल्सी से पीड़ित एक युवा महिला लगातार साहित्य के प्रति अपने जुनून को व्यक्त करती है और शैक्षणिक और सामाजिक कार्यक्रमों, लेखन कार्यशालाओं और साहित्यिक आयोजनों में भाग लेने के अवसरों की वकालत करती है। वह अपनी सहायता टीम के साथ बैठकों के दौरान आत्मविश्वास से अपनी प्राथमिकताओं को बताती है और अपनी रुचियों को आगे बढ़ाने के लिए सक्रिय रूप से संसाधनों की तलाश करती है।



(9) मैं भविष्य के लिए अपनी योजनाओं के बारे में बता सकता हूँ



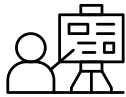
1 (बिल्कुल नहीं): व्यक्ति अपने भविष्य के लिए योजनाओं या लक्ष्यों के बारे में नहीं बता सकता।



उदाहरण: व्यक्ति अपने भविष्य के लिए आकांक्षाओं या लक्ष्यों को स्पष्ट करने में संघर्ष करता है, यहाँ तक कि जब उसे संकेत दिया जाता है।



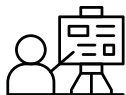
2 (शायद ही कभी): व्यक्ति कभी-कभी अपने भविष्य के लिए अस्पष्ट या सीमित योजनाओं के बारे में बताता है।



उदाहरण: व्यक्ति अपने भविष्य के लिए सामान्य इच्छाएँ या कामनाएँ व्यक्त कर सकता है, लेकिन विशिष्ट विवरण या समयसीमा प्रदान नहीं कर सकता।



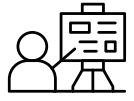
3 (कभी-कभी): व्यक्ति अपने भविष्य के लिए कुछ योजनाओं के बारे में बता सकता है, लेकिन सीमित स्पष्टता या निरंतरता के साथ।



उदाहरण: व्यक्ति अपने भविष्य के लिए विशिष्ट लक्ष्यों या आकांक्षाओं के बारे में बता सकता है, लेकिन उसकी योजनाएँ अक्सर बदल सकती हैं या उनमें ठोस कदम नहीं हो सकते हैं।



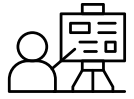
4 (अक्सर): व्यक्ति अक्सर अपने भविष्य के लिए स्पष्ट और अच्छी तरह से परिभाषित योजनाओं के बारे में बताता है।



उदाहरण: व्यक्ति लगातार अपने भविष्य के लक्ष्यों और आकांक्षाओं के बारे में दूसरों के साथ चर्चा करता है, विशिष्ट विवरण प्रदान करता है और अपने उद्देश्यों की स्पष्ट समझ प्रदर्शित करता है।



5 (बहुत बार): व्यक्ति लगातार और आत्मविश्वास से विभिन्न स्थितियों में भविष्य के लिए अपनी योजनाओं के बारे में बताता है।



उदाहरण: व्यक्ति अपनी योजनाओं पर सक्रिय रूप से चर्चा करता है, आत्मविश्वास के साथ अपने लक्ष्यों, आकांक्षाओं और उन्हें प्राप्त करने की रणनीतियों को व्यक्त करता है।



उदाहरण परिदृश्य:



स्कोर: **1** (बिल्कुल नहीं) परिदृश्य: बौद्धिक और विकासात्मक दिव्यांगता वाला व्यक्ति अपनी सहायता टीम के साथ चर्चा के दौरान अपने भविष्य के लिए योजनाओं या लक्ष्यों को स्पष्ट करने के लिए संघर्ष करता है।



स्कोर: **2-3** (शायद ही कभी और कभी-कभी) परिदृश्य: दिव्यांगता वाला एक युवा वयस्क कभी-कभी पारिवारिक समारोहों के दौरान अपने भविष्य के लिए अस्पष्ट आकांक्षाओं को साझा करता है, लेकिन उनकी योजनाओं में विशिष्टता और स्थिरता का अभाव होता है।



स्कोर: **4-5** (अक्सर और बहुत बार) परिदृश्य: दिव्यांगता वाला एक कॉलेज छात्र अपने अकादमिक सलाहकार के साथ बैठक के दौरान आत्मविश्वास के साथ अपने दीर्घकालिक कैरियर लक्ष्यों पर चर्चा करता है और उन्हें प्राप्त करने के लिए उठाए जा रहे विशिष्ट कदमों की रूपरेखा तैयार करता है।



(10) मैं एक दिव्यांगजन के रूप में अपने अधिकारों के बारे में जानता हूँ।



1 (बिल्कुल नहीं): व्यक्ति को एक दिव्यांगजन के रूप में अपने अधिकारों के बारे में पता नहीं है। उन्हें अपने अधिकारों, सुरक्षा या उनके लिए उपलब्ध सुविधाओं के बारे में अधिक जानकारी प्राप्त करने की आवश्यकता हो सकती है।



2 (शायद ही कभी): व्यक्ति को एक दिव्यांगजन के रूप में अपने अधिकारों के बारे में न्यूनतम जानकारी है। उन्हें कुछ बुनियादी समझ हो सकती है, लेकिन उन्हें अपने अधिकारों के बारे में अधिक व्यापक ज्ञान या अनुभव की आवश्यकता है।



3 (कभी-कभी): व्यक्ति एक दिव्यांगजन के रूप में अपने अधिकारों के बारे में कभी-कभी जागरूकता प्रदर्शित करता है। वे कुछ स्थितियों में कुछ अधिकारों या सुरक्षा के बारे में जानते हो सकते हैं, लेकिन लगातार इस ज्ञान को लागू नहीं कर सकते हैं।



4 (अक्सर): व्यक्ति एक दिव्यांगजन के रूप में अपने अधिकारों के बारे में अक्सर जागरूकता प्रदर्शित करता है। वे लगातार जानकारी प्राप्त करते हैं और आवश्यकता पड़ने पर अपने अधिकारों के लिए सक्रिय रूप से वकालत करते हैं।



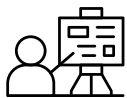
5 (बहुत बार): व्यक्ति एक दिव्यांगजन के रूप में अपने अधिकारों के बारे में लगातार और सक्रिय रूप से उच्च जागरूकता प्रदर्शित करता है। वे अपने लिए अच्छी तरह से सूचित, मुखर और प्रभावी वकील हैं, जो विभिन्न स्थितियों में अपने अधिकारों का सक्रिय रूप से प्रयोग करते हैं।



उदाहरण परिदृश्य:



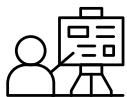
स्कोर: 1 (बिल्कुल नहीं) परिदृश्य: दिव्यांगता से ग्रस्त व्यक्ति दिव्यांगता कानूनों के तहत अपने अधिकारों और सुरक्षा से अनभिज्ञ है।



उदाहरण: एक छात्र या दिव्यांगजन जो इस बात से अनभिज्ञ है कि वह स्कूल या कार्यस्थल में उचित सुविधाओं का अनुरोध कर सकता है।



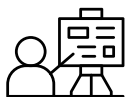
स्कोर: 2 (शायद ही कभी) परिदृश्य: एक दिव्यांगजन जिसने अपने अधिकारों के बारे में सुना है, लेकिन विस्तृत ज्ञान या समझ का अभाव है।



उदाहरण: एक दिव्यांग छात्र जानता है कि स्कूल में उसके कुछ अधिकार हैं, लेकिन वह उन विशिष्ट सुविधाओं के बारे में अनिश्चित है, जिनके वह हकदार है।



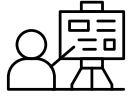
स्कोर: 3 (कभी-कभी) परिदृश्य: एक दिव्यांगजन जो कुछ स्थितियों में अपने अधिकारों के बारे में जानता है, लेकिन लगातार उनका दावा नहीं कर सकता है।



उदाहरण: एक दिव्यांगजन कभी-कभी सुविधाओं की अपनी आवश्यकता के बारे में बोलता है, लेकिन विशिष्ट सामाजिक परिस्थितियों में झिझकता है।



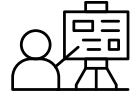
स्कोर: 4 (अक्सर) परिदृश्य: एक दिव्यांगजन जो सक्रिय रूप से अपने अधिकारों के बारे में जानकारी प्राप्त करता है और आवश्यकता पड़ने पर आत्मविश्वास से अपने लिए वकालत करता है।



उदाहरण: एक दिव्यांगजन कर्मचारी जो अक्सर अपने नियोक्ता के साथ अपनी सुविधाओं पर चर्चा करता है और यह सुनिश्चित करता है कि उन्हें अपना काम प्रभावी ढंग से करने के लिए आवश्यक सहायता मिले।



स्कोर: 5 (बहुत बार) परिदृश्य: एक दिव्यांगजन जो जीवन के विभिन्न पहलुओं में लगातार और दृढ़ता से अपने अधिकारों का प्रयोग करता है।



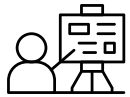
उदाहरण: एक दिव्यांगजन जो दिव्यांगता वकालत समूहों में सक्रिय रूप से शामिल है, अपने अधिकारों को अच्छी तरह से जानता है, और जब भेदभावपूर्ण प्रथाओं का सामना करता है तो उन्हें प्रभावी ढंग से चुनौती देता है।



(11) मैं अपनी ज़रूरतों को शिक्षकों को बता सकता हूँ।



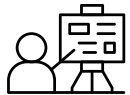
1 (बिल्कुल नहीं): व्यक्ति शायद ही कभी या कभी भी शिक्षकों को अपनी ज़रूरतों के बारे में नहीं बताता।



उदाहरण: व्यक्ति शिक्षकों को अपनी ज़रूरतों या प्राथमिकताओं को बताने में संघर्ष करता है और अक्सर कठिनाइयों का सामना करने पर भी चुप रहता है।



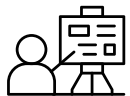
2 (शायद ही कभी): व्यक्ति कभी-कभी शिक्षकों को अपनी ज़रूरतों के बारे में बताता है, लेकिन कभी-कभी ही।



उदाहरण: व्यक्ति कुछ स्थितियों में या संकेत मिलने पर शिक्षकों को अपनी ज़रूरतें बता सकता है, लेकिन वे ज़्यादातर समय ऐसा करने में हिचकिचाते हैं।



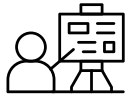
3 (कभी-कभी): व्यक्ति कभी-कभी शिक्षकों को अपनी ज़रूरतों के बारे में बताता है।



उदाहरण: व्यक्ति विशिष्ट स्थितियों में या जब वे सहज महसूस करते हैं, तो शिक्षकों को अपनी ज़रूरतें बता सकता है, लेकिन वे अन्य मामलों में ऐसा करने से बच सकते हैं।



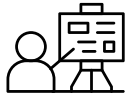
4 (अक्सर): व्यक्ति अक्सर शिक्षकों को अपनी ज़रूरतों के बारे में बताता है।



उदाहरण: व्यक्ति विभिन्न स्थितियों में शिक्षकों को अपनी ज़रूरतों के बारे में आत्मविश्वास से बताता है, जैसे कि समायोजन का अनुरोध करना, स्पष्टीकरण माँगना या चिंताएँ व्यक्त करना।



5 (बहुत बार): व्यक्ति सभी प्रासंगिक स्थितियों में शिक्षकों को अपनी ज़रूरतों के बारे में लगातार और प्रभावी ढंग से बताता है।



उदाहरण: व्यक्ति शिक्षकों के साथ सक्रिय रूप से जुड़ता है, अपनी ज़रूरतों, प्राथमिकताओं और लक्ष्यों की वकालत करता है, और अपने सामने आने वाली किसी भी चुनौती या बाधा को प्रभावी ढंग से बताता है।



उदाहरण परिदृश्य:



स्कोर: 1 (बिल्कुल नहीं) परिदृश्य: बौद्धिक और विकासात्मक दिव्यांगता वाला व्यक्ति कक्षा में शायद ही कभी बोलता है, तब भी जब उसे सामग्री समझ में नहीं आती। वे अपने शिक्षकों से सवाल पूछने या मदद लेने के बजाय चुप रहना पसंद करते हैं।



स्कोर: 2 (शायद ही कभी) परिदृश्य: एक छात्र कभी-कभी अपने शिक्षक से असाइनमेंट को स्पष्ट करने के लिए कहता है, लेकिन अक्सर अपनी विशिष्ट ज़रूरतों या चुनौतियों को स्पष्ट करने में संघर्ष करता है। वे मदद मांगने में असहज या शर्मिंदा महसूस कर सकते हैं।



स्कोर: 3 (कभी-कभी) परिदृश्य: बौद्धिक और विकासात्मक दिव्यांगता वाला छात्र आमने-सामने की बैठकों या छोटे समूह की सेटिंग के दौरान शिक्षकों को अपनी ज़रूरतों के बारे में बताता है, लेकिन पूरी कक्षा के सामने ऐसा करने में झिझकता है।



स्कोर: 4 (अक्सर) परिदृश्य: एक व्यक्ति नियमित रूप से शिक्षकों को अपनी ज़रूरतों के बारे में बताता है, चाहे असाइनमेंट के लिए अतिरिक्त समय मांगना हो, परीक्षा के लिए समायोजन की मांग करना हो, या कक्षा की गतिशीलता के बारे में चिंताओं पर चर्चा करना हो।



स्कोर: 5 (बहुत बार) परिदृश्य: एक छात्र कक्षा की चर्चाओं में सक्रिय रूप से भाग लेता है, जब उन्हें कुछ समझ में नहीं आता है तो वे सवाल पूछते हैं, और अपनी प्रगति और उनके सामने आने वाली किसी भी चुनौती पर चर्चा करने के लिए नियमित रूप से अपने शिक्षकों से मिलते हैं। वे अपनी ज़रूरतों और प्राथमिकताओं की वकालत करने में सक्रिय हैं।



12. मैं अपनी ज़रूरतों को कार्य पर्यवेक्षकों को बता सकता हूँ



1 (बिल्कुल नहीं): व्यक्ति को लगता है कि उसे कार्य पर्यवेक्षकों को अपनी ज़रूरतों को बताने में ज़्यादा आत्मविश्वास की ज़रूरत है। वे अपनी ज़रूरतों पर चर्चा करने से बच सकते हैं या उन्हें प्रभावी ढंग से व्यक्त करने में असमर्थ महसूस कर सकते हैं।



2 (शायद ही कभी): व्यक्ति कभी-कभी कार्य पर्यवेक्षकों को अपनी ज़रूरतों को बताने का प्रयास करता है, लेकिन लगातार ऐसा करने में संघर्ष करता है। वे केवल तत्काल या महत्वपूर्ण ज़रूरतों को संबोधित कर सकते हैं और अन्य चिंताओं पर चर्चा करने से बच सकते हैं।



3 (कभी-कभी): व्यक्ति अपनी कुछ ज़रूरतों को कार्य पर्यवेक्षकों को बता सकता है, लेकिन संकोच या संघर्ष कर सकता है। वे अपनी ज़रूरतों को केवल तभी व्यक्त कर सकते हैं जब उन्हें संकेत दिया जाए या जब उन्हें लगे कि यह आवश्यक है।



4 (अक्सर): व्यक्ति अक्सर आत्मविश्वास और स्पष्टता के साथ कार्य पर्यवेक्षकों को अपनी ज़रूरतों को बताता है। वे सक्रिय रूप से अपनी ज़रूरतों को संबोधित करते हैं और कार्यस्थल में खुद के लिए वकालत करते हैं।



5 (बहुत बार): व्यक्ति लगातार और प्रभावी रूप से कार्य पर्यवेक्षकों को अपनी ज़रूरतों को बताता है। वे मुखर, सक्रिय और कार्य-संबंधी स्थितियों में खुद के लिए वकालत करने में कुशल होते हैं।



उदाहरण परिदृश्य:



स्कोर: 1 (बिल्कुल नहीं) परिदृश्य: मुझे किसी भी समस्या के बारे में अपने कार्य पर्यवेक्षक से बात करने में मदद की ज़रूरत है। मैं आमतौर पर चुप रहता हूँ और उनसे अकेले ही निपटने की कोशिश करता हूँ।



स्कोर: 2 (शायद ही कभी) परिदृश्य: कभी-कभी, जब मुझे काम पर कोई समस्या होती है, तो मैं अपने पर्यवेक्षक से इसका ज़िक्र कर सकता हूँ, लेकिन मैं हमेशा ऐसा करने में सहज महसूस नहीं करता।



स्कोर: 3 (कभी-कभी) परिदृश्य: मैं अपने पर्यवेक्षक से कुछ चीज़ों के बारे में बात कर सकता हूँ, जैसे कि अगर मुझे छुट्टी चाहिए या किसी काम से परेशानी है, लेकिन मैं कभी-कभी ही हर चीज़ के बारे में बोलता हूँ।



स्कोर: 4 (अक्सर) परिदृश्य: मैं अपने पर्यवेक्षक को अपनी ज़रूरतों के बारे में बताने में बहुत अच्छा हूँ। अगर मेरे पास कोई सवाल या चिंता है, तो मैं उसे सामने लाने से नहीं डरता, और मुझे आमतौर पर ऐसा लगता है कि मेरी बात सुनी जा रही है।



स्कोर: 5 (बहुत बार) परिदृश्य: मैं हमेशा अपने पर्यवेक्षक को अपनी ज़रूरतों या चिंताओं के बारे में बताता हूँ। चाहे किसी काम में मदद माँगना हो या अपने काम के शेड्यूल पर चर्चा करना हो, मैं बोलने और अपने लिए वकालत करने में आत्मविश्वास रखता हूँ।



13. मैं जानकारी इकट्ठा कर सकता हूँ



1 (बिल्कुल नहीं): व्यक्ति इंगित करता है कि उसे स्वतंत्र रूप से या न्यूनतम सहायता के साथ जानकारी इकट्ठा करने के लिए सहायता की आवश्यकता है। वे जानकारी एकत्र करने के लिए दूसरों पर बहुत अधिक निर्भर हो सकते हैं या उन्हें जानकारी तक पहुँचने और समझने में सहायता की आवश्यकता हो सकती है।



2 (शायद ही कभी): व्यक्ति कभी-कभार ही जानकारी एकत्र करता है और उसे महत्वपूर्ण समर्थन या मार्गदर्शन की आवश्यकता हो सकती है। उन्हें प्रासंगिक सूचना स्रोतों की पहचान करने या जटिल जानकारी को समझने में सहायता की आवश्यकता हो सकती है।



3 (कभी-कभी): कुछ स्थितियों में व्यक्ति स्वतंत्र रूप से जानकारी एकत्र कर सकता है लेकिन उसे कभी-कभार समर्थन या मार्गदर्शन की आवश्यकता हो सकती है। जानकारी को व्यवस्थित करने या संश्लेषित करने में उन्हें कुछ मदद की आवश्यकता हो सकती है।



4 (अक्सर): व्यक्ति लगातार विभिन्न स्थितियों में स्वतंत्र रूप से जानकारी एकत्र करता है। वे जानकारी प्राप्त करने के लिए एक सक्रिय दृष्टिकोण प्रदर्शित करते हैं और इसे प्रभावी ढंग से व्यवस्थित और संश्लेषित कर सकते हैं।



5 (अक्सर): व्यक्ति स्वतंत्र रूप से जानकारी एकत्र करने में उच्च स्तर की दक्षता प्रदर्शित करता है। वे सक्रिय रूप से जानकारी खोजते हैं, मजबूत संगठनात्मक कौशल का प्रदर्शन करते हैं, और कई स्रोतों से जटिल जानकारी को प्रभावी ढंग से संश्लेषित करते हैं।



उदाहरण परिदृश्य:



स्कोर: 1 (बिल्कुल नहीं) परिदृश्य: बौद्धिक और विकासात्मक विकलांगता (आईडीडी) वाला एक व्यक्ति जो महत्वपूर्ण सहायता के बिना ऑनलाइन संसाधनों को नेविगेट करने या लिखित सामग्री को समझने के लिए संघर्ष करता है। वे जानकारी इकट्ठा करने के लिए पूरी तरह से देखभाल करने वालों या सहायक कर्मचारियों पर निर्भर हो सकते हैं।



स्कोर: 2 (शायद ही कभी) परिदृश्य: आईडीडी वाला एक व्यक्ति जो जानकारी इकट्ठा करने के लिए कभी-कभी दृश्य सहायता या सरलीकृत सामग्री का उपयोग करता है लेकिन अक्सर दूसरों से सहायता या स्पष्टीकरण की आवश्यकता होती है। उन्हें परिचयात्मक अवधारणाओं से परे जानकारी को बनाए रखने या समझने में सहायता की आवश्यकता हो सकती है।



स्कोर: 3 (कभी-कभी) परिदृश्य: आईडीडी वाला व्यक्ति जो परिचित विषयों या कार्यों पर स्वतंत्र रूप से जानकारी एकत्र कर सकता है, लेकिन नई या जटिल जानकारी का सामना करने पर उसे सहायता या मार्गदर्शन की आवश्यकता हो सकती है। उन्हें कभी-कभी विश्वसनीय स्रोतों की पहचान करने या तकनीकी शब्दों को समझने में सहायता की आवश्यकता हो सकती है।



स्कोर: 4 (अक्सर) परिदृश्य: आईडीडी वाला एक व्यक्ति जो नियमित रूप से पुस्तकों, वेबसाइटों या सामुदायिक कार्यक्रमों जैसे विभिन्न संसाधनों का उपयोग करके स्वतंत्र रूप से जानकारी प्राप्त करता है। वे न्यूनतम सहायता के साथ अपनी आवश्यकताओं को पूरा करने के लिए जानकारी को प्रभावी ढंग से व्यवस्थित और सारांशित कर सकते हैं।



स्कोर: 5 (बहुत बार) परिदृश्य: आईडीडी वाला एक व्यक्ति जो लगातार विभिन्न कार्यों और स्थितियों में मजबूत सूचना-एकत्रण कौशल का प्रदर्शन करता है। वे सक्रिय रूप से जानकारी तलाशते हैं, उत्कृष्ट संगठनात्मक कौशल का प्रदर्शन करते हैं, और स्वतंत्र रूप से सटीक और प्रासंगिक जानकारी प्राप्त करने के लिए स्रोतों का आलोचनात्मक मूल्यांकन कर सकते हैं।



14. मैं निर्णय ले सकता हूँ।



1 (बिल्कुल नहीं): व्यक्ति को स्वतंत्र रूप से निर्णय लेने में सहायता की आवश्यकता होती है। वे अपने लिए निर्णय लेने के लिए दूसरों पर बहुत अधिक निर्भर रहते हैं, जिससे उनकी निर्णय लेने की क्षमता में आत्मविश्वास की कमी प्रदर्शित होती है।



2 (शायद ही कभी): व्यक्ति कभी-कभी स्वतंत्र रूप से निर्णय लेता है, लेकिन अक्सर दूसरों से मार्गदर्शन या अनुमोदन मांगता है। निर्णय लेने के कार्यों का सामना करने पर झिझक या अनिश्चितता दिखाता है। अपनी निर्णय लेने की क्षमताओं में सीमित आत्मविश्वास प्रदर्शित करता है।



3 (कभी-कभी): व्यक्ति कुछ स्थितियों में स्वतंत्र रूप से निर्णय ले सकता है। वे दूसरों से इनपुट या सलाह लेते हैं, लेकिन अंततः अपने निर्णय स्वयं लेते हैं। वे अपनी निर्णय लेने की क्षमताओं में मध्यम आत्मविश्वास प्रदर्शित करते हैं।



4 (अक्सर): व्यक्ति अक्सर विभिन्न जीवन स्थितियों में स्वतंत्र रूप से निर्णय लेता है। शायद ही कभी दूसरों से इनपुट या सलाह मांगता है और उनके निर्णय पर भरोसा करता है। निर्णय लेने की क्षमताओं में आत्मविश्वास और क्षमता प्रदर्शित करता है।



5 (बहुत बार): व्यक्ति लगातार स्वतंत्र रूप से सूचित निर्णय लेता है। मजबूत समस्या समाधान कौशल प्रदर्शित करता है और निर्णय लेने में स्वायत्तता का प्रयोग करता है। आत्मविश्वास से जटिल निर्णय लेने के कार्यों को आसानी से संभालता है।



उदाहरण परिदृश्य:



स्कोर: 1 (बिल्कुल नहीं) परिदृश्य: जगदीश अपने दैनिक क्रियाकलापों, जिसमें क्या खाना है और क्या पहनना है, के बारे में निर्णय लेने के लिए पूरी तरह से अपने माता-पिता पर निर्भर करता है।



स्कोर: 2 (शायद ही कभी) परिदृश्य: सिया कभी-कभी अपने शौक के बारे में निर्णय लेती है, लेकिन अक्सर अपनी पसंद को अंतिम रूप देने से पहले अपने दोस्तों से सुझाव मांगती है।



स्कोर: 3 (कभी-कभी) परिदृश्य: दिनेश खुद तय कर सकता है कि उसे कौन सी फिल्म देखनी है, लेकिन वह कॉलेज चुनने जैसे महत्वपूर्ण निर्णयों पर अपने परिवार के साथ चर्चा करना पसंद करता है।



स्कोर: 4 (अक्सर) परिदृश्य: दीपिका आमतौर पर दूसरों से सलाह लिए बिना अपने करियर का रास्ता तय करती है और अपनी पसंद में आत्मविश्वास महसूस करती है।



स्कोर: 5 (बहुत बार) परिदृश्य: मनुज लगातार अपने वित्त, स्वास्थ्य सेवा और व्यक्तिगत लक्ष्यों के बारे में स्वतंत्र रूप से निर्णय लेता है, जो उच्च स्तर के आत्मविश्वास और स्वायत्तता का प्रदर्शन करता है।



15. मैं समस्याओं का समाधान कर सकता हूँ।



1 (बिल्कुल नहीं): व्यक्ति शायद ही कभी स्वतंत्र रूप से समस्याओं का समाधान करने का प्रयास करता है। वे लगातार समस्याओं के समाधान के लिए दूसरों पर निर्भर रहते हैं। सहायता के साथ भी, उन्हें सरल मुद्दों के समाधान की पहचान करने में सहायता की आवश्यकता होती है।



2 (शायद ही कभी): व्यक्ति कभी-कभी स्वतंत्र रूप से समस्याओं का समाधान करने का प्रयास करता है, लेकिन अक्सर जल्दी ही हार मान लेता है। यदि वे स्वयं समस्या का समाधान करने का प्रयास करते हैं, तो वे समय से पहले दूसरों से सहायता ले सकते हैं। उनकी समस्या-समाधान की कोशिशें अधिक प्रभावी और कुशल हो सकती हैं।



3 (कभी-कभी): व्यक्ति कभी-कभी स्वतंत्र रूप से समस्याओं का समाधान करने का प्रयास करता है और कुछ हद तक दृढ़ता का प्रदर्शन करता है। वे अधिक जटिल समस्याओं का सामना करने पर दूसरों से सहायता ले सकते हैं, लेकिन अधिक सरल मुद्दों को स्वतंत्र रूप से हल कर सकते हैं। उनकी समस्या-समाधान की कोशिशें मध्यम रूप से प्रभावी होती हैं, लेकिन उन्हें कभी-कभी मार्गदर्शन या सहायता की आवश्यकता हो सकती है।



4 (अक्सर): व्यक्ति अक्सर स्वतंत्र रूप से समस्याओं का समाधान करने का प्रयास करता है और चुनौतियों का सामना करने में लचीलापन प्रदर्शित करता है। वे सक्रिय रूप से कई तरह के मुद्दों का समाधान खोजते हैं और समस्या-समाधान में दृढ़ रहते हैं। उनकी समस्या-समाधान की कोशिशें आम तौर पर प्रभावी होती हैं और सफल परिणाम प्राप्त करने के लिए उन्हें दूसरों से न्यूनतम सहायता की आवश्यकता होती है।



5 (बहुत बार): व्यक्ति लगातार ठोस समस्या-समाधान कौशल का प्रदर्शन करता है और उच्च आत्मनिर्णय और आत्म-वकालत प्रदर्शित करता है। वे रचनात्मक और रणनीतिक दृष्टिकोणों का उपयोग करते हुए सक्रिय रूप से समस्याओं की पहचान करते हैं और उनका समाधान करते हैं। उन्हें मुद्दों को हल करने के लिए शायद ही कभी दूसरों की सहायता की आवश्यकता होती है और वे स्वतंत्र रूप से जटिल चुनौतियों को भी पार कर सकते हैं।



उदाहरण परिदृश्य:



स्कोर: 1 (बिल्कुल नहीं) परिदृश्य: एक व्यक्ति लगातार समस्याओं को हल करने का प्रयास करने से बचता है, सहायता के लिए पूरी तरह से दूसरों पर निर्भर रहना पसंद करता है। जब किसी साधारण समस्या का सामना करना पड़ता है, जैसे कि किसी कार्य को पूरा करने में कठिनाई, तो वे स्वतंत्र रूप से समाधान खोजने की कोशिश किए बिना तुरंत मदद मांगते हैं।



स्कोर: 2 (शायद ही कभी) परिदृश्य: एक व्यक्ति कभी-कभी समस्याओं को स्वतंत्र रूप से हल करने की कोशिश करता है, लेकिन अगर उन्हें कोई बाधा आती है तो वे जल्दी ही हार मान लेते हैं। जब किसी छोटी सी समस्या का सामना करना पड़ता है, जैसे कि किसी सहकर्मी के साथ असहमति, तो वे इसे स्वयं हल करने का प्रयास कर सकते हैं लेकिन जल्दी ही निराश हो जाते हैं और किसी अधिकारी से मदद मांगते हैं।



स्कोर: 3 (कभी-कभी) परिदृश्य: एक व्यक्ति समस्याओं को स्वतंत्र रूप से हल करने की कोशिश करता है, खासकर जब परिचित या सीधी चुनौतियों का सामना करना पड़ता है। जब उन्हें कोई मध्यम रूप से कठिन कार्य, जैसे कि गृहकार्य पूरा करना, का सामना करना पड़ता है, तो वे शुरू में इसे स्वतंत्र रूप से पूरा करने का प्रयास कर सकते हैं, लेकिन यदि उन्हें कठिनाइयाँ आती हैं, तो वे स्पष्टीकरण या सहायता मांगते हैं।



स्कोर: 4 (अक्सर) परिदृश्य: व्यक्ति समस्या-समाधान गतिविधियों में सक्रिय रूप से संलग्न होते हैं, महत्वपूर्ण बाधाओं का सामना करने पर भी अपने प्रयासों में लगे रहते हैं। जब उन्हें किसी जटिल समस्या का सामना करना पड़ता है, जैसे कि किसी परियोजना की योजना बनाना या किसी संघर्ष को सुलझाना, तो वे पहल और संसाधनशीलता का प्रदर्शन करते हैं, जानकारी की तलाश करते हैं और समाधान करने से पहले कई समाधानों पर विचार करते हैं।



स्कोर: 5 (बहुत बार) परिदृश्य: एक व्यक्ति लगातार असाधारण समस्या-समाधान कौशल का प्रदर्शन करता है, चुनौतियों का आत्मविश्वास और रचनात्मकता के साथ सामना करता है। चाहे व्यक्तिगत, शैक्षणिक, या सामाजिक कठिनाइयों का सामना करना पड़े, वे समस्या-समाधान के लिए एक सक्रिय और व्यवस्थित दृष्टिकोण प्रदर्शित करते



16. मैं अपने लक्ष्यों को प्राप्त करने के लिए योजनाएँ बना सकता हूँ।



1 (बिल्कुल नहीं): व्यक्ति को अपने लक्ष्यों को प्राप्त करने के लिए योजनाएँ बनाने की क्षमता प्रदर्शित करने की आवश्यकता है। उन्हें लक्ष्य निर्धारित करने या उन्हें पूरा करने के लिए कार्रवाई योग्य योजनाएँ बनाने में मदद की आवश्यकता हो सकती है।



2 (शायद ही कभी): व्यक्ति कभी-कभी अपने लक्ष्यों को प्राप्त करने के लिए योजनाएँ बनाने की क्षमता प्रदर्शित करता है। वे छिटपुट रूप से लक्ष्य निर्धारित कर सकते हैं, लेकिन अक्सर उन्हें प्राप्त करने के लिए विस्तृत या व्यवहार्य योजनाएँ बनाने में मदद की आवश्यकता होती है।



3 (कभी-कभी): व्यक्ति कभी-कभी अपने लक्ष्यों को प्राप्त करने के लिए योजनाएँ बनाने की क्षमता प्रदर्शित करता है। वे लक्ष्य निर्धारित कर सकते हैं और योजनाएँ बना सकते हैं, लेकिन उन्हें निरंतरता या संपूर्णता की आवश्यकता हो सकती है।



4 (अक्सर): व्यक्ति अक्सर अपने लक्ष्यों को प्राप्त करने के लिए योजनाएँ बनाने की क्षमता प्रदर्शित करता है। वे लगातार लक्ष्य निर्धारित करते हैं और विस्तृत योजनाएँ बनाते हैं, लक्ष्य-निर्धारण और योजना बनाने के लिए एक सक्रिय दृष्टिकोण दिखाते हैं।



5 (बहुत बार): व्यक्ति लगातार अपने लक्ष्यों को प्राप्त करने के लिए योजनाएँ बनाने की क्षमता प्रदर्शित करता है। वे सार्थक लक्ष्य निर्धारित करने और व्यापक योजनाएँ विकसित करने में उत्कृष्टता प्राप्त करते हैं, उच्च आत्मनिर्णय और आत्म-वकालत का प्रदर्शन करते हैं।



उदाहरण परिदृश्य:



स्कोर: 1 (बिल्कुल नहीं) परिदृश्य: व्यक्ति शायद ही कभी अपने लिए लक्ष्य निर्धारित करता है और शायद ही कभी उन लक्ष्यों को प्राप्त करने के लिए कोई योजना बनाता है। वे अभिभूत महसूस कर सकते हैं या लक्ष्य-निर्धारण और योजना के साथ आगे बढ़ने के तरीके के बारे में मदद की आवश्यकता हो सकती है।



स्कोर: 2 (शायद ही कभी) परिदृश्य: व्यक्ति कभी-कभी लक्ष्य निर्धारित करता है, लेकिन कार्रवाई योग्य योजनाएँ बनाने के लिए संघर्ष करता है। उन्हें अपने लक्ष्यों को छोटे, प्राप्त करने योग्य चरणों में तोड़ने या अपने नियोजन प्रयासों में अधिक स्थिरता के लिए मदद की आवश्यकता हो सकती है।



स्कोर: 3 (कभी-कभी) परिदृश्य: व्यक्ति लक्ष्य निर्धारित कर सकता है और योजनाएँ बना सकता है, लेकिन उनके नियोजन प्रयासों को अधिक सुसंगत होने की आवश्यकता है। वे कुछ लक्ष्यों के लिए योजनाएँ बना सकते हैं लेकिन अन्य के लिए नहीं, और उनकी योजनाओं को अधिक विवरण या विशिष्टता की आवश्यकता हो सकती है।



स्कोर: 4 (अक्सर) परिदृश्य: व्यक्ति अक्सर सार्थक लक्ष्य निर्धारित करता है और लगातार विस्तृत योजनाएँ बनाता है। वे लक्ष्य-निर्धारण और योजना के लिए एक सक्रिय दृष्टिकोण प्रदर्शित करते हैं, नियमित रूप से अपने लक्ष्यों को कार्रवाई योग्य चरणों में तोड़ते हैं और आवश्यकतानुसार अपनी योजनाओं को समायोजित करते हैं।



स्कोर: 5 (बहुत बार) परिदृश्य: व्यक्ति लगातार महत्वाकांक्षी लेकिन प्राप्त करने योग्य लक्ष्य निर्धारित करता है और व्यापक योजनाएँ बनाता है। वे मजबूत आत्मनिर्णय और आत्म-वकालत कौशल प्रदर्शित करते हैं, लक्ष्य-निर्धारण और योजना बनाने के लिए एक सक्रिय और रणनीतिक दृष्टिकोण प्रदर्शित करते हैं।



17. मैं समय का पाबंद हूँ।



1 (बिल्कुल नहीं): व्यक्ति लगातार देर से आता है या बिना किसी वैध कारण के अक्सर अपॉइंटमेंट या निर्धारित गतिविधियों को मिस कर देता है। उन्हें अपने समय को प्रभावी ढंग से प्रबंधित करने में मदद की ज़रूरत होती है और वे अक्सर समय की पाबंदी की अनदेखी करते हैं।



2 (शायद ही कभी): व्यक्ति कभी-कभी समय का पाबंद होता है, लेकिन अक्सर देर से आता है। उन्हें कार्यों को प्राथमिकता देने या अपने समय को कुशलतापूर्वक प्रबंधित करने में मदद की ज़रूरत हो सकती है, जिसके परिणामस्वरूप कभी-कभी देरी होती है।



3 (कभी-कभी): व्यक्ति मध्यम समय की पाबंदी प्रदर्शित करता है, अधिकांश अपॉइंटमेंट या निर्धारित गतिविधियों के लिए समय पर पहुँचता है। हालाँकि, वे कभी-कभी अप्रत्याशित परिस्थितियों या समय प्रबंधन में कभी-कभी चूक के कारण देर से पहुँच सकते हैं।



4 (अक्सर): व्यक्ति लगातार समय की पाबंदी प्रदर्शित करता है, अधिकांश मामलों में अपॉइंटमेंट या निर्धारित गतिविधियों के लिए समय पर पहुँचता है। वे समय की पाबंदी को प्राथमिकता देते हैं और अपनी दैनिक दिनचर्या में व्यावहारिक समय प्रबंधन कौशल का प्रदर्शन करते हैं।



5 (बहुत बार): व्यक्ति लगातार असाधारण समय की पाबंदी प्रदर्शित करता है, शायद ही कभी, यदि कभी, नियुक्तियों या निर्धारित गतिविधियों के लिए देर से आता है। वे लगातार समय की पाबंदी को प्राथमिकता देते हैं, अपने समय को प्रभावी ढंग से प्रबंधित करते हैं, और समय पर होने के लिए दृढ़ता से प्रतिबद्ध होते हैं।



उदाहरण परिदृश्य:



स्कोर: 1 (बिल्कुल नहीं) परिदृश्य: कोई व्यक्ति लगातार बिना किसी वैध कारण के कक्षाओं, नियुक्तियों या काम के लिए देर से आता है। उन्हें अक्सर कार्यों के लिए पर्याप्त समय की योजना बनाने या आवंटित करने की आवश्यकता होती है, जिसके परिणामस्वरूप अक्सर देरी होती है।



स्कोर: 2 (शायद ही कभी) परिदृश्य: कोई व्यक्ति कभी-कभी अप्रत्याशित देरी या मामूली व्यवधानों के कारण कक्षाओं या नियुक्तियों के लिए देर से आता है। जबकि वे समय के पाबंद होने की कोशिश करते हैं, वे कभी-कभी समय प्रबंधन के साथ संघर्ष करते हैं।



स्कोर: 3 (कभी-कभी) परिदृश्य: कोई व्यक्ति आम तौर पर कक्षाओं या नियुक्तियों के लिए समय पर पहुंचता है, लेकिन अप्रत्याशित परिस्थितियों जैसे ट्रैफिक देरी या योजनाओं में आखिरी समय में बदलाव के कारण कभी-कभी देरी होती है।



स्कोर: 4 (अक्सर) परिदृश्य: कोई व्यक्ति लगातार समय पर कक्षाओं, नियुक्तियों या कार्य प्रतिबद्धताओं के लिए पहुंचता है। वे समय की पाबंदी को प्राथमिकता देते हैं और व्यावहारिक समय प्रबंधन कौशल का प्रदर्शन करते हैं, केवल असाधारण परिस्थितियों में ही देर से पहुंचते हैं।



स्कोर: 5 (बहुत बार) परिदृश्य: कोई व्यक्ति लगातार समय का पाबंद होता है, हमेशा कक्षाओं, नियुक्तियों या कार्य प्रतिबद्धताओं के लिए समय पर पहुंचता है। वे असाधारण समय प्रबंधन कौशल का प्रदर्शन करते हैं, शायद ही कभी, अगर कभी, देर से पहुंचते हैं और अपनी दैनिक दिनचर्या में लगातार समय की पाबंदी को प्राथमिकता देते हैं।



18. मैं शेड्यूल का पालन कर सकता हूँ।



1 (बिल्कुल नहीं): व्यक्ति को स्वतंत्र रूप से शेड्यूल का पालन करने के लिए सहायता की आवश्यकता होती है और टैक पर बने रहने के लिए उसे निरंतर अनुस्मारक और पर्यवेक्षण की आवश्यकता होती है। वे अक्सर अपॉइंटमेंट या डेडलाइन को मिस कर देते हैं और अपने समय को प्रभावी ढंग से प्रबंधित करने में कठिनाई महसूस करते हैं।



2 (शायद ही कभी): व्यक्ति को कभी-कभी स्वतंत्र रूप से शेड्यूल का पालन करने में कठिनाई होती है और उसे व्यवस्थित रहने के लिए कभी-कभी अनुस्मारक या सहायता की आवश्यकता हो सकती है। वे कभी-कभी अपॉइंटमेंट या डेडलाइन को मिस कर सकते हैं, लेकिन आम तौर पर मध्यम सहायता के साथ अपना समय प्रबंधित कर सकते हैं।



3 (कभी-कभी): व्यक्ति अधिकांश समय स्वतंत्र रूप से शेड्यूल का पालन कर सकता है, लेकिन उसे टैक पर बने रहने के लिए कभी-कभी अनुस्मारक या सहायता की आवश्यकता हो सकती है। वे आम तौर पर अपॉइंटमेंट या डेडलाइन को पूरा करते हैं, लेकिन समय प्रबंधन में कभी-कभी चूक का अनुभव कर सकते हैं।



4 (अक्सर): व्यक्ति लगातार स्वतंत्र रूप से शेड्यूल का पालन करता है और उसे व्यवस्थित रहने के लिए शायद ही कभी अनुस्मारक या सहायता की आवश्यकता होती है। वे प्रभावी रूप से अपने समय का प्रबंधन करते हैं और न्यूनतम पर्यवेक्षण के साथ अपॉइंटमेंट या डेडलाइन को पूरा करते हैं।



5 (बहुत बार): व्यक्ति लगातार स्वतंत्र रूप से शेड्यूल का पालन करता है और बिना किसी अनुस्मारक या सहायता के अपने समय का सक्रिय रूप से प्रबंधन करता है। वे अत्यधिक संगठित हैं और शायद ही कभी अपॉइंटमेंट या डेडलाइन को मिस करते हैं।



उदाहरण परिदृश्य:



स्कोर: 1 (बिल्कुल नहीं) परिदृश्य: व्यक्ति अक्सर आवश्यक नियुक्तियों या कार्यों को भूल जाता है। वे अपने दिन की योजना बनाने के लिए संघर्ष करते हैं और अक्सर अपने शेड्यूल से अभिभूत महसूस करते हैं। बार-बार याद दिलाने के बावजूद, उन्हें समयसीमा का पालन करने में कठिनाई होती है।



स्कोर: 2 (शायद ही कभी) परिदृश्य: व्यक्ति कभी-कभी नियुक्तियों को भूल जाता है, लेकिन आमतौर पर सहायता के साथ अपने शेड्यूल का प्रबंधन कर सकता है। वे व्यस्त अवधि के दौरान समय प्रबंधन के साथ संघर्ष कर सकते हैं, लेकिन मध्यम सहायता के साथ व्यवस्थित रह सकते हैं। जबकि वे अधिकांश समय एक शेड्यूल का पालन कर सकते हैं, वे कभी-कभी खराब योजना के कारण समयसीमा चूक जाते हैं।



स्कोर: 3 (कभी-कभी) परिदृश्य: व्यक्ति आमतौर पर स्वतंत्र रूप से एक शेड्यूल का पालन कर सकता है, लेकिन ट्रैक पर बने रहने के लिए कभी-कभी अनुस्मारक की आवश्यकता हो सकती है। वे अधिकांश भाग के लिए अपने समय को प्रभावी ढंग से प्रबंधित करते हैं, लेकिन संगठन में कभी-कभी चूक का अनुभव कर सकते हैं। कभी-कभी चुनौतियों के बावजूद, वे आम तौर पर मध्यम प्रयास के साथ नियुक्तियों और समयसीमाओं को पूरा करते हैं।



स्कोर: 4 (अक्सर) परिदृश्य: व्यक्ति लगातार स्वतंत्र रूप से एक शेड्यूल का पालन करता है और शायद ही कभी अनुस्मारक या सहायता की आवश्यकता होती है। वे अपने समय का प्रबंधन करने में सक्रिय होते हैं और शायद ही कभी अपॉइंटमेंट या डेडलाइन मिस करते हैं। न्यूनतम पर्यवेक्षण के साथ, वे प्रभावी रूप से कार्यों को प्राथमिकता देते हैं और पूरे दिन व्यवस्थित रहते हैं।



स्कोर: 5 (बहुत बार) परिदृश्य: व्यक्ति बिना किसी अनुस्मारक या सहायता के सक्रिय रूप से शेड्यूल का पालन करता है। वे समय प्रबंधन में उत्कृष्ट हैं और अपने दिन की योजना बनाने में अत्यधिक व्यवस्थित हैं। व्यस्त अवधि के दौरान भी, वे आसानी से अपॉइंटमेंट और डेडलाइन को पूरा करते हैं।



19. मैं स्वतंत्र रूप से काम कर सकता हूँ।



1 (बिल्कुल नहीं): व्यक्ति शायद ही कभी या कभी भी स्वतंत्र रूप से काम नहीं करता है। वे कार्यों को पूरा करने के लिए निरंतर पर्यवेक्षण और दूसरों की सहायता पर बहुत अधिक निर्भर करते हैं।



2 (शायद ही कभी): व्यक्ति कभी-कभी स्वतंत्र रूप से काम करने का प्रयास करता है, लेकिन कार्यों को सफलतापूर्वक पूरा करने के लिए अक्सर उसे लगातार मार्गदर्शन, अनुस्मारक या दूसरों की सहायता की आवश्यकता होती है।



3 (कभी-कभी): व्यक्ति परिचित कार्यों पर स्वतंत्र रूप से काम कर सकता है, लेकिन नए या जटिल कार्यों का सामना करने पर संघर्ष कर सकता है या कभी-कभी मार्गदर्शन या सहायता की आवश्यकता हो सकती है।



4 (अक्सर): व्यक्ति लगातार विभिन्न कार्यों पर स्वतंत्र रूप से काम करने की क्षमता प्रदर्शित करता है। वे सहायता या स्पष्टीकरण मांग सकते हैं, लेकिन आमतौर पर निरंतर पर्यवेक्षण के बिना कार्य पूरा कर सकते हैं।



5 (बहुत बार): व्यक्ति लगातार विभिन्न कार्यों और स्थितियों में स्वतंत्र रूप से काम करता है। वे अपनी क्षमताओं में आत्मविश्वास प्रदर्शित करते हैं, उन्हें शायद ही कभी दूसरों की सहायता या पर्यवेक्षण की आवश्यकता होती है।



उदाहरण परिदृश्य:



स्कोर: 1 (बिल्कुल नहीं) परिदृश्य: विकासात्मक दिव्यांगता वाले व्यक्ति को बुनियादी कार्यों, जैसे व्यक्तिगत स्वच्छता या भोजन तैयार करने के लिए देखभाल करने वाले या पर्यवेक्षक से लगातार व्यक्तिगत सहायता की आवश्यकता होती है।



स्कोर: 2 (शायद ही कभी) परिदृश्य: व्यक्ति घर के कामों को स्वतंत्र रूप से पूरा करने का प्रयास करता है, लेकिन अक्सर कदम भूल जाता है या कार्यों को सही ढंग से पूरा करने के लिए परिवार के सदस्यों से बार-बार अनुस्मारक और सहायता की आवश्यकता होती है।



स्कोर: 3 (कभी-कभी) परिदृश्य: व्यक्ति अपने कमरे को व्यवस्थित करने या कपड़े धोने जैसे नियमित कार्यों को स्वतंत्र रूप से पूरा कर सकता है, लेकिन अपरिचित कार्यों का सामना करने पर स्पष्टीकरण या मदद मांग सकता है, जैसे कि नए घरेलू उपकरण का उपयोग करना।



स्कोर: 4 (अक्सर) परिदृश्य: व्यक्ति न्यूनतम सहायता या पर्यवेक्षण के साथ व्यक्तिगत देखभाल कार्यों, भोजन तैयार करने और घरेलू कामों सहित अपनी दैनिक दिनचर्या को स्वतंत्र रूप से प्रबंधित कर सकता है। वे कभी-कभी मदद या सलाह मांग सकते हैं, लेकिन अधिकांश कार्यों को स्वतंत्र रूप से संभाल सकते हैं।



स्कोर: 5 (अक्सर) परिदृश्य: व्यक्ति लगातार विभिन्न क्षेत्रों में उच्च स्तर की स्वतंत्रता प्रदर्शित करता है, जैसे कि अपने वित्त का प्रबंधन करना, परिवहन का आयोजन करना, तथा दूसरों से महत्वपूर्ण सहायता के बिना काम या स्कूल के काम को पूरा करना।



20. मैं अपने शारीरिक स्वास्थ्य की देखभाल करने के महत्व को समझता हूँ।



1 (बिल्कुल नहीं): व्यक्ति को शारीरिक स्वास्थ्य देखभाल के महत्व के बारे में अधिक समझ या जागरूकता प्रदर्शित करने की आवश्यकता है। उन्हें शारीरिक स्वास्थ्य बनाए रखने के महत्व को पहचानने की आवश्यकता हो सकती है या स्वास्थ्य संबंधी प्रथाओं के बारे में सीमित ज्ञान हो सकता है।



2 (शायद ही कभी): व्यक्ति को शारीरिक स्वास्थ्य देखभाल के महत्व के बारे में कुछ जानकारी होती है, लेकिन वह लगातार इसे प्राथमिकता नहीं दे सकता है या अपने शारीरिक स्वास्थ्य को बनाए रखने के लिए सक्रिय कदम नहीं उठा सकता है। वे कभी-कभी स्वास्थ्य को बढ़ावा देने वाले व्यवहारों में संलग्न हो सकते हैं, लेकिन उनमें निरंतरता की कमी हो सकती है।



3 (कभी-कभी): व्यक्ति शारीरिक स्वास्थ्य देखभाल के महत्व के बारे में मध्यम जागरूकता और समझ प्रदर्शित करता है। वे कभी-कभी स्वास्थ्य को बढ़ावा देने वाले व्यवहारों में संलग्न होने का प्रयास कर सकते हैं, लेकिन अपने शारीरिक स्वास्थ्य को लगातार बनाए रखने या प्राथमिकता देने के लिए संघर्ष करते हैं।



4 (अक्सर): व्यक्ति लगातार शारीरिक स्वास्थ्य देखभाल के महत्व के बारे में जागरूकता प्रदर्शित करता है और नियमित रूप से स्वास्थ्य को बढ़ावा देने वाले व्यवहारों में संलग्न होता है। वे अपने शारीरिक स्वास्थ्य को प्राथमिकता देते हैं और अपने स्वास्थ्य को बनाए रखने या सुधारने के लिए सक्रिय कदम उठाते हैं।



5 (बहुत बार): व्यक्ति लगातार शारीरिक स्वास्थ्य देखभाल के महत्व के बारे में उच्च जागरूकता और समझ प्रदर्शित करता है। वे लगातार अपने शारीरिक स्वास्थ्य को प्राथमिकता देते हैं और इष्टतम स्वास्थ्य बनाए रखने के लिए स्वास्थ्य-प्रचार व्यवहार में संलग्न होते हैं।



उदाहरण परिदृश्य:



स्कोर: 1 (बिल्कुल नहीं) परिदृश्य: व्यक्ति नियमित व्यायाम या स्वस्थ खाने की आदतों के महत्व को नहीं पहचानता है। वे चिकित्सा सलाह की अवहेलना कर सकते हैं या नियमित स्वास्थ्य जांच की उपेक्षा कर सकते हैं।



स्कोर: 2 (शायद ही कभी) परिदृश्य: व्यक्ति कभी-कभी शारीरिक गतिविधियों में भाग लेता है, लेकिन नियमित रूप से व्यायाम नहीं करता है। वे कभी-कभी अस्वास्थ्यकर भोजन खा सकते हैं, लेकिन उन्हें लगातार संतुलित आहार का पालन करना चाहिए।



स्कोर: 3 (कभी-कभी) परिदृश्य: व्यक्ति व्यायाम के महत्व को स्वीकार करता है और इसे कभी-कभी अपनी दिनचर्या में शामिल करने का प्रयास करता है। वे कभी-कभी अपने आहार में सुधार करने का प्रयास कर सकते हैं, लेकिन उन्हें लगातार स्वस्थ खाने की आदतों को बनाए रखने में मदद की आवश्यकता होती है।



स्कोर: 4 (अक्सर) परिदृश्य: व्यक्ति नियमित रूप से व्यायाम करता है और शारीरिक स्वास्थ्य बनाए रखने के लिए संतुलित आहार का पालन करता है। वे सक्रिय रूप से शारीरिक गतिविधि के अवसरों की तलाश करते हैं और पौष्टिक खाद्य पदार्थ खाने के लिए सचेत विकल्प चुनते हैं।



स्कोर: 5 (बहुत बार) परिदृश्य: व्यक्ति अपने शारीरिक स्वास्थ्य को अन्य गतिविधियों से ऊपर रखता है और नियमित रूप से व्यायाम और स्वस्थ खाने की आदतों में संलग्न रहता है। वे स्वास्थ्य संबंधी विषयों के बारे में खुद को सक्रिय रूप से शिक्षित करते हैं और बीमारी को रोकने और इष्टतम स्वास्थ्य बनाए रखने के लिए सक्रिय कदम उठाते हैं।



21. मैं अपने मानसिक स्वास्थ्य की देखभाल करने के महत्व को समझता हूँ।



1 (बिल्कुल नहीं): व्यक्ति मानसिक स्वास्थ्य देखभाल के महत्व के बारे में बहुत कम या बिल्कुल भी समझ नहीं दिखाता है और हो सकता है कि वह अपने समग्र स्वास्थ्य के लिए इसकी प्रासंगिकता को न पहचाने।



2 (शायद ही कभी): व्यक्ति कभी-कभी मानसिक स्वास्थ्य देखभाल के महत्व को स्वीकार करता है, लेकिन इसे प्राथमिकता नहीं दे सकता है या इसके महत्व को पूरी तरह से नहीं समझ सकता है।



3 (कभी-कभी): व्यक्ति मानसिक स्वास्थ्य देखभाल के महत्व को पहचानता है और अपने स्वास्थ्य का ध्यान रखने की कोशिश करता है, लेकिन यह समझ लगातार उसके कार्यों का मार्गदर्शन नहीं कर सकती है।



4 (अक्सर): व्यक्ति मानसिक स्वास्थ्य देखभाल के महत्व की एक मजबूत समझ प्रदर्शित करता है और अपने स्वास्थ्य का सहायता करने के लिए नियमित रूप से अपने दैनिक जीवन में अभ्यासों को शामिल करता है।



5 (बहुत बार): व्यक्ति लगातार अपने मानसिक स्वास्थ्य को प्राथमिकता देता है, इसे बनाए रखने और सुधारने के लिए अभ्यासों में सक्रिय रूप से संलग्न होता है, और मानसिक स्वास्थ्य जागरूकता और सहायता के लिए सक्रिय रूप से वकालत कर सकता है।



उदाहरण परिदृश्य:



स्कोर: 1 (बिल्कुल नहीं) परिदृश्य: व्यक्ति मानसिक स्वास्थ्य संबंधी चिंताओं के बारे में बहुत कम जागरूकता व्यक्त करता है और सहायता मांगने या स्व-देखभाल प्रथाओं में संलग्न होने के महत्व को खारिज कर सकता है। वे मानसिक स्वास्थ्य देखभाल को अप्रासंगिक या महत्वहीन मान सकते हैं।



स्कोर: 2 (शायद ही कभी) परिदृश्य: व्यक्ति कभी-कभी मानसिक स्वास्थ्य देखभाल के महत्व को स्वीकार करता है, लेकिन अपने कल्याण का सहायता करने के लिए लगातार अभ्यास में संलग्न नहीं हो सकता है। वे मानसिक स्वास्थ्य की प्रासंगिकता को पहचान सकते हैं, लेकिन आत्म-देखभाल पर अपने जीवन के अन्य पहलुओं को प्राथमिकता दे सकते हैं।



स्कोर: 3 (कभी-कभी) परिदृश्य: व्यक्ति मानसिक स्वास्थ्य देखभाल के महत्व को पहचानता है और रुक-रुक कर आत्म-देखभाल प्रथाओं में संलग्न हो सकता है। वे प्रेरित होने पर या विशेष रूप से तनावग्रस्त या अभिभूत महसूस करने पर अपने मानसिक स्वास्थ्य का ध्यान रख सकते हैं।



स्कोर: 4 (अक्सर) परिदृश्य: व्यक्ति मानसिक स्वास्थ्य देखभाल के महत्व की एक मजबूत समझ प्रदर्शित करता है और लगातार आत्म-देखभाल प्रथाओं को अपनी दिनचर्या में शामिल करता है। वे जरूरत पड़ने पर सक्रिय रूप से संसाधनों और सहायता की तलाश करते हैं और अपने मानसिक कल्याण और अन्य जिम्मेदारियों को प्राथमिकता देते हैं।



स्कोर: 5 (बहुत बार) परिदृश्य: व्यक्ति अपने मानसिक स्वास्थ्य को अपने समग्र कल्याण के मूलभूत पहलू के रूप में प्राथमिकता देता है। वे लगातार आत्म-देखभाल प्रथाओं में संलग्न रहते हैं, आवश्यक सहायता प्राप्त करते हैं, तथा अपने समुदाय में मानसिक स्वास्थ्य जागरूकता और कलंक-मुक्ति की वकालत करते हैं।



22. मैं जानता हूँ कि दुर्व्यवहार क्या होता है और मैं अपमानजनक स्थितियों की पहचान कर सकता हूँ।



1 (बिल्कुल नहीं): व्यक्ति शारीरिक, भावनात्मक, सामाजिक या किसी अन्य प्रकार के दुर्व्यवहार को नहीं समझ सकता है। दुर्व्यवहार व्यवहार की पहचान नहीं कर सकता, भले ही वह चरम और स्पष्ट हो।



2 (शायद ही कभी): व्यक्ति शारीरिक दुर्व्यवहार के स्पष्ट और चरम रूपों को पहचानता है। भावनात्मक या मनोवैज्ञानिक दुर्व्यवहार को पहचानने में संघर्ष करता है। अक्सर मानता है कि दुर्व्यवहार व्यवहार सामान्य या उचित है।



3 (कभी-कभी): व्यक्ति शारीरिक और मौखिक दुर्व्यवहार के सामान्य रूपों की पहचान करता है। कभी-कभी भावनात्मक और सामाजिक दुर्व्यवहार को पहचानता है, लेकिन सूक्ष्म संकेतों को नज़रअंदाज़ कर सकता है। कभी-कभी, वे दुर्व्यवहार की अपनी धारणा पर संदेह करते हैं या व्यवहार को तर्कसंगत बनाते हैं।



4 (अक्सर): व्यक्ति शारीरिक, भावनात्मक और सामाजिक दुर्व्यवहार के अधिकांश रूपों को पहचानता है। दुर्व्यवहार व्यवहार के प्रभाव को समझता है और अधिकांश स्थितियों में इसे पहचान सकता है। शायद ही कभी दुर्व्यवहार के संकेतों को नज़रअंदाज़ करता है, लेकिन जटिल स्थितियों में कुछ आश्वासन की आवश्यकता हो सकती है।



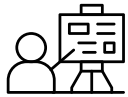
5 (बहुत बार): व्यक्ति लगातार सभी प्रकार के दुर्व्यवहारों की पहचान करता है, जिसमें शारीरिक, भावनात्मक, सामाजिक, वित्तीय और मनोवैज्ञानिक शामिल हैं।



उदाहरण परिदृश्य:



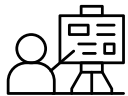
स्कोर: 1 (बिल्कुल नहीं) परिदृश्य: एक देखभालकर्ता अक्सर व्यक्ति पर चिल्लाता है और उसका अपमान करता है, लेकिन व्यक्ति इसे दुर्व्यवहार के रूप में नहीं पहचानता है और सोचता है कि यह सामान्य व्यवहार है।



स्पष्टीकरण: व्यक्ति मौखिक दुर्व्यवहार को नहीं पहचानता है और यह नहीं जानता है कि चिल्लाना और अपमानित होना दुर्व्यवहार का एक रूप है।



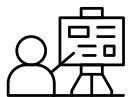
स्कोर: 2 (शायद ही कभी) परिदृश्य: एक व्यक्ति जानता है कि शारीरिक रूप से मारना गलत है, लेकिन यह नहीं समझता है कि देखभालकर्ता द्वारा दोस्तों या परिवार से अलग-थलग रहना भी दुर्व्यवहार का एक रूप है।



स्पष्टीकरण: व्यक्ति स्पष्ट मामलों में शारीरिक दुर्व्यवहार की पहचान कर सकता है, लेकिन भावनात्मक या सामाजिक दुर्व्यवहार को पहचानने में विफल रहता है।



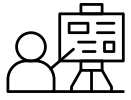
स्कोर: 3 (कभी-कभी) परिदृश्य: व्यक्ति पहचानता है कि मारा जाना या चिल्लाना दुर्व्यवहार है, लेकिन अधिक सूक्ष्म रूपों, जैसे कि देखभालकर्ता द्वारा हेरफेर या नियंत्रित व्यवहार के बारे में अनिश्चित है।



स्पष्टीकरण: व्यक्ति दुर्व्यवहार के कुछ सामान्य रूपों की पहचान कर सकता है, लेकिन दुर्व्यवहार के अधिक सूक्ष्म या मनोवैज्ञानिक रूपों को नहीं पहचान सकता है।



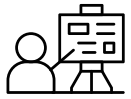
स्कोर: 4 (अक्सर) परिदृश्य: व्यक्ति जानता है कि देखभाल करने वाले द्वारा मारा जाना, चिल्लाया जाना, अलग-थलग किया जाना या नियंत्रित किया जाना दुर्व्यवहार है और जब ये व्यवहार होते हैं तो वे उन्हें पहचान सकते हैं।



स्पष्टीकरण: व्यक्ति शारीरिक, भावनात्मक और सामाजिक दुर्व्यवहार सहित अधिकांश दुर्व्यवहार स्थितियों की पहचान कर सकता है, लेकिन कभी-कभी दुर्व्यवहार के अधिक जटिल या सूक्ष्म रूपों को अनदेखा कर सकता है।



स्कोर: 5 (बहुत बार) परिदृश्य: व्यक्ति लगातार दुर्व्यवहार के विभिन्न रूपों को पहचानता है, जिसमें शारीरिक, भावनात्मक, सामाजिक, वित्तीय और मनोवैज्ञानिक दुर्व्यवहार शामिल हैं। उदाहरण के लिए, वे पहचान सकते हैं कि कब कोई देखभाल करने वाला बिना अनुमति के उनका पैसा ले रहा है या जब कोई व्यक्ति उनके आत्मविश्वास को कमजोर कर रहा है।



स्पष्टीकरण: व्यक्ति जटिल और सूक्ष्म स्थितियों सहित विभिन्न संदर्भों और रूपों में दुर्व्यवहार को व्यापक रूप से समझता है और पहचान सकता है।



23. मैं सभी वृत्तावरणों में गरिमा और सम्मान के लिए अपने अधिकार को समझता हूँ।



1 (बिल्कुल नहीं): सम्मान और गरिमा के उल्लंघन को पहचानता या उस पर प्रतिक्रिया नहीं करता।



2 (शायद ही कभी): सम्मान और गरिमा के उल्लंघन को कभी-कभार पहचानता और उस पर शायद ही कभी प्रतिक्रिया करता है।



3 (कभी-कभी):: कभी-कभार पहचानता और कभी-कभार प्रतिक्रिया करता है।



4 (अक्सर): सम्मान और गरिमा के उल्लंघन को अक्सर पहचानता और उस पर प्रतिक्रिया करता है।



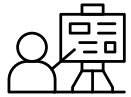
5 (बहुत बार): सम्मान और गरिमा के उल्लंघन को लगातार पहचानता और उस पर हमेशा प्रतिक्रिया करता है।



उदाहरण परिदृश्य:



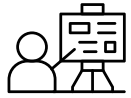
स्कोर: 1 (बिल्कुल नहीं) परिदृश्य: जय को अक्सर अपने कार्यस्थल पर अनुचित व्यवहार का सामना करना पड़ता है, लेकिन वह इसे अपने अधिकारों के उल्लंघन के रूप में कभी नहीं पहचानता। जब कोई सहकर्मी बार-बार अपमानजनक टिप्पणी करता है, तो जय को यह एहसास नहीं होता कि उसे बोलने या मदद मांगने का अधिकार है।



स्पष्टीकरण: जय किसी भी परिवेश में सम्मान और गरिमा के अपने अधिकार को नहीं समझता और अपमानजनक व्यवहार को नहीं पहचानता या यह नहीं जानता कि इसका जवाब कैसे दिया जाए।



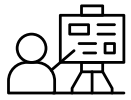
स्कोर: 2 (शायद ही कभी) परिदृश्य: माया कभी-कभी पहचानती है कि उसके साथ अनुचित व्यवहार किया जा रहा है, लेकिन आमतौर पर कोई कार्रवाई नहीं करती है। उदाहरण के लिए, जब उसका शिक्षक उसकी योग्यताओं के बारे में अनुचित टिप्पणी करता है, तो उसे बुरा लगता है, लेकिन उसे नहीं लगता कि उसे इसकी रिपोर्ट करने या माफ़ी मांगने का अधिकार है।



स्पष्टीकरण: माया को अपने सम्मान और सम्मान के अधिकार को समझने की ज़रूरत है। वह कभी-कभार अपमानजनक व्यवहार को पहचान सकती है, लेकिन उसे संबोधित करने के लिए आत्मविश्वास या ज्ञान की कमी होती है।



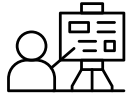
स्कोर: 3 (कभी-कभी) परिदृश्य: अजय अपने अधिकारों के उल्लंघन को स्वीकार करता है और कभी-कभी उन्हें संबोधित करने के लिए कदम उठाता है। उदाहरण के लिए, जब कोई सहकर्मी उसकी विकलांगता का मज़ाक उड़ाता है, तो अजय परेशान हो जाता है और कुछ मौकों पर, किसी शिक्षक या माता-पिता को घटना के बारे में बताता है।



स्पष्टीकरण: अजय को अपने सम्मान और सम्मान के अधिकार की मध्यम समझ है। वह कभी-कभार उल्लंघन को पहचानता है और उसका जवाब देता है, लेकिन लगातार अपने अधिकारों के लिए खड़ा नहीं होता है।



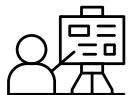
स्कोर: 4 (अक्सर) परिदृश्य: प्रिया अक्सर सम्मानपूर्वक व्यवहार किए जाने के अपने अधिकार को समझती है और उसका दावा करती है। जब कोई सहपाठी उसे उसकी विकलांगता के कारण समूह गतिविधियों से बाहर रखता है, तो प्रिया सहपाठी के साथ इस पर चर्चा करके और अपने शिक्षक को सूचित करके आत्मविश्वास से इस मुद्दे को संबोधित करती है।



स्पष्टीकरण: प्रिया अक्सर अपने सम्मान और गरिमा के अधिकार को समझती है और उस पर अमल करती है। वह ज्यादातर स्थितियों में अपमानजनक व्यवहार को पहचानती है और अक्सर इसे दूर करने के लिए उचित कार्रवाई करती है।



स्कोर: 5 (बहुत बार) परिदृश्य: राज लगभग हमेशा सभी वातावरणों में सम्मान और गरिमा के अपने अधिकार को पहचानता है और उसका दावा करता है। जब सार्वजनिक परिवहन का कोई कर्मचारी उससे विनम्रता से बात करता है, तो राज दृढ़ता से लेकिन विनम्रता से समझाता है कि वह सम्मानपूर्वक व्यवहार की अपेक्षा करता है और यदि आवश्यक हो तो उचित अधिकारियों को सूचित करता है।



स्पष्टीकरण: राज लगातार अपने सम्मान और गरिमा के अधिकार को समझता है और उसका दावा करता है। वह लगभग सभी स्थितियों में अपमानजनक व्यवहार को पहचानता है और इसे दूर करने के लिए तत्काल और प्रभावी कार्रवाई करता है, यह सुनिश्चित करता है कि उसके अधिकारों को बरकरार रखा जाए



24. मैं अपने दैनिक जीवन की गतिविधियों को स्वतंत्र रूप से कर सकता हूँ।



1 (बिल्कुल नहीं): व्यक्ति दैनिक जीवन की गतिविधियों को केवल दूसरों की महत्वपूर्ण सहायता से कर सकता है।



2 (शायद ही कभी): व्यक्ति कुछ दैनिक गतिविधियों को प्रबंधित कर सकता है, लेकिन उसे बार-बार सहायता की आवश्यकता होती है।



3 (कभी-कभी): व्यक्ति कुछ अवसरों पर दैनिक जीवन की गतिविधियों को स्वतंत्र रूप से प्रबंधित कर सकता है, लेकिन फिर भी उसे दूसरों की सहायता की आवश्यकता होती है।



4 (अक्सर): व्यक्ति अधिकांश दैनिक जीवन की गतिविधियों को स्वतंत्र रूप से प्रबंधित कर सकता है, केवल जटिल या अपरिचित कार्यों के लिए सहायता की आवश्यकता होती है।



5 (बहुत बार): व्यक्ति दैनिक जीवन की गतिविधियों को लगभग हर समय स्वतंत्र रूप से प्रबंधित कर सकता है, जिसमें न्यूनतम या कोई सहायता की आवश्यकता नहीं होती है।



उदाहरण परिदृश्य:



स्कोर: 1 (बिल्कुल नहीं) परिदृश्य: जितेंद्र को अपने दैनिक दिनचर्या के सभी पहलुओं में मदद की आवश्यकता होती है, जिसमें स्नान, कपड़े पहनना, खाना और शौचालय जाना शामिल है। वह इन कार्यों को स्वतंत्र रूप से नहीं कर सकता है और सहायता के लिए पूरी तरह से अपने देखभाल करने वाले पर निर्भर करता है।



स्कोर: 2 (शायद ही कभी) परिदृश्य: मीरा भोजन तैयार करने में सहायता के साथ खुद को खिला सकती है, लेकिन उसे स्नान और कपड़े पहनने में मदद की आवश्यकता होती है। वह मार्गदर्शन के साथ अपने दाँत ब्रश कर सकती है, लेकिन अपनी दवा का प्रबंधन करने जैसे अधिक जटिल कार्यों में संघर्ष करती है।



स्कोर: 3 (कभी-कभी) परिदृश्य: अशोक कपड़े पहन सकता है और साधारण भोजन तैयार कर सकता है, जैसे कि नॉनगैस बनाना और सैंडविच जैसी चीजें पकाना, लेकिन उसे कपड़े साफ करने और खरीदारी का प्रबंधन करने में मदद करने की ज़रूरत है। वह सुबह की दिनचर्या का पालन कर सकता है, लेकिन उसे अनुस्मारक और कभी-कभी पर्यवेक्षण की आवश्यकता होती है।



स्कोर: 4 (अक्सर) परिदृश्य: इना अपनी अधिकांश दैनिक दिनचर्या को संभाल सकती है, जिसमें नहाना, कपड़े पहनना, साधारण भोजन पकाना और अपना शेड्यूल प्रबंधित करना शामिल है। उसे कभी-कभी किराने की खरीदारी या अपनी दवा का आयोजन करने जैसे कार्यों में मदद की ज़रूरत होती है, लेकिन वह काफी हद तक आत्मनिर्भर है।



स्कोर: 5 (बहुत बार) परिदृश्य: दत्ता अपनी सभी दैनिक गतिविधियों को अपने दम पर प्रबंधित करता है, जिसमें व्यक्तिगत स्वच्छता, कपड़े पहनना, भोजन तैयार करना और घरेलू काम शामिल हैं। वह बिना किसी मदद के अपनी दवा और अपॉइंटमेंट का आयोजन करता है और केवल कभी-कभी बहुत जटिल कार्यों के लिए सहायता मांगता है।



25. मैं जानता हूँ कि दैनिक जीवन के कार्यों के लिए कब और कैसे मदद मांगनी है।



1 (बिल्कुल नहीं): व्यक्ति को यह नहीं पता होता कि उसे दैनिक जीवन के कार्यों में कब मदद की आवश्यकता है। वे शायद ही कभी, यदि कभी, दूसरों से मदद मांगते हैं। उन्हें दैनिक कार्यों को स्वतंत्र रूप से प्रबंधित करने में सहायता की आवश्यकता होती है।



2 (शायद ही कभी): व्यक्ति कभी-कभी मदद की आवश्यकता को पहचानता है, लेकिन अक्सर उस पर अमल नहीं करता है। समझ या आत्मविश्वास की कमी के कारण उन्हें मदद मांगने में मदद की आवश्यकता हो सकती है। वे शायद ही कभी सहायता मांगते हैं और खुद को प्रबंधित करना पसंद करते हैं, भले ही इससे कठिनाइयाँ हों।



3 (कभी-कभी): व्यक्ति को यह पता होता है कि उसे कब मदद की आवश्यकता है और कभी-कभी सहायता मांगता है। उन्हें इस बात की बुनियादी समझ होती है कि कब मदद की आवश्यकता है, लेकिन वे लगातार इसकी मांग नहीं कर सकते हैं। वे अधिक चुनौतीपूर्ण परिस्थितियों में मदद मांग सकते हैं, लेकिन अधिक प्रबंधनीय कार्यों को स्वतंत्र रूप से संभालने का प्रयास करते हैं।



4 (अक्सर): व्यक्ति को यह पता होता है कि उसे कब मदद की आवश्यकता है और वह अक्सर सहायता मांगता है। वे अपनी सीमाओं को अच्छी तरह समझते हैं और आवश्यकता पड़ने पर मदद मांगने में सहज होते हैं। वे दैनिक कार्यों को स्वतंत्र रूप से प्रबंधित करते हैं, लेकिन अधिक चुनौतीपूर्ण परिस्थितियों में तुरंत मदद मांगते हैं।



5 (बहुत बार): व्यक्ति को यह पता होता है कि उसे कब मदद की आवश्यकता है और वह सक्रिय रूप से सहायता मांगता है। उन्हें अपनी सीमाओं की अच्छी समझ होती है और वे मदद मांगने में बहुत सहज होते हैं। वे स्वतंत्रता और आवश्यकतानुसार मदद मांगकर दैनिक कार्यों को प्रभावी ढंग से प्रबंधित करते हैं।



उदाहरण परिदृश्य:



स्कोर: 1 (बिल्कुल नहीं) परिदृश्य: कोई व्यक्ति रसोई के उपकरणों का सुरक्षित तरीके से उपयोग करना सीखने के बावजूद लगातार सहायता या मार्गदर्शन के बिना भोजन पकाने का प्रयास करता है। वे मदद नहीं मांगते और अक्सर अखाद्य या असुरक्षित भोजन प्राप्त करते हैं।



स्कोर: 2 (शायद ही कभी) परिदृश्य: कोई व्यक्ति कपड़े धोने में शायद ही कभी मदद मांगता है, जिसके परिणामस्वरूप कपड़े ठीक से धुल नहीं पाते या क्षतिग्रस्त हो जाते हैं। वे कभी-कभी स्वीकार कर सकते हैं कि उन्हें मदद की आवश्यकता है लेकिन सहायता नहीं मांगना चुनते हैं।



स्कोर: 3 (कभी-कभी) परिदृश्य: कोई व्यक्ति कभी-कभी किराने की खरीदारी में मदद मांगता है, जैसे कि ऊंची अलमारियों पर रखी वस्तुओं तक पहुंचना या उत्पाद लेबल को समझना। हालांकि, वे अक्सर कार्य को स्वतंत्र रूप से पूरा करने का प्रयास करते हैं और केवल तभी मदद मांगते हैं जब उन्हें परेशानी होती है।



स्कोर: 4 (अक्सर) परिदृश्य: कोई व्यक्ति अपनी दवा अनुसूची को प्रबंधित करने में मदद मांगता है। वे दवाओं को सही तरीके से लेने के महत्व को समझते हैं और यह सुनिश्चित करने के लिए नियमित रूप से देखभाल करने वाले की सहायता लेते हैं कि वे सही समय पर उचित खुराक लें।



स्कोर: 5 (बहुत बार) परिदृश्य: कोई व्यक्ति जटिल वित्तीय कार्यों, जैसे बिलों का भुगतान या बजट का प्रबंधन करने में मदद मांगता है। वे इन कार्यों के महत्व को पहचानते हैं और यह सुनिश्चित करने के लिए सक्रिय रूप से सहायता मांगते हैं कि वे सही तरीके से और समय पर पूरे हों।



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Manovikas Charitable Society

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Key Features:

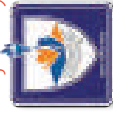
Culturally relevant assessment tool
Designed to empower individuals with IDD in India
Includes 21 sections addressing essential aspects of self-determination
Pilot-tested for effectiveness and cultural appropriateness

Published by:

Manovikas Charitable Society | 2024



Project by



SHRI KHUSHAL DAS
UNIVERSITY

Self-Determination Scale for
Individuals with Intellectual and Developmental Disabilities

INDIAN VERSION

(SDS-IDD)

ISBN



9 789348 204424



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Appendix II

UNIT: 2

Self-Advocacy Curriculum: Module 1



SHRI KHUSHAL DAS
UNIVERSITY

**Self-Advocacy Curriculum:
Module 1**

Recognising Strengths and Areas for Improvement



Published by:
MANOVIKASTM, DELHI



Supported by:
Home of Hope Inc. USA



Module-1

Curriculum and Training Content for Recognising Strengths and Areas for Improvement

Goals:

- Help students with intellectual and developmental disabilities (IDD) recognise their strengths and areas for improvement.
- Foster self-awareness and confidence in students.
- Set short-term, achievable goals tailored to individual needs.
- Utilise Universal Design for Learning (UDL) principles to create an inclusive and supportive learning environment.

Curriculum Level-1:

Objective: Develop a basic awareness of personal strengths and weaknesses.

Activities:

- **Name the Strengths:** Introduce common strengths using visual aids (e.g., pictures, flashcards). Have students identify which ones might apply to them.
- **Observation Journal:** With teacher guidance, students keep a simple journal of activities they enjoy and those they find challenging.
- **Story Time:** Read stories about characters with different strengths and weaknesses. Discuss with students how they relate to the characters.

Level 2:

Objective: Increase occasional recognition of strengths and weaknesses.

Activities:

- **Strengths and Weaknesses Chart:** Create a chart where students can place stickers or marks next to activities they are good at or need help with.
- **Peer Praise Circle:** In a group, encourage students to compliment each other, highlighting strengths.
- **Reflective Drawing:** Students draw pictures of themselves doing something they are good at and something they find challenging.

Level 3:

Objective: Improve consistency in recognising strengths and weaknesses.

Activities:

- **Strengths and Challenges Worksheet:** Provide worksheets where students list activities they excel in and those they need to work on, with teacher support.
- **Role-Playing Games:** Use role-playing to simulate scenarios where students can demonstrate their strengths and identify areas of improvement.
- **Personalised Stories:** Using simple language and pictures, create personalised stories for each student that highlight their strengths and areas for improvement.

Level 4:

Objective: Regularly recognise and articulate strengths and weaknesses.

Activities:

- **Strengths Bingo:** Students play bingo with cards that list various strengths. As they are called out, they mark off the strengths they believe they have.
- **Goal Setting Sessions:** Facilitate regular sessions where students set short-term goals based on their identified strengths and weaknesses.
- **Strengths Board:** Create a classroom board where students can post achievements and areas they are working on, updated regularly.

Level 5:

Objective: Consistently and confidently recognise and articulate strengths and weaknesses.

Activities:

- **Strengths Interviews:** Pair students and have them interview each other about their strengths and areas for improvement. Record and share the interviews.
- **Self-Reflection Journals:** Encourage students to maintain detailed journals reflecting on their daily activities, focusing on strengths and areas needing improvement.

- **Mentorship Program:** Implement a peer mentorship program where more self-aware students can help their peers recognise their strengths and weaknesses.

Inclusive Learning Strategies and Accommodations:

- **Visual Supports:** Use charts, pictures, and visual schedules to help students understand and articulate their strengths and weaknesses.
- **Hands-On Activities:** Incorporate tactile and kinesthetic learning experiences to engage students with different learning styles.
- **Assistive Technology:** Utilise speech-to-text apps, educational software, and other assistive technologies to support learning.
- **Differentiated Instruction:** Tailor activities to individual student needs, providing varying difficulty levels and types of support.
- **Positive Reinforcement:** Use praise and rewards to encourage recognising and articulating strengths and weaknesses.

Communication Style:

- Emphasise empathetic and patient communication.
- Use clear, simple language and consistent positive reinforcement.

Sample Schedule:

Day 1: Introducing Strengths and Weaknesses

- 10:00 AM - 11:30 AM: Name the Strengths (Level 1)
- 11:30 AM - 12:30 PM: Observation Journal (Level 1)
- 12:30 PM - 1:30 PM: Lunch Break
- 1:30 PM - 3:00 PM: Peer Praise Circle (Level 2)
- 3:00 PM - 4:00 PM: Reflective Drawing (Level 2)
- 4:00 PM - 5:00 PM: Story Time and Discussion (Level 1)

Day 2: Building Awareness

- 10:00 AM - 11:30 AM: Strengths and Weaknesses Chart (Level 2)
- 11:30 AM - 12:30 PM: Role-Playing Games (Level 3)
- 12:30 PM - 1:30 PM: Lunch Break
- 1:30 PM - 3:00 PM: Strengths Bingo (Level 4)
- 3:00 PM - 4:00 PM: Goal Setting Sessions (Level 4)
- 4:00 PM - 5:00 PM: Reflective Journals (Level 5)

Day 3: Practising Recognition

- 10:00 AM - 11:30 AM: Personalised Stories (Level 3)
- 11:30 AM - 12:30 PM: Self-Reflection Journals (Level 5)
- 12:30 PM - 1:30 PM: Lunch Break
- 1:30 PM - 3:00 PM: Strengths Interviews (Level 5)
- 3:00 PM - 4:00 PM: Mentorship Program Introduction (Level 5)
- 4:00 PM - 5:00 PM: Strengths Board Updates (Level 4)

This curriculum aims to empower students with IDD to recognise their strengths and areas for improvement, fostering self-awareness and confidence through inclusive and supportive learning strategies.

Lesson Plan: **Recognising Strengths and Areas for Improvement** **(Module 1 – Level 1)**

Focus:

Help students with IDD understand what they are good at and what challenges them in a safe, supportive, and engaging classroom.

Lesson Objective:

By the end of the lesson, students will be able to identify at least one personal strength and one area they find challenging using visual prompts and simple discussion.

Time: 45 minutes

Materials Needed:

- Flashcards with illustrated strengths (e.g., “Good listener,” “Helper,” “Fast runner”)
- Observation journal (pre-made with visuals)
- Picture book about diverse abilities
- Chart paper and markers
- Stickers or stamps for motivation

Instructional Steps:

1. Welcome & Warm-Up (5 mins)

- Greet students individually with a smile.
- Brief check-in using picture cards showing emotions. “How are you feeling today?”

2. Visual Introduction to Strengths (10 mins)

- Use extensive illustrated flashcards and say: “Some people are really good at helping others. Some are great at building with blocks.”
- As you show each card, ask: “Who thinks they are good at this?”

 *UDL Tip:* Provide the option to point, nod, or use assistive tech to respond.

3. Name the Strengths Activity (10 mins)

- Lay out the cards on the table or board.
- Let students come up individually, pick a strength card they feel fits them, and say or gesture why.
- Encourage: “Wow! You’re a fast runner! That’s a great strength.”

Story Time & Discussion (10 mins)

- Read aloud a book like *“Just Ask!”* that showcases kids with different abilities.
- After reading, use simple questions:
 - “What was Maya good at?”
 - “Do you have something you’re good at too?”

 **Accommodation:** Pair with visual cue cards for “Good at” and “Needs Help.”

Observation Journal Entry (10 mins)

- Each student gets a journal with two pages:
 - Page 1: “Things I like to do” (includes stickers or drawing boxes)
 - Page 2: “Things I don’t like yet” (non-threatening way to approach challenges)

 *Teacher helps write/draw or use photos as needed.*

Formative Assessment:

- At the end of class, each student shares (verbally or nonverbally) one activity they enjoy and one they don’t.
- Use a checklist for participation and response type (e.g., spoken, gestured, pointed).

🌟 Differentiation & Support:

- **Non-verbal learners:** Allow AAC device or pointing.
- **Emerging writers:** Use stamps, stickers, or tracing prompts.
- **Sensory needs:** Provide calm corners or soft fidgets during transitions.

🎉 Wrap-Up (3 mins)

- Say: “Everyone is good at something. You are all special.”
- Give each student a “Strength Star” sticker.

🧩 Teaching Aids

Printable illustrated strength flashcards



A visual journal template

My Journal

Today I enjoyed:

Today was hard because:

DRAWING

The template is decorated with orange and yellow geometric shapes, including triangles and flowers, and a string of bunting flags in the top left corner.

UDL-aligned observation checklist

Student Name:

Date:

Observation Notes:

- ☐ Student identified at least one strength
- ☐ Student identified one area they find hard
- ☐ Used speech
- ☐ Used gestures
- ☐ Used AAC device
- ☐ Needed verbal prompting
- ☐ Needed visual prompting
- ☐ Participated in discussion
- ☐ Completed journal entry

Additional Comments:

.....

Evaluation at Level 1

1. Observation

Method: Directly observe students during activities.

How to Implement:

- Use a checklist to record students' behaviour and engagement.
- Look for participation, focus, enthusiasm, and ability to follow instructions.

Evaluation Tool:

- Observation Checklist

Range: High, Medium, Good, Fair

Student Name	Activity Participation	Engagement Level	Ability to Follow Instructions	Notes
Student 1	High	High	Good	
Student 2	Medium	Medium	Fair	

2. Simple Self-Assessment

Method: Have students reflect on their learning through simple self-assessment tools.

How to Implement:

- Use smiley face charts where students can indicate how they feel about their understanding and participation.
- Provide visual prompts to help students select their responses.

Evaluation Tool:

- Self-Assessment Chart

Activity	Happy Face 😊	Neutral Face 😐	Sad Face 😞
Name the Strengths			
Observation Journal			
Story Time			

3. Peer Feedback

Method: Allow students to give feedback to each other in a structured manner.

How to Implement:

- Pair students and have them discuss what they think their partner is good at.
- Guide them with specific questions to elicit positive feedback.

Evaluation Tool:

- Peer Feedback Form

Student Giving Feedback	Student Receiving Feedback	Identified Strengths	Comments
Student A	Student B	Creative, Helpful	Great at drawing

4. Journals and Drawing

Method: Use journals and drawing activities to assess students' understanding and self-awareness.

How to Implement:

- Review entries in observation journals or drawings that depict strengths and weaknesses.
- Provide prompts to guide their entries and drawings.

Evaluation Tool:

- Journal Review Sheet

Student Name	Entries Consistent	Identifies Strengths	Identifies Challenges	Comments
Student 1	Yes	Yes	Yes	Very detailed
Student 2	No	Yes	No	Needs more guidance

5. End-of-Activity Reflections

Method: Use quick, informal reflections at the end of each activity.

How to Implement:

- Ask students simple questions such as "What did you enjoy most?" or "What was hard for you?"
- To simplify responses, use thumbs up/down or traffic light cards (green for easy, yellow for okay, red for hard).

Evaluation Tool:

- Reflection Notes

Activity	What did you enjoy?	What was challenging?
Name the Strengths	Identifying strengths	Talking about them
Observation Journal	Drawing in the journal	Writing words
Story Time	Listening to the stories	Answering questions

6. Group Discussions

Method: Facilitate group discussions to gauge understanding and awareness.

How to Implement:

- Ask open-ended questions about the activities and let students share their thoughts.
- Note down key points mentioned by students to assess their understanding.

Evaluation Tool:

- Discussion Summary Sheet

Student Name	Key Points Mentioned	Understanding Level	Comments
Student 1	Likes helping others	High	Very engaged
Student 2	Enjoys drawing	Medium	Participated well

Implementing These Methods

1. Preparation:

- Ensure all evaluation tools are ready before activities begin.
- Explain each evaluation method to students simply, using visual aids if necessary.

2. Execution:

- Incorporate evaluation methods seamlessly into activities.
- Encourage honest and thoughtful responses, ensuring students understand correct answers.

3. Review and Feedback:

- Regularly review the collected data to understand each student's progress.
- Provide constructive feedback to students, emphasising their strengths and areas for improvement.

Using these straightforward and effective evaluation methods, educators can gain valuable insights into the students' progress and adjust the curriculum to support their development.

Module 1

Level 2: Occasional Recognition

Grade Level: Elementary or Middle School (adaptable for cognitive developmental level rather than age)

Duration: 30–45 minutes

Learning Objectives (Student-Friendly):

- I can talk about things I'm good at and things I want to get better at.
- I can notice and say nice things about what my friends are good at.
- I can set a small goal to help me grow.

Materials Needed:

- Large poster or chart paper
- Stickers, markers, crayons
- Pre-made "Strengths and Challenges Chart" (visuals included)
- Drawing paper
- Visual timer
- Sentence starters for compliments (e.g., "You are good at...")

Lesson Sequence:

1. Warm-Up (5 minutes)

Bell Ringer:

The teacher shows pictures of different activities (e.g., painting, playing with a ball, reading). Ask:

“Which of these is easy for you? Which are tricky?”

Use thumbs up  /down  or pointing .

2. Instruction & Modelling (5–7 minutes)

Explain the concept:

“We all have things we do well and things we are still learning. That’s OK!”

 Show a simple chart with two columns:

- **“I am good at...”** (with a thumbs-up icon )
- **“I want to get better at...”** (with a )

Model placing your sticker or drawing (e.g., “I am good at reading stories. I want to get better at drawing.”)

- 3. Activity Time (20 minutes)

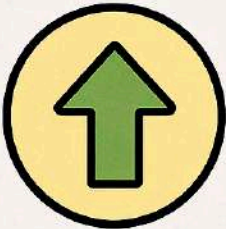
- ◆ **Activity 1 – Strengths and Challenges Chart (10 min)**

Give each student a personal chart or use a big class chart.

Students place stickers or draw symbols for:

- Something they are good at
- Something they want to improve

Support: Use visuals for choices (sports, colouring, talking, listening, etc.)

I am good at...	I want to get better at...
	

♦ **Activity 2 – Peer Praise Circle (5 min)**

Students sit in a circle. Use sentence starters to help:

“I think ___ is good at ___.”

“You helped me when ___.”

Use a talking stick or a soft ball to support turn-taking.

♦ **Activity 3 – Reflective Drawing (5 min)**

Students draw two pictures:

- One of the things they feel proud of
- One of the things they’re still practising

Support: Offer tracing or picture supports as needed.

4. Formative Assessment (5 minutes)

✓ **Check-In Questions (visual aid support):**

- Can you tell me one thing you are proud of?
- What’s one thing you want to get better at?

Give simple sticker feedback (e.g., smiley faces, stars) based on responses.

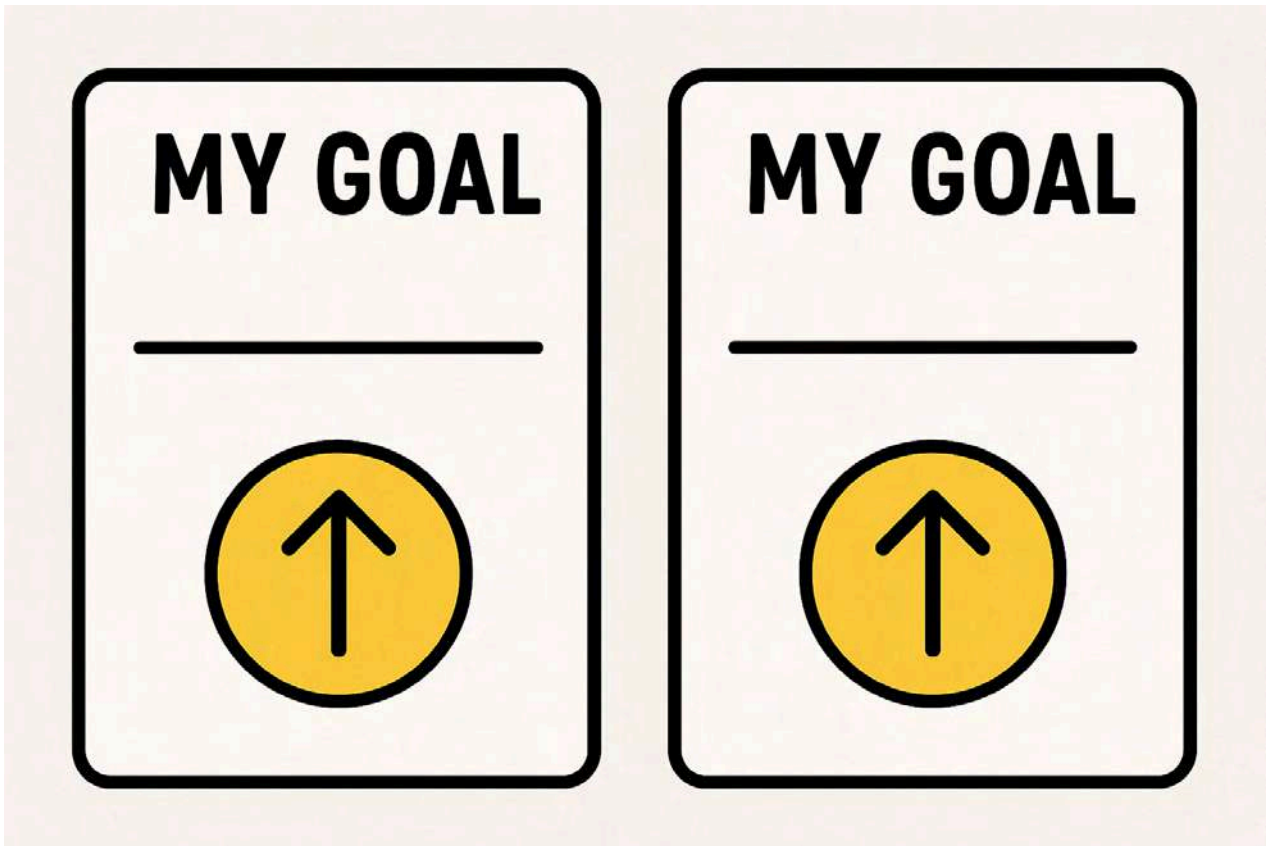


Wrap-Up (3 minutes)

 Goal Setting:

Each student sets a tiny goal for tomorrow (e.g., “I will try to color inside the lines” or “I will say something nice to a friend”).

Use visual goal cards for students to place their name on.



MY GOAL

↑

MY GOAL

↑

Differentiation & Supports:

- **Visuals & Symbols** for non-readers
- **Sentence frames** for emerging speakers
- **Choice boards** to support self-expression
- **Partner Support** or peer modelling
- **Praise & Positive Reinforcement** frequently
- **Break cards** are available if needed



Mini-Script Example:

Teacher:

“Look at my chart! I put a star next to ‘reading books’ because I’m good at that. But I need help drawing. What about you?”

Student A:

“I’m good at jumping!”

Teacher:

“That’s awesome, you are a strong jumper! Let’s put a sticker for that. What’s something you want to get better at?”

Student A:

“Writing my name.”

Teacher:

“That’s a great goal. We’ll practice a little each day!”

Evaluation Methods:

1. Observation and Participation Checklist
2. Peer Feedback
3. Art and Reflection Assessment

Detailed Evaluation Methods

Activity 1: Strengths and Weaknesses Chart

Evaluation Criteria:

- Ability to identify and distinguish between strengths and weaknesses.
- Active participation in placing stickers or marks on the chart.

Evaluation Method: Observation and Participation Checklist

Observation Checklist:

- Use a simple checklist to note each student's ability to identify strengths and weaknesses during the activity.
- Observe and record participation and engagement levels.

Checklist Example:

Student Name	Identifies Strengths	Identifies Weaknesses	Active Participation	Notes
Student 1	Yes	Yes	Yes	Very engaged
Student 2	Yes	No	Yes	Needs more support
Student 3	No	No	No	Shy, needs encouragement

Activity 2: Peer Praise Circle

Evaluation Criteria:

- Willingness to give and receive praise.
- Ability to recognise and articulate peers' strengths.

Evaluation Method: Peer Feedback

Simple Peer Feedback Form:

- Give students a form to give feedback on their peers during the praise circle.
- Encourage them to note one strength of each peer.

Feedback Form Example:

Peer Name	Strength Noted
Peer 1	Very helpful
Peer 2	Good at drawing
Peer 3	Friendly

Teacher's Observation:

- Observe interactions and note each student's comfort level and participation.

Checklist Example:

Student Name	Gives Praise	Receives Praise	Notes on Interaction
Student 1	Yes	Yes	Confidently participated
Student 2	No	Yes	Needs encouragement to speak
Student 3	Yes	No	Received praise well, but was shy

Activity 3: Reflective Drawing

Evaluation Criteria:

- Ability to visually express strengths and challenges.
- Engagement and effort in the drawing activity.

Evaluation Method: Art and Reflection Assessment

Art Review:

- Collect and review students' drawings.
- Assess whether students can depict their strengths and challenges.

Simple Rubric Example:

Criteria	Yes (✓)	No (✗)	Notes
Depicts a strength	✓	✗	Good at sports
Depicts a challenge	✓	✗	Finds writing difficult
Shows effort and engagement	✓	✗	Enjoyed drawing, spent time on details

Discussion:

- Have a brief one-on-one discussion with each student about their drawing.
- Ask them to explain their drawing and talk about what it represents.

Summary:

- Use simple observation checklists, peer feedback forms, and art reviews to evaluate students' progress.
- Regularly review and discuss evaluations with each student to help them understand their strengths and areas for improvement.
- Provide positive reinforcement and support based on evaluation outcomes to encourage continued growth and self-awareness.

These simplified evaluation methods will help educators assess the effectiveness of Curriculum Level 2 activities in increasing students' recognition of their strengths and weaknesses.

Module 1

Level 3: Lesson Plan: Recognising Our Strengths and Challenges

Grade Band: Adaptable for students aged 14+ with mild to moderate IDD

Duration: 45 minutes

Setting: Self-contained or inclusive classroom

Learning Objectives

By the end of this lesson, students will be able to:

- Identify at least one personal strength and one challenge with verbal or visual support.
- Participate in a role-play that demonstrates their understanding of personal abilities and needs.
- Contribute to the creation of a personalised strengths-and-challenges story.

Materials

- Printable “Strengths and Challenges” worksheet (with symbols/pictures and text)
- Role-play prompt cards with visuals
- Picture-supported personal story templates
- Markers, crayons, glue sticks
- Mirror or selfie camera (for self-reflection)
- Visual timer and fidget options for engagement

Lesson Sequence

1. Bell Ringer (5 minutes): “Mirror Talk”

Activity: Students look in a mirror (or use a front-facing camera) and say or point to pictures that represent things they are good at (e.g., “I am kind,” “I help friends,” “I can color well”).

Goal: Activate positive self-talk.

2. Guided Instruction (10 minutes): Teacher Modelling

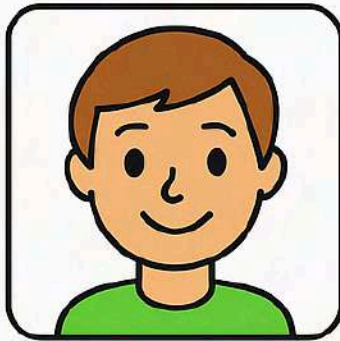
Scripted Demo:

“I want to show you something I am good at – drawing!”
(*shows drawing*) “But I need help with spelling. That’s okay! We all have things we do well and things we work on.”

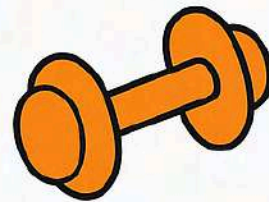
Use a visual chart to list the teacher’s strengths and challenges.

My Strengths and Challenges

My name is _____

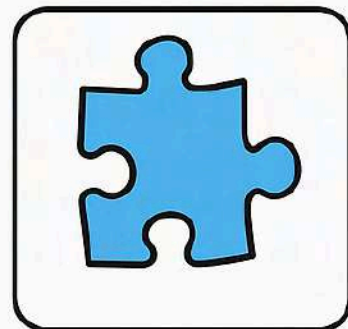


I am good at



I want to get better at

I want to
get better at



3. Activity Rotation (15 minutes)

Break students into three small groups and rotate every 5 minutes.

Station 1: Worksheet Centre

Students complete the *Strengths and Challenges Worksheet* with teacher or aide support. Use images (e.g., happy face lifting weights = “strong,” puzzle piece = “needs help”).

Station 2: Role-Play Centre

Students pick prompt cards (e.g., “You’re helping a friend tie their shoe” or “You’re asked to read a hard word”) and act out or describe what they would do. Discuss what skill was used or needed.

Station 3: Story Centre

Students begin a picture-supported story using their photo and fill in:

“My name is _____. I am good at _____. I want to get better at _____.”

They decorate with art supplies.

Formative Assessment (5 minutes)

- Exit ticket: Point to or say one strength and challenge they shared today.
- The teacher notes engagement, comprehension, and communication methods (verbal, symbol, device, etc.).

Wrap-Up Reflection (5 minutes)

“Today we all found something we are great at. We also saw that it's okay to need help sometimes. Everyone is different, and everyone is awesome.”

Invite students to put their story sheet in a class “Strength Book.”

Differentiation / UDL Strategies

- **Representation:** Visuals, symbols, sentence frames, spoken language, and gestures.
- **Action/Expression:** Students can write, draw, point, or speak.
- **Engagement:** Stations give movement and choice; visuals help maintain focus.

Mini-Script Example

Teacher: “Kai, can you show me something you’re really good at?”

Kai (points to picture): “Jumping rope!”

Teacher: “Yes! You’re amazing at jumping rope. What’s one thing you’re still working on?”

Kai: “Reading... hard words.”

Teacher: “And that’s okay. You’re already trying so hard, and we’ll help you get better.”

Evaluation Methods at Level 3

Objective: Improve consistency in recognising strengths and weaknesses.

Evaluation Methods:

1. Observation and Participation Tracking:

- Monitor student engagement and participation during activities.
- Use simple checklists to record observations.

2. Student Self-Reflection:

- Provide students with easy-to-complete reflection sheets.
- Conduct short, guided discussions about their reflections.

3. Peer Feedback:

- Implement simple peer feedback sessions where students can share observations about each other's strengths and weaknesses.

Evaluation Tools:

1. Observation and Participation Tracking

Tool: Simple Observation Checklist

Student Name	Engages in Activities	Identifies Strengths	Identifies Weaknesses	Notes
Student 1	Yes	Yes	Yes	
Student 2	Yes	No	Yes	

How to Use:

- During activities, observe students and check the appropriate boxes.
- Make quick notes on any significant behaviours or comments.

2. Student Self-Reflection

Tool: Self-Reflection Sheet

Question	Student's Response
What activities did you enjoy?	
What activities were strenuous?	
What are you good at?	
What do you want to get better at?	

How to Use:

- Give students a self-reflection sheet at the end of each week or activity.
- Assist students in filling out the sheet if needed.
- Review the responses to understand each student's self-awareness.

3. Peer Feedback

Tool: Peer Feedback Form

Feedback Questions	Response
What is your friend's strength?	
What do you think your friend can improve?	
How can you help your friend improve?	

How to Use:

- Pair students and guide them in providing feedback to each other using the form.
- Ensure feedback is positive and constructive.
- Discuss the feedback with each pair to help them understand and use it.

Example Activities and Corresponding Evaluations:

Activity: Strengths and Weaknesses Worksheet

Description: Students list activities they excel in and those they need to work on with teacher support.

Evaluation:

- **Observation Checklist:** Track which students can identify strengths and weaknesses independently.
- **Self-Reflection Sheet:** Students complete a reflection after completing the worksheet to evaluate their understanding.

Activity: Role-Playing Games

Description: Use role-playing to simulate scenarios where students can demonstrate their strengths and identify areas of improvement.

Evaluation:

- **Observation Checklist:** Monitor student engagement and ability to identify strengths and weaknesses during role-play.
- **Peer Feedback Form:** Students provide feedback to their role-play partners.

Activity: Personalised Stories

Description: Create personalised stories for each student, highlighting their strengths and areas they can improve.

Evaluation:

- **Self-Reflection Sheet:** After reading their personalised story, students reflect on how it relates to their strengths and weaknesses.
- **Observation Checklist:** Observe how students react to their personalised stories and whether they can relate to the content.

Summary

Educators can effectively evaluate the learning outcomes for students at Curriculum Level 3 by using simple observation checklists, self-reflection sheets, and peer feedback forms. These methods help ensure that students consistently recognise their strengths and weaknesses while providing educators with clear insights into each student's progress and areas needing further support.

Training Materials and Methods for Curriculum Level 4: Regularly Recognise and Articulate Strengths and Weaknesses

Activity 1: Strengths Bingo

Training Materials:

- Bingo cards with various strengths listed (e.g., "good listener," "creative thinker," "kind-hearted," "organized").
- Bingo markers (e.g., coloured chips, stickers).
- Bingo calling cards with corresponding strengths.

Training Method:

1. Introduction (10 minutes):

- Explain the concept of strengths and how they can differ for each individual.
- Distribute bingo cards and markers to each student.

2. Playing Bingo (30 minutes):

- Call out strengths from the bingo calling cards.
- Students mark off the strengths they believe they possess on their bingo cards.
- Encourage students to share examples of how they demonstrate each strength.

3. Discussion (10 minutes):

- After bingo, facilitate a discussion about the strengths identified by the students.
- Discuss how recognising and articulating strengths can boost self-confidence and help set goals.

Examples of Bingo cards with different strengths listed:

Bingo Card 1:

1. Good listener
2. Creative thinker
3. Kind-hearted
4. Organised
5. Problem solver
6. Team player
7. Responsible
8. Resilient
9. Empathetic
10. Curious

Bingo Card 2:

1. Patient
2. Confident
3. Cooperative
4. Optimistic
5. Flexible
6. Honest
7. Hardworking
8. Enthusiastic
9. Persistent
10. Reliable

Bingo Card 3:

1. Empowered
2. Adaptable
3. Resourceful
4. Compassionate
5. Open-minded
6. Innovative
7. Supportive
8. Motivated
9. Respectful
10. Determined

Bingo Card 4:

1. Assertive
2. Reflective
3. Decisive
4. Organised
5. Reliable
6. Creative
7. Empathetic
8. Patient
9. Analytical
10. Optimistic

Feel free to mix and match these strengths or customise them further to suit the needs and preferences of your students!

Activity 2: Goal Setting Sessions

Let's Talk About Goals!

- We will talk about things we want to get better at and things we already do well.
- Then, we'll pick one thing we want to improve and draw a picture or write a word about it on our worksheet.

Here's How We Do It:

1. Think About What You Want to Get Better At:

- Think about something you want to do better. It could be something like being more patient, doing homework, or talking to new friends.

2. Draw a Picture or Write a Word:

- Draw a picture or write a word about your goal on the worksheet. If you want to be more patient, draw a picture of someone waiting calmly or write "patient."

3. Talk About How You'll Reach Your Goal:

- Think about how you can improve at your goal. For example, you could take deep breaths when upset or practice waiting your turn.

4. Decide When You'll Work on Your Goal:

- Pick a time to practice your goal. It could be after school, before bed, or during a break.

5. Plan a Reward for When You Reach Your Goal:

- When you reach your goal, think about something you can do for yourself. It could be playing your favourite game, watching a movie, or having a treat.

Let's work together to set goals and become even better at what we do!

Goal-Setting Worksheet Template:

Goal: _____

Picture or Word: [Draw a picture or write a word about your goal here]

How I Will Reach My Goal:

- [Write or draw a way you can work on your goal]

When I Will Work on My Goal:

- [Write or draw a time when you will practice your goal]

Reward for Achieving My Goal:

- [Write or draw something nice you will do for yourself when you reach your goal]

Here's an example of a simple picture representing a goal:

Goal: Being a Good Friend

Picture or Word: [Drawing of two smiling stick figures holding hands]

How I Will Reach My Goal: [Drawing of two friends playing together]

When I Will Work on My Goal: [Drawing of a clock showing after school time]

Reward for Achieving My Goal: [Drawing of an ice cream cone]

In this example, the goal is represented by a simple drawing of two friends holding hands, indicating the desire to be a good friend. The strategies for reaching the goal and the time for practising it are depicted visually to make it easier for individuals with low cognitive abilities to understand. Finally, a reward, such as an ice cream cone, serves as motivation for achieving the goal.

Activity 3: Strengths Board**Training Materials:**

- Bulletin board or poster paper.
- Sticky notes or index cards.
- Markers or pens.

Training Method:**1. Introduction (10 minutes):**

- Introduce the concept of the strengths board as a visual representation of students' achievements and growth.
- Explain how the board will celebrate successes and track progress over time.

2. Setting Up the Strengths Board (20 minutes):

- Divide the board into sections for strengths and areas for improvement.
- Give students sticky notes or index cards to write their achievements and goals.
- Encourage students to decorate their notes and be creative.

3. Updating the Strengths Board (10 minutes):

- Establish a regular schedule for updating the board, such as weekly or monthly.
- Encourage students to add new achievements and goals as they progress.
- Facilitate discussions about updates, celebrate successes, and offer support for ongoing challenges.

Conclusion:

Regularly engaging in activities like Strengths Bingo, Goal Setting Sessions, and maintaining the Strengths Board can help students at Curriculum Level 4 develop the skills to recognise and articulate their strengths and weaknesses confidently. These interactive and hands-on methods promote self-awareness, goal setting, and positive reinforcement, fostering a supportive learning environment for students with intellectual and developmental disabilities.

Rubric:

Criteria	Level 1: Not at All	Level 2: A Little	Level 3: Sometimes	Level 4: Often	Level 5: Very Often
Understanding of Strengths	Unable to identify any strengths	Identifies a few strengths with help	Sometimes identifies strengths independently	Often identifies strengths independently	Confidently identifies strengths independently
Articulation of Weaknesses	Unable to articulate weaknesses	Articulate s weakness with significant help	Sometimes articulates weaknesses independently	Often articulates weaknesses independently	Confidently articulates weaknesses independently
Goal Setting	Does not set clear goals	Sets goals with significant help	Sometimes sets clear goals independently	Often sets clear goals independently	Consistently sets clear and achievable goals independently
Following the Goal Plan	Does not follow the plan	Follows the plan with significant help	Sometimes follows the plan independently	Often follows the plan independently	Consistently follows the plan independently
Participation in Strengths Bingo	Identifies 1-2 strengths	Identifies 3-4 strengths	Identifies 5-6 strengths	Identifies 7-8 strengths	Identifies 9-10 strengths
Updating Strengths Board	Never updates the board	Updates the board once	Updates the board twice	Updates the board three times	Updates the board four or more times

Overall Engagement	Shows no engagement	Shows minimal engagement	Shows moderate engagement	Shows high engagement	Shows very high engagement

This rubric and evaluation format will help measure the progress and effectiveness of the Level-4 training in assisting participants in regularly recognising and articulating their strengths and weaknesses.

Simple Evaluation Sheets for Level-4 Training

1. Strengths Bingo Evaluation Sheet

Student Name: _____

Date: _____

Strengths Bingo

Instructions:

Mark the strengths you heard and think you have.

Strength	Mark, if you have it
Good listener	☐
Creative thinker	☐
Kind-hearted	☐
Organised	☐
Problem solver	☐
Team player	☐
Responsible	☐
Resilient	☐
Empathetic	☐
Curious	☐

Patient	☐
Confident	☐
Cooperative	☐
Optimistic	☐
Flexible	☐
Honest	☐
Hardworking	☐
Enthusiastic	☐
Persistent	☐
Reliable	☐

Comments (Teacher):

2. Goal Setting Session Evaluation Sheet

Student Name: _____

Date: _____

My Goal:

1. What is your goal?

- Draw or write your goal: _____

2. How will you reach your goal?

- Draw or write one way you will work on your goal: _____

3. When will you work on your goal?

- Draw or write when you will practice your goal: _____

4. Reward:

- Draw or write what you will do to reward yourself: _____

Progress Check (Teacher):

Session Date	Goal Progress	Comments
Session 1	☐ Not Started	_____
	☐ In Progress	_____
	☐ Completed	_____
Session 2	☐ Not Started	_____
	☐ In Progress	_____
	☐ Completed	_____
Session 3	☐ Not Started	_____
	☐ In Progress	_____
	☐ Completed	_____

Level 5 Curriculum Training Materials and Methods

Objective: Consistently and confidently recognise and articulate strengths and weaknesses.

Activity 1: Strengths Interviews

Materials:

- Interview Question Sheets
- Recording Devices (smartphones, tablets, or digital recorders)
- Consent Forms for recording
- Example Interview Video (demonstrating the process)

Methods:

1. Preparation:

- **Introduction:** Explain the purpose of the activity and how it will help students recognise and articulate their strengths and weaknesses.
- **Demonstration:** Show an example interview video where two students interview each other about their strengths and areas for improvement.
- **Question Sheets:** Provide each student with a sheet of interview questions. Example questions might include:
 - What is something you are good at?
 - Can you share a recent achievement?
 - What is something you find challenging?
 - How can you improve in this area?

2. Interview Process:

- **Pairing:** Pair students thoughtfully, considering their communication styles and comfort levels.
- **Practice:** Allow pairs to practice asking and answering questions without recording to build confidence.
- **Recording:** Once comfortable, have students interview each other while being recorded. Ensure all necessary consent forms are signed.

3. Sharing and Feedback:

- **Viewing:** Playback the recordings in small groups or one-on-one sessions.
- **Discussion:** Facilitate a conversation about what each student learned from their interview. Encourage positive feedback and constructive suggestions.

Interview Question Sheets

Introduction:

These Strengths Question Sheets are designed to help individuals with intellectual disabilities, autism, and learning disabilities aged 14 to 35 recognise and articulate their strengths and areas for improvement. Each sheet includes simple, clear questions with visual aids to facilitate understanding.

Strengths Question Sheet

Instructions:

- Read each question aloud or with assistance.
- Think about your answers and write or draw your responses in the space provided.
- Use pictures or symbols if they help you express your answers better.

1. What are you good at?

Examples: drawing, singing, helping others, playing a sport

- Answer: _____
- Draw or attach a picture of you doing something you are good at:

2. What do you enjoy doing the most?

Examples: *playing games, reading books, spending time with friends*

- Answer: _____
 - Draw or attach a picture of you doing something you enjoy:
-

3. What is something that makes you feel proud?

Examples: *completing a project, helping someone, learning a new skill*

- Answer: _____
 - Draw or attach a picture of you feeling proud:
-

4. What do your friends and family say you are good at?

Examples: *being a good friend, cooking, solving problems*

- Answer: _____
 - Draw or attach a picture of you doing something your friends or family say you are good at:
-

5. What is something you want to get better at?

Examples: *reading, writing, playing an instrument, talking to people*

- Answer: _____
 - Draw or attach a picture of you working on something you want to improve:
-

6. What helps you do your best?

Examples: listening to music, having a quiet space, getting help from a friend

- Answer: _____
 - Draw or attach a picture of you doing your best with the help you need:
-

7. What do you find challenging?

Examples: speaking in front of a group, doing math, and making new friends

- Answer: _____
 - Draw or attach a picture of you facing a challenge:
-

8. How do you try to get better at something?

Examples: practising, asking for help, watching videos

- Answer: _____
 - Draw or attach a picture of you working to improve:
-

9. Who can help you with the things you find challenging?

Examples: parents, teachers, friends, coaches

- Answer: _____
 - Draw or attach a picture of someone helping you:
-

10. What makes you happy when you are learning?

Examples: *working with friends, using computers, taking breaks*

- Answer: _____
 - Draw or attach a picture of you happy while learning:
-

Tips for Educators and Supporters:

- **Read Questions Aloud:** Some individuals may need to read questions to themselves to understand better and respond.
- **Provide Examples:** Offer examples for each question to help clarify.
- **Use Visual Aids:** Utilise pictures, symbols, or drawings to help individuals express their answers.
- **Be Patient and Encouraging:** Give individuals time to think, respond, and encourage all efforts.
- **Review and Discuss:** After completing the sheets, review the answers with the individual, providing positive feedback and discussing their strengths and areas for improvement.

These question sheets are a starting point to help individuals with intellectual disabilities, autism, and learning disabilities recognise their strengths and areas for improvement, fostering self-awareness and confidence.

Simple Consent Form for Recording and Interviewing

Participant Information

Name of Participant: _____

Age: _____

Type of Disability: (e.g., intellectual disability, autism, learning disability)

Purpose of Recording and Interview

We are asking for your permission to record an interview in which you will discuss your strengths and areas for improvement. These recordings will help you and your peers learn and grow.

What Will Happen

- You will be paired with another student to interview each other.
- The interview will be recorded using a camera or a voice recorder.
- You will answer questions about what you are good at and what you find challenging.

How the Recordings Will Be Used

- You, your peers, and your teachers will view the recordings to help with learning.
- The recordings will not be shared outside of the classroom without your permission.

Your Rights

- You can choose to participate or not.
- You can stop the interview at any time if you feel uncomfortable.
- You can ask for the recording to be stopped or deleted at any time.

Consent

Participant Consent:

- I agree to participate in the interview.
- I agree to be recorded.

Signature of Participant: _____

Date: _____

Parent/Guardian Consent (if participant is under 18 or requires additional support):

- I permit my child/ward to participate in the interview.
- I permit my child/ward to be recorded.

Signature of Parent/Guardian: _____

Date: _____

Educator/Facilitator:

- I have explained the purpose of the recording and the rights of the participant.

Signature of Educator/Facilitator: _____

Date: _____

Contact Information

If you have any questions, please contact:

Name: _____

Phone: _____

Email: _____

Thank you for your participation!

This form is designed to be simple and easy to understand, ensuring that participants and their guardians are fully informed and comfortable with the process.

Activity 2: Self-Reflection Journals

Materials:

- Journals or Notebooks
- Writing and Drawing Tools (pens, pencils, markers)
- Reflection Prompts Cards
- Example Journal Entries (illustrating detailed reflections)

Methods:

1. Introduction:

- **Purpose:** Explain the importance of self-reflection in recognising strengths and areas for improvement.
- **Examples:** Share example journal entries to illustrate what detailed reflections might look like.

2. Journal Writing:

- **Daily Prompts:** Provide daily reflection prompts to guide students. Examples might include:
 - What did I do well today?
 - What was something I found difficult today?
 - How did I overcome a challenge today?
 - What is one thing I can improve on tomorrow?
- **Creative Options:** Encourage students to use drawings, mind maps, or collages if they find it easier to express themselves visually.

3. Review and Feedback:

- **Regular Check-Ins:** Schedule regular one-on-one or small group check-ins to review journal entries. Provide positive feedback and encourage more profound reflections.
- **Sharing Sessions:** Create opportunities for students to share parts of their journals with peers, fostering a supportive environment.

Activity 3: Mentorship Program

Materials:

- Mentorship Program Guidelines
- Mentor-Mentee Pairing Sheets
- Reflection and Feedback Forms
- Training Materials for Mentors (including role-play scenarios and communication strategies)

Methods:

1. Program Setup:

- **Introduction:** Explain the mentorship program, its goals, and how it will operate.
- **Selection:** Identify potential mentors (students already at Level 5) and mentees (students at earlier levels).

2. Training for Mentors:

- **Workshops:** Conduct workshops for mentors to teach them about effective mentoring techniques, including active listening, positive reinforcement, and providing constructive feedback.

- **Role-Playing:** Use role-playing scenarios to practice mentoring conversations. Provide feedback to improve their mentoring skills.

3. Pairing and Mentorship:

- **Pairing:** Pair mentors and mentees based on their strengths, interests, and needs.
- **Regular Meetings:** Schedule regular meetings for mentor-mentee pairs to discuss strengths and areas for improvement. Provide structured activities and discussion points for these meetings.
- **Support:** Offer ongoing support and supervision for mentors. Create a space where they can share their experiences and seek educator advice.

4. Reflection and Feedback:

- **Mentor Logs:** Encourage mentors to keep logs of their sessions, noting progress and areas that need further attention.
- **Feedback Forms:** Use feedback forms to gather insights from mentors and mentees about the program's effectiveness.
- **Review Sessions:** Conduct regular review sessions with all participants to discuss progress and make necessary adjustments to the program.

Guidelines for Mentoring Individuals Aged 14 to 35 with Intellectual Disabilities, Autism, and Learning Disabilities

1. Build a Trusting Relationship

- **Be Patient and Understanding:** Take the time to understand each individual's unique needs and communication style.
- **Show Consistency:** Be reliable and consistent in your interactions to build trust.
- **Listen Actively:** Pay close attention to what they say verbally and non-verbally, and show that you value their input.

2. Set Clear and Achievable Goals

- **Collaborate on Goals:** Work with the mentee to set realistic and specific short-term and long-term goals.
- **Break Down Tasks:** Simplify tasks into manageable steps to help them achieve their goals.
- **Celebrate Milestones:** Recognise and celebrate achievements, no matter how small, to encourage progress.

3. Use Effective Communication Strategies

- **Simplify Language:** Use clear, simple, and direct language.
- **Visual Supports:** Incorporate visual aids like charts, pictures, and schedules to enhance understanding.
- **Check for Understanding:** Regularly ask questions to ensure the mentee comprehends the information.

4. Foster Independence and Self-Advocacy

- **Encourage Decision-Making:** Allow mentees to make choices and decisions to build their confidence and autonomy.
- **Teach Problem-Solving:** Guide them through problem-solving steps and encourage them to find solutions.
- **Promote Self-Expression:** Encourage mentees to express their needs, preferences, and opinions.

5. Provide Structure and Routine

- **Consistent Schedule:** Maintain a regular schedule for meetings and activities.
- **Predictability:** Clearly outline what to expect in each session to reduce anxiety and confusion.
- **Adapt Flexibly:** Be prepared to adapt plans to accommodate the mentee's changing needs or preferences.

6. Use Positive Reinforcement

- **Acknowledge Efforts:** Consistently acknowledge and praise efforts and improvements.
- **Reward Systems:** Implement simple reward systems to motivate and reinforce positive behaviour.
- **Encouragement:** Provide constant encouragement and support to build self-esteem.

7. Create an Inclusive and Supportive Environment

- **Safe Space:** Ensure the mentee feels safe, respected, and valued.
- **Peer Interaction:** Facilitate opportunities for social interaction and peer learning.
- **Family Involvement:** Involve family members or caregivers when appropriate to support the mentoring process.

8. Provide Tailored Support and Accommodations

- **Individualised Approach:** Customise your mentoring approach based on the mentee's needs, strengths, and interests.
- **Assistive Technologies:** Utilise appropriate assistive technologies to aid learning and communication.
- **Adapt Activities:** Modify activities to suit the mentee's abilities and learning styles.

9. Monitor Progress and Adjust Plans

- **Regular Check-Ins:** Frequently review progress towards goals and adjust plans as necessary.
- **Feedback Loop:** Provide constructive feedback and encourage the mentee to share their thoughts on the mentoring process.
- **Document Progress:** Keep detailed records of sessions and progress to inform future planning.

10. Stay Informed and Seek Support

- **Continuous Learning:** Stay updated on best practices and strategies for mentoring individuals with disabilities.
- **Professional Support:** Seek guidance and support from other professionals or mentors when needed.
- **Self-Care:** Ensure you care for your well-being to be an effective and empathetic mentor.

By following these guidelines, mentors can provide effective, empathetic, and tailored support to individuals with intellectual disabilities, autism, and learning disabilities, fostering their growth, independence, and self-confidence.

Mentor-Mentee Pairing Sheet

Mentor Information:

- Name: _____
- Age: _____
- Contact Information: _____
- Strengths: _____
- Areas of Expertise/Interest: _____
- Previous Mentoring Experience: _____
- Preferred Communication Style: _____
- Hobbies and Interests: _____

Mentee Information:

- Name: _____
- Age: _____
- Contact Information: _____
- Strengths: _____
- Areas for Improvement: _____
- Learning Style (Visual, Auditory, Kinesthetic): _____
- Goals for Mentorship: _____
- Hobbies and Interests: _____

Matching Criteria:

1. Common Interests:

- Mentor: _____
- Mentee: _____

2. Strengths Alignment:

- Mentor's Strengths: _____
- Mentee's Goals: _____

3. Communication Style Compatibility:

- Mentor: _____
- Mentee: _____

4. Preferred Activities:

- Mentor: _____
- Mentee: _____

Initial Meeting Notes:

- Date of First Meeting: _____
- Initial Goals Discussion:
 - Mentor: _____
 - Mentee: _____
- Scheduled Activities:
 - _____
 - _____

Ongoing Support and Check-ins:

- Next Meeting Date: _____
- Progress Notes:
 - Mentor: _____
 - Mentee: _____
- Adjustments to Goals/Activities:
 - _____
 - _____

Feedback:

- Mentor's Feedback:
 - What went well: _____
 - Areas for improvement: _____
- Mentee's Feedback:
 - What did you enjoy: _____
 - What can be better: _____

Signature of Mentor: _____

Signature of Mentee: _____

Date: _____

Coordinator's Comments:

- _____
- _____

Coordinator's Signature: _____

Date: _____

This pairing sheet helps match mentors and mentees based on their strengths, interests, and communication styles, ensuring a productive and supportive mentoring relationship.

Reflection and Feedback Forms for Mentoring

Mentor Reflection Form

Name: _____

Date: _____

Mentor's Name: _____

Mentee's Name: _____

1. Session Overview:

- Date of Session: _____
- Topics Discussed: _____
- Activities Conducted: _____

2. Reflection:

- What went well during this session?

- What challenges did you face?

- How did the mentee respond to the activities?

- What strengths did you notice in your mentee?

- What areas for improvement did you identify in your mentee?

3. Mentor Self-Reflection:

- What did you learn from this session?

- How can you improve your mentoring approach for future sessions?

4. Feedback:

- What additional support do you need as a mentor?

- Any suggestions for improving the mentoring program?

Mentee Feedback Form

Name: _____

Date: _____

Mentor's Name: _____

1. Session Feedback:

- Did you enjoy today's session?
 - Yes
 - No
 - Somewhat

2. Activities:

- What did you like about today's activities?

- What did you find challenging?

3. Learning and Reflection:

- What is one thing you learned about yourself today?

- Did you discover any new strengths? If yes, please share.

- Did you identify any areas where you want to improve? If yes, please share.

4. Mentor Interaction:

- Did your mentor listen to you and understand your needs?
 - Yes
 - No
 - Sometimes
- How can your mentor better support you?

5. Overall Experience:

- Is there anything else you want to share about your experience today?

Parent/Guardian Feedback Form

Name: _____

Date: _____

Mentor's Name: _____

Mentee's Name: _____

1. Session Overview:

- How would you rate the overall effectiveness of the mentoring sessions?
 - Excellent
 - Good
 - Fair
 - Poor

2. Observation and Feedback:

- What positive changes have you observed in your child since starting the mentoring program?

- Have you noticed any challenges or areas where your child needs more support?

3. Mentor Interaction:

- How would you rate the communication and interaction between the mentor and your child?
 - Excellent
 - Good
 - Fair
 - Poor
- How can the mentor better support your child's development?

4. Program Improvement:

- Do you have any suggestions for improving the mentoring program?

5. Additional Comments:

- Any other comments or feedback?

These reflection and feedback forms will help gather valuable insights from mentors, mentees, and parents/guardians to ensure continuous improvement and effectiveness of the mentoring program.

Training Outline for Mentors

1. Introduction to Mentoring

Objective: Equip mentors with the knowledge and skills to effectively support individuals with intellectual, autism, and learning disabilities.

Materials:

- Mentor Training Manual
- Overview of Intellectual Disabilities, Autism, and Learning Disabilities
- Roles and Responsibilities of a Mentor
- Ethical Guidelines for Mentoring

Methods:

- Interactive Presentation
- Group Discussion
- Q&A Session

2. Communication Strategies

Objective: Teach mentors effective communication techniques tailored to individuals with intellectual, autism, and learning disabilities.

Materials:

- Communication Strategy Handouts
- Visual Aids (e.g., charts, pictures)
- Examples of Simple and Clear Language
- Non-Verbal Communication Tips

Methods:

- **Workshop:**
 - **Active Listening:** Techniques for active listening, including maintaining eye contact, nodding, and paraphrasing.
 - **Simple Language:** Practice using simple, clear, and direct language. Avoid jargon and complex sentences.
 - **Non-Verbal Cues:** Use body language, gestures, and facial expressions to support verbal communication.
- **Role-Play Scenarios:**
 - **Scenario 1:** A mentee is upset and has difficulty expressing why. The mentor practices calming techniques and helps the mentee articulate their feelings.
 - **Scenario 2:** A mentee misunderstands instructions for a task. The mentor rephrases the instructions using simpler language and visual aids.

3. Building Trust and Rapport

Objective: Develop strategies for building trust and rapport with mentees.

Materials:

- Trust-Building Activity Sheets
- Icebreaker Games
- Case Studies on Successful Mentor-Mentee Relationships

Methods:

- **Workshop:**
 - **Icebreakers:** Start with simple icebreaker activities to create a comfortable atmosphere.
 - **Empathy Exercises:** Activities that help mentors put themselves in their mentees' shoes.
- **Role-Play Scenarios:**
 - **Scenario 1:** A new mentor meeting their mentee for the first time. Practice introducing themselves and finding common interests.
 - **Scenario 2:** A mentee is reluctant to participate in activities. The mentor uses positive reinforcement and empathy to encourage engagement.

4. Goal Setting and Progress Monitoring

Objective: Train mentors to help mentees set realistic goals and monitor their progress.

Materials:

- Goal Setting Worksheets
- Progress Tracking Charts
- Examples of Short-Term and Long-Term Goals

Methods:

- **Workshop:**
 - **SMART Goals:** Teach mentors to help mentees set Specific, Measurable, Achievable, Relevant, and Time-bound goals.
 - **Progress Reviews:** Techniques for regular progress reviews and adjustments.
- **Role-Play Scenarios:**
 - Scenario 1: A mentee sets a goal to improve a skill (e.g., reading). The mentor helps break down the goal into smaller, manageable steps.
 - Scenario 2: A mentee struggles to meet a goal. The mentor practices providing constructive feedback and adjusting the goal.

5. Problem-Solving and Conflict Resolution

Objective: Equip mentors with problem-solving and conflict resolution skills.

Materials:

- Problem-Solving Framework Handouts
- Conflict Resolution Role-Play Scripts
- Case Studies on Common Challenges

Methods:

- **Workshop:**
 - **Problem-Solving Steps:** Identify the problem, brainstorm solutions, evaluate options, and implement the plan.
 - **Conflict Resolution Techniques:** Active listening, empathy, and finding common ground.
- **Role-Play Scenarios:**
 - **Scenario 1:** A mentee is frustrated with a task. The mentor guides them through problem-solving steps.
 - **Scenario 2:** A conflict arises between the mentee and another student. The mentor practices mediation techniques to resolve the issue.

6. Self-Care and Boundaries

Objective: Teach mentors the importance of self-care and maintaining boundaries.

Materials:

- Self-Care Checklists
- Boundary Setting Guidelines
- Stress Management Techniques

Methods:

- **Workshop:**
 - **Self-Care Strategies:** Encourage mentors to take care of their well-being effectively.

- **Setting Boundaries:** Teach mentors how to set and maintain healthy boundaries with mentees.
- **Role-Play Scenarios:**
 - **Scenario 1:** A mentee repeatedly contacts the mentor outside agreed-upon times. The mentor practices setting clear boundaries.
 - **Scenario 2:** A mentor feels overwhelmed. The mentor practices self-care techniques and seeks support from program coordinators.

Example Role-Play Scenarios and Scripts

Scenario 1: Calming an Upset Mentee

Context: The mentee is upset and having difficulty expressing why.

Script:

- Mentor: "I can see that you're upset. It's okay to feel this way. Can you show me what's wrong or tell me a little bit about it?"
- Mentee: "I don't know. Everything is just hard."
- Mentor: "It sounds like you're feeling overwhelmed. Let's take a deep breath together. Can you think of one thing that is bothering you right now?"
- Mentee: "I'm having trouble with my homework."
- Mentor: "Thank you for sharing that with me. Let's look at your homework together and see how we can make it easier."

Scenario 2: Encouraging Participation

Context: The mentee is reluctant to join a group activity.

Script:

- Mentor: "Hi [Mentee's Name], I noticed you're sitting here alone. Would you like to join the group activity with us?"
- Mentee: "No, I don't want to."
- Mentor: "I understand. Sometimes new activities can be a bit scary. How about we go together and just watch for a few minutes? If you don't like it, we can come back here."
- Mentee: "Okay, but just for a few minutes."
- Mentor: "Great! Let's go and see what it's all about. You might find something you enjoy!"

Scenario 3: Setting Goals

Context: Helping a mentee set a goal to improve a skill.

Script:

- Mentor: "Let's talk about something you want to get better at. Is there a skill you would like to improve?"
- Mentee: "I want to be better at reading."
- Mentor: "That's a wonderful goal! Let's break it down into smaller steps. How about we start with reading for 10 minutes each day? Does that sound good to you?"
- Mentee: "Yes, I can do that."
- Mentor: "Fantastic! We'll check in each week to see how it's going and make any changes if we need to. I'm here to help you reach your goal!"

Conclusion

These training materials and methods are designed to prepare mentors to effectively support individuals with intellectual disabilities, autism, and learning disabilities. Mentors can create a positive and empowering mentoring relationship by practising empathy, clear communication, goal setting, and self-care.

Self-Care Checklist for Individuals with Intellectual Disabilities, Autism, and Learning Disabilities

Daily Self-Care Checklist:

Morning Routine:

- ☐ Wake up at a consistent time each day.
- ☐ Get dressed independently or with minimal assistance.
- ☐ Brush teeth and hair.
- ☐ Wash face and hands.
- ☐ Eat a healthy breakfast.

Throughout the Day:

- ☐ Drink plenty of water.
- ☐ Take breaks as needed during activities.
- ☐ Use the restroom regularly.
- ☐ Practice good hygiene habits, including washing hands before meals and after using the restroom.
- ☐ Engage in physical activity or exercise for at least 30 minutes.

Evening Routine:

- ☐ Wind down with calming activities before bedtime.
- ☐ Brush teeth and floss.
- ☐ Change into pyjamas.
- ☐ Settle into bed at a consistent time each night.
- ☐ Practice relaxation techniques, such as deep breathing or listening to calming music.

Weekly Self-Care Checklist:**Personal Hygiene:**

- ☐ Trim fingernails and toenails.
- ☐ Take a shower or bath.
- ☐ Wash and change bedding.
- ☐ Clean eyeglasses or other assistive devices.

Health Maintenance:

- ☐ Schedule and attend regular medical check-ups.
- ☐ Take prescribed medications as directed.
- ☐ Attend therapy sessions or support group meetings as needed.
- ☐ Maintain a balanced diet and avoid excessive sugary or processed foods.

Social and Emotional Well-Being:

- ☐ Spend quality time with family and friends.
- ☐ Participate in social activities or clubs of interest.
- ☐ Express feelings and emotions healthily, such as through art or journaling.
- ☐ Seek support from trusted individuals or professionals when feeling overwhelmed.

Independence and Life Skills:

- ☐ Practice money management skills, such as budgeting and counting change.
- ☐ Develop cooking skills by assisting with meal preparation.
- ☐ Learn and practice transportation skills like using public transit or calling for a ride.
- ☐ Explore leisure activities and hobbies that bring joy and fulfilment.

Monthly and Seasonal Self-Care Checklist:

Home Environment:

- ☐ Declutter and organise living spaces.
- ☐ Deep clean home areas, including floors, surfaces, and appliances.

- ☐ Check and replace batteries in smoke detectors and other safety devices.
- ☐ Plan and participate in seasonal activities, such as gardening or holiday celebrations.

Personal Development:

- ☐ Set personal goals for the month and track progress.
- ☐ Explore new learning opportunities, such as online courses or workshops.
- ☐ Engage in creative pursuits, such as painting, writing, or crafting.
- ☐ Reflect on achievements and areas for growth, adjusting goals as needed.

Community Engagement:

- ☐ Volunteer for community service projects or events.
- ☐ Attend local cultural or recreational activities, such as concerts or festivals.
- ☐ Connect with advocacy groups or organisations that support individuals with disabilities.
- ☐ Participate in community-based programs or initiatives, such as job training or volunteer work.

This self-care checklist provides a comprehensive guide for individuals aged 14 to 35 with intellectual disabilities, autism, and learning disabilities to maintain their physical, emotional, and social well-being. Adjustments can be made based on individual needs and preferences, with ongoing support and encouragement from mentors, caregivers, and support networks.

Communication Style

- **Empathetic and Patient:** Approach each activity empathetically and patiently, ensuring students feel supported and understood.
- **Positive Reinforcement:** Regularly use positive reinforcement to encourage participation and build confidence.
- **Clear Instructions:** Provide step-by-step instructions for each activity, using simple language and visual aids where necessary.
- **Active Listening:** Practice active listening, ensuring students feel heard and valued during discussions and reflections.

By implementing these activities with the right materials and methods, students will develop the ability to consistently and confidently recognise and articulate their strengths and weaknesses, fostering self-awareness and growth.

Appendix III

UNIT: 3

Module of National Workshop on Assessing Self-Determination
Skill and Establishing Self-Advocacy Programmes

CONTINUING REHABILITATION EDUCATION (CRE)

National Workshop on Assessing Self-Determination Skills and Establishing Self-Advocacy Programs

**Empower, Advocate, and Engage:
A Path to Independence for Individuals with IDD***



JULY 18-20, 2024

Venue: Manovikas, Delhi-110051

<https://manovikasfamily.org/gyanshala/nwsd/>



*intellectual and developmental disabilities (IDD)



Manovikas Charitable Society (MCS)
is a registered organisation under:



Society Registration Act 1860



The Rights of Persons with Disabilities Act, 2016 by the Department of Social Welfare, NCT of Govt. of Delhi.

The National Trust for the Welfare of Persons with Autism, Cerebral Palsy, Intellectual Disability and Multiple Disabilities Act by the Government of India, MSJE.



MCS is an approved institute by The Rehabilitation Council of India (RCI).



Special Study Center of Indira Gandhi National Open University (IGNOU).



Study Center of the National Institute of Open Schooling (NIOS).



Registered at the International Dance Council of UNESCO.

Manovikas Charitable Society (MCS) implements Education, Care, Advocacy, Mental Health and Spirituality programmes for persons with Intellectual and Development Disabilities (IDD)



National Workshop on Assessing Self-Determination Skills and Establishing Self-Advocacy Programs

July 18-20, 2024, Manovikas, Delhi

Program Schedule

Time	Activity	Dignitaries
9:00 am to 10:00 am	Registration	Mrs. Pooja Kanojia Special Educator, Programme Manager, TEED, Manovikas
Inaugural Session		
10:00 am	Welcome of Guests	Mrs. Sangeeta Project Officer - Advocacy Manovikas
10:10 am	Keynote Speech	Dr Alok Kumar “Bhuwan” Managing Secretary, Manovikas
10:30 am	Address by Guest of Honour	Dr. Nimesh G. Desai Former Director, IHBAS President, Manovikas
10:45 am	National Anthem	
	Tea	

Day 1: 18 July 2024		
Time	Activity	Dignitaries
11:00 AM - 12:00 AM	Discussion Understanding Rights and Advocacy for Persons with IDD	Dr. Nimesh G. Desai Former Director, IHBAS President, Manovikas
11:00 AM - 1:00 PM	Workshop -1 Make My Choice Workshop Module	Mrs. Sangeeta Project Officer - Advocacy Manovikas Mrs. Sonam Faculty, Special Education Manovikas
1:00 PM - 2:00 PM	Lunch	
2:00 PM - 3:30 PM	Workshop -2 Understanding Self-Determination	Dr. Hareesh Angothu Additional Professor, Psychiatric Rehabilitation Services (PRS) National Institute of Mental Health and Neurosciences (NIMHANS)
3:30 PM -5:00	Success Stories and Case Presentations Problem-solving Skills in Day-to-Day Life for Persons with IDD	Dr Pooja Jha Nair Rehabilitation Psychologist, Founder Partner, Total Solution, Hyderabad

Day 2: 19 July 2024		
Time	Activity	Dignitaries
10:00 AM - 11:30 AM	Workshop:3 Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD)	Mrs. Indira Alok Principal, Manovikas School for Inclusion
11:30 AM - 1:00 PM	Workshop- 4 Effective communication for advocacy and accommodations or support services.	Mrs. Pooja Kanojia Special Educator, Programme Manager, TEED, Manovikas Ms. Tanya Bhutani Special Educator, President, Manbhavan Mitra Mandali Governing Member, Manovikas
1:00 PM - 2:00 PM	Lunch	
2:00 PM - 3:30 PM	Workshop- 5 Self Advocacy Curriculum	Dr Alok Kumar “Bhuwan” Managing Secretary, Manovikas
3:30 PM -5:00	Presentaion and Discussion Community Resources and Engagement for Self Advocacy Programme	Dr. Himangshu Das Former Director, NIEPVD

Day 3: 20 July 2024

Time	Activity	Dignitaries
10:00 AM - 11:00 AM	Open Discussion Policy Advocacy Plans	Mr. Rajesh Trivedi, Former Spl. Consultant, Department of Empowerment of Persons with Disabilities (Divyangjan) Mrs. Rubi Kumari Manager, Student Support Service Faculty, Special Education, Manovikas
11:00 AM - 01:00 PM	Panel Discussion: Voices of Self-Advocates	Panelists: Mr U. K. Shukla Former Director, National Trust One Representative from Delegates Self Advocates: Mrs. Suvarna Raj, Founder of Women with Disabilities Network, Member of the World Assembly of Women with Disabilities, and Activist for the Rights of Persons with Disabilities Mr Soham Deb, Board Member, Manovikas Ms. Deepika Bobal, Board Member, Manovikas One Representative from Delegates Moderator: Dr Alok Kumar “Bhuwan”
1:00 PM - 2:00 PM	Lunch	
2:00 PM - 3:00 PM	Presentation: Planning for Self Advocacy Organisation and Its Management	Dr. Manoj Kumar Nirala Sr. Speech Therapist and Audiologist GTB Hospital Mrs. Sangeeta Malhotra Program Coordinator, Advocacy Manovikas
3:00 PM-4:00 PM	Evaluation	Dr Alok Kumar “Bhuwan” Managing Secretary, Manovikas

Valedictory Session

Time	Activity	Dignitaries
4:00 pm	Welcome of Guests	Dr Alok Kumar “Bhuwan” Managing Secretary Manovikas
4:05 pm	Summary of Key Learnings and Takeaways	Delegates
4:10 pm	Presidential Address	Dr. Nimesh G. Desai Former Director, IHBAS President, Manovikas
4:15 pm	Address by Guest of Honour	Shri Ajay Arora Secretary, Punjabi Academy & Dy. Secretary, Administrative Reforms Department. Shri Sanjay Kumar Ambasta SDM, Mayur Vihar Dr. R. Shilpa Manogna Associate Professor, Dept of Groups with Spl Needs, NCERT
04:40 pm	Speech by Chief Guest	Mrs. Stuti Kacker IAS Retd. Chancellor, Subharti University, Patron, Manovikas
04:45 pm	National Anthem	
04:50 pm	Networking Opportunities: Connecting with Professionals, Self Advocates, and Peers	
	Tea	

Index

Day 1: Introduction and Keynote Speech	15
1. Introduction of the workshop's goals and objectives	15
2. Keynote Speech by Dr. Alok Kumar "Bhuwan"	15
The Importance of Self-Determination and Self-Advocacy	16
Day 1: Understanding Rights and Advocacy for Persons with IDD	19
Legal Rights of Individuals with IDD	19
1. UN Convention on the Rights of Persons with Disabilities (CRPD)	19
2. Rights of Persons with Disabilities Act, 2016 (India)	20
Key Rights	21
Case Studies	23
Advocacy Strategies	25
Personal Advocacy:	25
Systemic Advocacy:	25
Communication Skills:	26
Building Support Networks:	26
Using Legal Frameworks:	27
Role of Self-Advocates and Organizations in Promoting Rights	28
Day 1: Workshop -1 Make My Choice Workshop Module	29
Brief Overview of the Importance of Choice-Making in Self-Determination	32
Understanding Preferences	34
Activity: Self-Reflection Exercise to Identify Individual Preferences	36
Choice-Making Framework	38
Step 1: Identify Options	38
Step 2: Evaluate Options	39

Step 3: Make a Decision	40
Self-Reflection Questions:	42
Situation Analysis Worksheet	43
Brainstorming Template	44
Information Gathering Checklist	45
Choice-Making Framework: Worksheets and Templates	47
Pros and Cons Chart Template	49
Outcome Assessment Worksheet	52
Reflection Journal Template	53
Day 1: Workshop 2: Understanding Self-Determination	54
Concepts of Self-Determination	54
Practical Strategies to Foster Self-Determination	55
Self-Reflection Exercises	58
Self Reflection Workshop Structure:	58
Activity 1: Identifying Personal Strengths:	58
Activity 2: Identifying Areas for Improvement:	58
Activity 3: Creating a Personal Development Plan:	59
Handouts:	60
Self-Determination Theory (SDT): Focuses on the Need for Autonomy, Competence, and Relatedness	61
Core Components of SDT	61
Application of SDT in Various Settings	63
Ecological Model: Considering the Impact of Environmental Factors on Self-Determination	65
Critical Components of the Ecological Model	65
1. Microsystem:	65
2. Mesosystem:	66

3. Exosystem:	66
4. Macrosystem:	66
5. Chronosystem:	67
Practical Applications of the Ecological Model	67
Person-Centered Planning (PCP): Emphasizes the Individual's Preferences, Strengths, and Needs	69
Key Principles	69
1. Individual Preferences:	69
2. Strengths-Based Approach:	69
3. Holistic View:	69
4. Inclusive Process:	70
Steps in Person-Centered Planning	70
Benefits of Person-Centered Planning	71
Challenges and Considerations	72
Day 1: Success Stories and Case Presentations: Problem-solving Skills in Day-to-Day Life for Persons with IDD	73
1. Introduction	73
2. Presentation of Success Stories	73
3. Case Studies on Problem-Solving Skills	75
4. Interactive Discussion	76
Case Study 1: Managing Daily Routines	77
Problem-Solving Strategies	77
Case Study 2: Overcoming Social Challenges	78
Problem-Solving Strategies	78
Case Study 3: Enhancing Decision-Making Skills	79

Day-2 Workshop 3: Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD)	80
Introduction to the SDS-IDD Tool and Its Application	80
Session Outline:	80
Introduction to Self-Determination	82
Definition and Importance of Self-Determination	82
Benefits of Assessing Self-Determination in Individuals with IDD	82
Overview of the SDS-IDD Tool	83
Purpose and Structure of the SDS-IDD	83
Components and Subscales of the SDS-IDD	83
How the SDS-IDD Was Developed and Validated	84
Administration Guidelines for Using the SDS-IDD Tool	84
Proper administration of the SDS-IDD ensures accurate and consistent results.	84
Scoring and Interpretation	84
Case Study Examples	85
Practical Application	85
Demographic Information Form	86
Consent for Participation in Self-Determination Assessment	87
Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) (Indian Version)	88
1. Low Self-Determination/Self-Advocacy Skills (1-40)	89

**Day-2 Workshop 4: Effective Communication for Advocacy and Accommodations
or Support Services 90**

Techniques for Effective Communication in Advocacy	90
Handout 1: Overview of Effective Communication Techniques	92
Handout 2: Active Listening Strategies	93
Handout 3: Assertiveness Tips	94
Handout 4: Clarity and Conciseness in Messaging	95
Handout 5: Non-verbal Communication Guide	96
Handout 6: Overcoming Communication Barriers	97
Workshop Instructions on Role-Play Scenarios	98
Scenario 1: Communicating with a Healthcare Provider about a Specific Need	99
Scenario 2: Advocating for Accommodations in an Educational Setting	100
Scenario 3: Participating in a Peer Support Group Discussion	101
Scenario 4: Public Speaking at a Community Event for Advocacy	102
Scenario 5: Resolving a Conflict with a Service Provider	103

Day 2: Workshop 5: Self-Advocacy Curriculum 105

Development and Implementation of a Self-Advocacy Curriculum	105
Curriculum Outline:	105
Sample Lessons:	106
Introduction to Self-Advocacy	107
Definition and Importance	107
Historical Context and Evolution	107
Core Components of Self-Advocacy	108
Practical Application	109
Sample Lessons for Self-Advocacy Curriculum	110
Lesson 1: Understanding Self-Advocacy	110

Lesson 2: Developing Self-Awareness	111
Lesson 3: Communication Skills for Advocacy	112
Lesson 4: Decision-Making and Problem-Solving	113
Lesson 5: Knowing Your Rights and Responsibilities	114
Day 2: Presentation and Discussion: Community Resources and Engagement for Self-Advocacy Programme	115
Introduction to Community Resources	117
Identifying Community Resources	118
Engagement Strategies	119
Case Studies and Success Stories	120
Interactive Session: Developing Your Own Resource and Engagement Plan	121
Role-Playing Scenarios for Practicing Engagement Strategies	122
Scenario 1: Communicating with a Local Service Provider	123
Scenario 2: Networking at a Community Event	124
Scenario 3: Volunteering and Advocating for a Cause	125
General Tips for All Scenarios:	126
Day-3 Developing and Implementing Policy Advocacy Plans	127
Discussion Prompts	129
1. What are the most pressing issues facing individuals with IDD in your community?	129
2. How can policy changes improve the lives of individuals with IDD?	129
3. What strategies have you found effective in advocating for policy changes?	129
4. How do you engage stakeholders and build coalitions for advocacy efforts?	129
5. What challenges have you faced in policy advocacy, and how have you overcome them?	130

Policy Advocacy Planning Templates	131
Template 1: Issue Identification and Analysis	131
Template 2: Goal Setting	131
Template 3: Strategy Development	132
Template 4: Implementation Plan	132
Day-3 Panel Discussion: Voices of Self-Advocates	133
Panelist Bios:	133
Mr. UK Shukla	133
Mrs. Suvarna Raj	133
Mr. Soham Deb	133
Ms. Deepika Bobal	134
Dr. Alok Bhuwan	134
Discussion Questions:	135
Day-3 Planning for Self-Advocacy Organisation and Its Management	136
Introduction to Self-Advocacy Organizations	136
Definition of Self-Advocacy Organizations	136
Importance of Self-Advocacy in Empowering Individuals with IDD	136
Planning a Self-Advocacy Organization	139
Step 1: Establishing the Vision and Mission	139
Step 2: Conducting Needs Assessment	140
Step 3: Develop a Strategic Plan	141
Step 4: Creating a Budget	142
Step 5: Legal and Administrative Setup	143
Managing a Self-Advocacy Organization	144
Step 6: Building a Strong Leadership Team	144
Step 7: Volunteer and Staff Management	145

Step 8: Program Development and Implementation	146
Step 9: Fundraising and Financial Management	147
Step 10: Monitoring and Evaluation	148
Step 11: Building Partnerships and Networks	149
Discussion Materials for a Self-Advocacy Organization	150
Examples of Vision Statements	150
Focus on vision statement:	150
Worksheets for Drafting and Refining the Mission Statement	151
Sample Survey Templates	151
Guidelines for Conducting Focus Groups and Interviews	151
Tools for Analyzing Collected Data	152
Strategic Planning Templates	152
Examples of Strategic Plans from Other Organizations	152
Resource Allocation Worksheets	152
Sample Budget Templates	152
List of Potential Funding Sources	152
Budget Monitoring Tools	153
Legal Requirements Checklist	153
Sample Bylaws and Governance Policies	153
Compliance Monitoring Tools	153
List of Desired Skills and Expertise for Board Members and Leaders	154
Recruitment Strategy Outline	154
Diversity and Inclusion Guidelines	155
Training Program Outline	155
List of Professional Development Opportunities	155
Mentorship Program Guidelines	155
Volunteer Roles and Responsibilities Outline	155
Recruitment Plan Template	155

Volunteer Retention Strategies Guide	156
Training Program Outline	156
List of Development Opportunities	156
Feedback Collection Methods	156
Needs Assessment Tools	156
Program Design Templates	156
Accessibility Guidelines	157
Program Objective Setting Guide	157
Outcome Measurement Tools	157
Monitoring and Evaluation Framework	157
Fundraising Plan Template	157
List of Potential Funding Sources	157
Goal-Setting Worksheet	158
List of Diverse Funding Sources	158
Donor and Sponsor Engagement Guide	158
Sustainability Plan	158
Financial Management Guidelines	158
Transparency and Accountability Checklist	159
Reporting Templates	159
Monitoring and Evaluation Plan Template	159
List of KPIs (Key Performance Indicators)	160
Review and Update Schedule	160
Feedback Collection Methods	160
Feedback Analysis Tools	160
Improvement Implementation Plan	161
List of Potential Partners	161
Collaboration Strategy Template	161
Partnership Agreement Guidelines	161

Community Engagement Plan	162
Support Network Building Guide	162
Communication Templates	162
FAQ	162
Quiz	165

Day 1: Introduction and Keynote Speech

(10:00 AM - 10:15 AM)

1. Introduction of the workshop's goals and objectives

Brief overview of the day's schedule

2. Keynote Speech by Dr. Alok Kumar "Bhuwan"

Topic: The Importance of Self-Determination and Self-Advocacy

Key Points:

- Definition and significance of self-determination
- The role of self-advocacy in the lives of individuals with intellectual and developmental disabilities (IDD)
- Personal stories or case studies highlighting successful self-advocacy
- Strategies to promote self-determination in various settings (educational, vocational, social)
- The impact of self-determination on overall quality of life and inclusion
- Future directions and goals for enhancing self-determination and self-advocacy programs

The Importance of Self-Determination and Self-Advocacy

- **Definition:**
 - Self-determination refers to the process by which an individual controls their own life, making choices, setting goals, and acting based on personal preferences and interests.
- **Significance:**
 - Crucial for the well-being and quality of life of individuals with intellectual and developmental disabilities (IDD).
 - Enhances independence, empowerment, and participation in society.

The Role of Self-Advocacy

- **Definition:**
 - Self-advocacy is the ability to advocate for oneself and make decisions about one's life, involving knowing one's rights, making choices, and taking responsibility.
- **Importance:**
 - Empowers individuals with IDD to gain control over their lives, make informed decisions, and stand up for their rights.
 - Improves self-esteem, confidence, and overall quality of life.

Personal Stories or Case Studies

- **Case Study: Amulya's Educational Triumph:**
 - **Background:** Amulya, a teenager with autism, aimed to succeed in mainstream education.
 - **Problem:** Struggled with social interactions and adapting to different teaching styles.
 - **Solution:** Implemented an individualized education plan (IEP) with tailored problem-solving strategies and support.
 - **Outcome:** Graduated with honors and is now pursuing higher education.

- **Case Study: Gaurav's Employment Success:**

- **Background:** Gaurav, an adult with IDD, aspired to secure a meaningful job.
- **Problem:** Faced barriers in job search and interviews due to communication difficulties.
- **Solution:** Participated in a job readiness program with support from a job coach.
- **Outcome:** Secured a job in customer service, boosting his confidence and achieving financial independence.

Strategies to Promote Self-Determination

- **Educational Settings:**

- Encourage student voice and choice through student-centered learning and goal setting.
- Develop problem-solving and decision-making skills using scenario-based learning and role-playing.

- **Vocational Settings:**

- Foster independence with job training and self-monitoring techniques.
- Promote choice and control with flexible work schedules and personalized job matching.

- **Social Settings:**

- Enhance social skills with training programs and community involvement.
- Encourage self-advocacy through public speaking opportunities and self-advocacy groups.

Impact of Self-Determination on Quality of Life and Inclusion

- **Quality of Life:**
 - Improved mental health and well-being.
 - Better academic and employment outcomes.
 - Stronger relationships and social inclusion.
- **Social Inclusion:**
 - Increased community participation and educational success.
 - Enhanced workplace inclusion and job retention.

Future Directions and Goals

- **Research and Policy:**
 - Longitudinal studies to understand the sustained impact of self-determination.
 - Legislative support and funding for self-determination programs.
- **Program Development:**
 - Integration of technology for interactive training.
 - Building community partnerships and tailored programs.

Conclusion and Q&A

- **Recap of Key Points:**
 - Importance of self-determination and self-advocacy.
 - Strategies to promote these skills in various settings.
- **Encouragement to Apply Learnings:**
 - Empower your school and organization by starting the self-advocacy movement for students with IDD.
- **Q&A:**
 - Open the floor for questions and discussions.

Day 1: Understanding Rights and Advocacy for Persons with IDD

(11:00 AM - 12:00 PM)

Legal Rights of Individuals with IDD

Overview of Key Legislation and Policies

1. UN Convention on the Rights of Persons with Disabilities (CRPD)

- Adopted in 2006, the CRPD is an international human rights treaty intended to protect the rights and dignity of persons with disabilities.
- **Key Provisions:**
 - **Equality and Non-Discrimination:** Ensuring equal rights and eliminating discrimination.
 - **Accessibility:** Promoting accessibility to physical environments, transportation, information, and communication.
 - **Right to Education:** Inclusive education at all levels and lifelong learning.
 - **Right to Work:** Equal opportunities in employment, safe working conditions, and reasonable accommodations.
 - **Healthcare:** Access to the highest attainable standard of health without discrimination.

2. Rights of Persons with Disabilities Act, 2016 (India)

- Enacted to fulfil the obligations under the CRPD, the Act aims to protect and ensure the full and effective participation of persons with disabilities in society.
- **Key Provisions:**
 - **Equality and Non-Discrimination:** Prohibits discrimination against persons with disabilities.
 - **Education:** Free education for children with disabilities until the age of 18.
 - **Employment:** Reservation of at least 4% of jobs in government establishments.
 - **Healthcare:** Right to healthcare services, including free healthcare in government-run establishments.
 - **Community Inclusion:** Measures to ensure accessibility in public buildings, transportation, and communication.

Key Rights

1. Education

- **Right:** Inclusive education in mainstream schools and access to vocational training.
- **Legislation:** CRPD Article 24; Rights of Persons with Disabilities Act, 2016 (India) Sections 16-18.
- **Real-Life Implications:**
 - Schools must provide reasonable accommodations and support to facilitate inclusive education.
 - Implementation of individualised education plans (IEPs).

2. Employment

- **Right:** Equal opportunities and non-discrimination in employment.
- **Legislation:** CRPD Article 27; Rights of Persons with Disabilities Act, 2016 (India) Sections 20-21.
- **Real-Life Implications:**
 - Employers must provide reasonable accommodations in the workplace.
 - Job training and employment support services must be made available.

3. Healthcare

- **Right:** Access to the highest standard of health without discrimination.
- **Legislation:** CRPD Article 25; Rights of Persons with Disabilities Act, 2016 (India) Sections 25-26.
- **Real-Life Implications:**
 - Provision of free healthcare in government hospitals.
 - Access to specific healthcare services tailored to the needs of individuals with IDD.

4. Community Inclusion

- **Right:** Full and effective participation in society.
- **Legislation:** CRPD Article 19; Rights of Persons with Disabilities Act, 2016 (India) Sections 29-30.
- **Real-Life Implications:**
 - Ensuring accessibility in public spaces and transportation.
 - Programs to promote social inclusion and participation in community activities.

Case Studies

Case Study 1: Rights Upheld

- **Title:** Empowerment through Self-Advocacy
- **Background:** A young adult with IDD successfully advocates for their right to travel and live a joyful life independently with support.
- **Details:**
 - **Scenario:** With the help of a self-advocacy organisation, the individual challenges a local policy restricting living arrangements for persons with disabilities.
 - **Process:** Engaging with local authorities, presenting their case, and collaborating with advocacy groups.
 - **Outcome:** The policy can be revised, allowing the individual to live independently with appropriate support services.
 - **Learnings:** The importance of self-advocacy, collaboration with advocacy groups, and persistence in challenging unjust policies.
- **Discussion Points:**
 - Key factors that contributed to the success of the case.
 - The role of support networks in achieving advocacy goals.
 - How can this case inspire others to pursue their rights?

Case Study 2: Rights Violated

- **Title:** Overcoming Discrimination in Education
- **Background:** A teenager with IDD faces discrimination in a mainstream educational setting.
- **Details:**
 - **Scenario:** The student is denied reasonable accommodations, leading to academic and social challenges.
 - **Process:** The family files a complaint with the school administration and later escalates the issue to a legal advocacy organisation and the Office of the Commissioner for Persons with Disabilities.
 - **Outcome:** The case goes to court, resulting in a ruling that mandates the school to provide the necessary accommodations and training for staff on inclusive education.
 - **Learnings:** The legal recourse available when rights are violated, the importance of documentation, and the impact of advocacy organisations.
- **Discussion Points:**
 - Challenges faced during the advocacy process.
 - The role of legal frameworks in protecting rights.
 - Lessons learned for families and advocates in similar situations.

4. Key Takeaways and Reflections

- Summary of the main points from the case studies.
- Reflection on the common themes such as persistence, the role of support networks, and the legal framework.
- Encourage participants to apply what they have learned in their advocacy efforts.

Advocacy Strategies

Importance of Advocacy: Personal and Systemic Advocacy

Personal Advocacy:

- **Definition:** Personal advocacy refers to the actions taken by individuals to assert their rights and interests.
- **Examples:**
 - I am speaking up in meetings about personal needs and preferences.
 - We are requesting accommodations or support services.
 - We are navigating healthcare, education, and employment systems.
- **Benefits:** Empowers individuals to take control of their lives, improves self-esteem, and ensures personal needs are met.

Systemic Advocacy:

- **Definition:** Systemic advocacy involves efforts to change policies, laws, and systems to benefit a broader group of people.
- **Examples:**
 - I am campaigning for legislative changes to improve disability rights.
 - We are working with organisations to influence public policies.
 - We are raising awareness through media and public speaking.
- **Benefits:** Leads to long-term improvements in societal structures, creates more inclusive environments, and benefits a larger community.

2. Strategies for Effective Advocacy

Communication Skills:

- **Clear and Assertive Communication:**

- Use "I" statements to express needs and preferences (e.g., "I need...", "I prefer...").
- Be direct and concise.
- Practice active listening.

- **Non-verbal Communication:**

- Maintain eye contact.
- Use appropriate body language.
- Be mindful of tone and facial expressions.

Building Support Networks:

- **Identify Allies:**

- Connect with family, friends, and professionals who support your cause.
- Join advocacy groups and organisations.

- **Foster Relationships:**

- Build strong, trusting relationships with supporters.
- Regularly communicate and collaborate with your network.

- **Utilise Social Media:**

- Use platforms like Facebook, Twitter, and LinkedIn to share your message and connect with like-minded individuals.

Using Legal Frameworks:

- **Know Your Rights:**

- Familiarise yourself with laws and policies related to disability rights (e.g., the Rights of Persons with Disabilities Act).
- Understand the legal processes for filing complaints and seeking justice.

- **Legal Advocacy:**

- Work with legal professionals and organisations that specialise in disability rights.
- Use legal channels to challenge discrimination and promote inclusivity.

Role of Self-Advocates and Organizations in Promoting Rights

Self-Advocates:

- **Empowerment:**
 - Self-advocates empower themselves and others by sharing their stories and experiences.
 - They provide a voice for those who cannot advocate for themselves.
- **Education:**
 - Educate peers, professionals, and the public about the rights and needs of individuals with disabilities.
 - Conduct workshops, seminars, and training sessions.
- **Leadership:**
 - Take on leadership roles within advocacy groups and organisations.
 - Mentor and support new self-advocates.

Organisations:

- **Policy Influence:**
 - Advocate for changes in policies and laws at local, national, and international levels.
 - Work with government agencies, lawmakers, and other stakeholders.
- **Support Services:**
 - Provide resources and support to individuals with disabilities and their families.
 - Offer training, counselling, and assistance with navigating systems.
- **Awareness Campaigns:**
 - Conduct public awareness campaigns to highlight issues faced by individuals with disabilities.
 - Use media, events, and publications to disseminate information.

Day 1: Workshop -1 Make My Choice Workshop Module

Objective:

To provide participants with practical tools and techniques to make informed choices and understand personal preferences, enhancing self-determination skills.

Session Outline:

1. Introduction

- Welcome and introduction to the workshop objectives.
- A brief overview of the importance of choice-making in self-determination.

2. Understanding Preferences

- Explanation of personal preferences and how they influence decision-making.
- Activity: Self-reflection exercise to identify individual preferences.

3. Choice-Making Framework

- Introduction to a structured framework for making choices.
- The steps in the framework are to identify options, evaluate options, make a decision, and reflect on the decision.

4. Interactive Session: Choice-Making Exercises

- Participants engage in hands-on exercises to practice making choices.
- Scenario-based activities to apply the choice-making framework.
- Group discussion on the outcomes and reflections from the exercises.

5. Scenario-Based Activities

- Present various real-life scenarios where choice-making is crucial.
- Group activity: Discuss and decide on each scenario's best course of action.

- Role-playing exercises to simulate real-life decision-making situations.

6. Reflection and Discussion

- Group discussion on the learnings from the workshop.
- Sharing experiences and personal insights on choice-making.
- A Q&A session will address any queries and provide further clarification.

Discussion Materials:

1. Workshop Guide:

- Detailed agenda of the workshop.
- Key concepts and objectives.
- Guidelines for participation and activities.

2. Choice-Making Exercises:

- Worksheets for individual and group exercises.
- Templates for identifying and evaluating options.
- Reflection sheets will be provided for participants to document their decision-making process.

3. Scenario-Based Activities:

- Pre-defined scenarios are relevant to the participants' context.
- Instructions for group discussions and role-playing activities.
- Evaluation criteria for assessing decision outcomes.

Brief Overview of the Importance of Choice-Making in Self-Determination

Introduction: Choice-making is a fundamental aspect of self-determination. It allows individuals to exert control over their lives, make decisions that reflect their personal preferences, and pursue their goals. For individuals with intellectual and developmental disabilities (IDD), developing choice-making skills is crucial in fostering independence and enhancing their quality of life.

Importance of Choice-Making in Self-Determination:

1. Empowerment and Autonomy:

- **Definition:** Choice-making empowers individuals by giving them the autonomy to make life decisions.
- **Impact:** This autonomy leads to greater self-confidence, improved self-esteem, and control over one's environment.

2. Personal Growth and Development:

- **Definition:** Through choice-making, individuals learn about their preferences, strengths, and areas for growth.
- **Impact:** This self-awareness is essential for personal development and achieving life goals.

3. Enhancing Quality of Life:

- **Definition:** Making choices that align with personal preferences directly contributes to well-being and happiness.
- **Impact:** When individuals can pursue activities and goals that are meaningful to them, they experience a higher quality of life.

4. **Building Decision-Making Skills:**

- **Definition:** Regularly making choices helps individuals develop and refine their decision-making skills.
- **Impact:** These skills are transferable to various life situations, enhancing problem-solving abilities and critical thinking.

5. **Promoting Independence:**

- **Definition:** Choice-making is a key component of living independently.
- **Impact:** It encourages individuals to take responsibility for their actions and fosters a sense of independence.

6. **Advocacy and Self-Advocacy:**

- **Definition:** Being able to make choices and express preferences is a fundamental aspect of advocacy.
- **Impact:** It equips individuals with the skills to advocate for themselves and others in various settings.

Understanding Preferences

Explanation of Personal Preferences and How They Influence Decision-Making

Content Overview:

Personal preferences are the likes, dislikes, values, and interests that shape our choices and behaviours. Understanding these preferences is crucial for effective decision-making, particularly for individuals with intellectual and developmental disabilities (IDD). Recognising and respecting personal preferences empowers individuals to make decisions more aligned with their values and desires, enhancing their self-determination and quality of life.

Key Points:

1. Definition of Personal Preferences:

- Personal preferences encompass the individual choices, interests, likes and dislikes that define who we are.
- Various factors influence these preferences, including experiences, cultural background, and personal values.

2. The Role of Personal Preferences in Decision-Making:

- Preferences guide decision-making by providing a framework for evaluating options.
- Individuals are more likely to feel satisfied and motivated when decisions align with personal preferences.

3. Identifying Personal Preferences:

- Self-reflection and awareness are crucial to identifying personal preferences.
- Preferences can be identified through various methods, such as keeping a journal, discussing with trusted individuals, and engaging in different activities to see what resonates.

4. Respecting and Valuing Preferences:

- It's essential to respect and value one's preferences and those of others.
- Respecting preferences in decision-making leads to better outcomes and greater fulfilment.

Activity: Self-Reflection Exercise to Identify Individual Preferences

Objective: To help participants identify and understand their personal preferences, which will aid in making more informed and satisfying decisions.

Materials Needed:

- Self-Reflection Worksheets
- Pens/Pencils
- Comfortable writing space

Instructions:

1. Introduction (5 minutes):

- Explain the importance of understanding personal preferences.
- Discuss how preferences influence decision-making and overall satisfaction.

2. Self-Reflection Exercise (20 minutes):

- Distribute the Self-Reflection Worksheets.
- Ask participants to find a quiet space where they can focus without interruptions.
- Instruct participants to think about the following questions and write down their responses:

Self-Reflection Questions:

1. What are my favourite hobbies and activities? Why do I enjoy them?
2. What types of environments make me feel comfortable and happy? (e.g., quiet places, social settings)
3. What are my favourite foods, and why do I like them?

4. What values are most important to me? (e.g., honesty, kindness, creativity)
5. What kind of people do I enjoy spending time with? Why?
6. What are my least favourite activities or situations? Why do I dislike them?
7. What motivates me to take action or make decisions?
8. How do I usually make decisions? (e.g., by thinking carefully, following my intuition, seeking advice)
9. What past decisions have made me feel proud and fulfilled?
10. How do my preferences influence my daily routine and long-term goals?

3. Group Discussion (15 minutes):

- Reconvene as a group.
- Invite participants to share their reflections (voluntarily).
- Discuss common themes and insights gained from the exercise.
- Highlight the importance of using these preferences to guide future decisions.

4. Conclusion (5 minutes):

- Summarise the key points about personal preferences and their impact on decision-making.
- Encourage participants to continue exploring and respecting their preferences in daily life.

Choice-Making Framework

Introduction to the Choice-Making Framework

Making choices is a critical component of self-determination and self-advocacy. This framework is designed to guide individuals through a structured decision-making process. It consists of four essential steps: identify options, evaluate options, make a decision, and reflect on the decision.

Step 1: Identify Options

Objective: To recognise and list all possible choices in a given situation.

Content:

1. Understanding the Situation:

- Clearly define the situation that requires a decision.
- Example: Choosing a daily activity, selecting a meal, or deciding on a career path.

2. Generating Options:

- Brainstorm and list all potential options without judgment.
- Encourage creativity and openness to all possibilities.

3. Gathering Information:

- Collect relevant information about each option.
- Use resources such as books, the internet, experts, or personal experiences.

Discussion Materials:

- [Situation analysis worksheet.](#)
 - [Brainstorming template.](#)
 - [Information gathering checklist.](#)
-

Step 2: Evaluate Options

Objective: To assess the pros and cons of each option to make an informed choice.

Content:

1. Criteria for Evaluation:

- Establish critical criteria for evaluating options (e.g., cost, time, impact, feasibility).
- Example: When choosing a meal, consider nutritional value, taste preferences, and dietary restrictions.

2. Weighing Pros and Cons:

- List the advantages and disadvantages of each option.
- Use a pros and cons chart to organise thoughts.

3. Comparative Analysis:

- Compare each option against the criteria.
 - Use decision-making tools such as matrices or scoring systems.

Discussion Materials:

- Evaluation criteria worksheet.
 - Pros and cons chart template.
 - Decision matrix template.
-

Step 3: Make a Decision

Objective: To select the best option based on the evaluation.

Content:

1. Reviewing Evaluations:

- Review the evaluations and analyses conducted in the previous step.
- Ensure all relevant factors have been considered.

2. Choosing the Best Option:

- Decide on the option that best meets the established criteria and personal values.
- Consider the long-term and short-term implications of the decision.

3. Commitment to the Decision:

- Commit to the chosen option with confidence.
- Prepare for any necessary steps to implement the decision.

Discussion Materials:

- Decision review checklist.
- Commitment pledge form.

Step 4: Reflect on the Decision

Objective: To review the outcome of the decision and learn from the experience.

Content:

1. Outcome Assessment:

- Evaluate the results of the decision.
- Determine whether the decision met the expected outcomes.

2. Reflecting on the Process:

- Reflect on the decision-making process and identify what worked well and could be improved.

- Consider how the experience can inform future decisions.

3. Continuous Improvement:

- Develop strategies for improving future decision-making skills.
- Seek feedback from others and consider their perspectives.

Discussion Materials:

- Outcome assessment worksheet.
- Reflection journal template.
- Feedback form.

Self-Reflection Questions:

1. What are my favourite hobbies and activities? Why do I enjoy them?
2. What types of environments make me feel comfortable and happy? (e.g., quiet places, social settings)
3. What are my favourite foods, and why do I like them?
4. What values are most important to me? (e.g., honesty, kindness, creativity)
5. What kind of people do I enjoy spending time with? Why?
6. What are my least favourite activities or situations? Why do I dislike them?
7. What motivates me to take action or make decisions?
8. How do I usually make decisions? (e.g., by thinking carefully, following my intuition, seeking advice)
9. What past decisions have made me feel proud and fulfilled?
10. How do my preferences influence my daily routine and long-term goals?

Situation Analysis Worksheet

Use this worksheet to define the situation that requires a decision clearly.

1. Describe the situation or problem that needs a decision:

2. What are the goals or outcomes you want to achieve?

3. What are the constraints or limitations?

4. Who will be affected by this decision?

5. What information do you need to gather to make an informed decision?

Brainstorming Template

Use this template to brainstorm and list all potential options without judgment.

1. Define the problem or decision to be made:

2. List all possible options:

- Option 1:

- Option 2:

- Option 3:

- Option 4:

- Option 5:

- Option 6:

3. Additional ideas or options:

Information Gathering Checklist

Use this checklist to gather relevant information about each option.

1. Identify the sources of information you need:

- Books:

- Internet:

- Experts:

- Personal experiences:

- Others:

2. List the questions you need answers to:

- Question 1:

- Question 2:

- Question 3:

- Question 4:

- Question 5:

3. Collect and organise the information:

- Information 1:

- Information 2:

- Information 3:

- Information 4:

- Information 5:

4. Verify the reliability and validity of the information:

- Source 1:

- Source 2:

- Source 3:

- Source 4:

- Source 5:

Choice-Making Framework: Worksheets and Templates

Evaluation Criteria Worksheet

1. Define the decision you need to make:

- Describe the situation that requires a decision.

2. Establish evaluation criteria:

- What factors are essential for this decision? (e.g., cost, time, impact, feasibility)

3. List the criteria in order of importance:

- Criteria 1: _____

- Criteria 2: _____

- Criteria 3: _____

4. Collect relevant information for each criterion.

5. Evaluate each option against the criteria.

Pros and Cons Chart Template

1. Define the decision you need to make:

- Describe the situation that requires a decision.

2. List all potential options:

- Option 1: _____

- Option 2: _____

3. Create a pros and cons chart for each option:

- Option 1:

* Pros:

- _____

- _____

* Cons:

- _____

- _____

- Option 2:

* Pros:

- _____

- _____

* Cons:

- _____

- _____

4. Compare the pros and cons of each option.

Decision Review Checklist

1. Review the decision you made:

- What was the decision? _____

2. Evaluate the outcomes:

- Did the decision meet your expectations? Why or why not?

- Were there any unforeseen consequences?

3. Reflect on the process:

- What did you do well?
- What could you improve in future decision-making processes?

4. Gather feedback from others involved.

5. Document lessons learned for future reference.

Outcome Assessment Worksheet

1. Describe the decision and its intended outcomes:

- Decision: _____
- Intended outcomes: _____

2. Assess the actual outcomes:

- What were the actual results?
- Did the outcomes align with your expectations? Why or why not?

3. Identify any unexpected results or challenges:

- What were the unexpected outcomes?
- How did you address any challenges?

4. Reflect on the overall success of the decision:

- What worked well?
- What could be improved?

5. Document lessons learned for future reference.

Reflection Journal Template

1. Reflect on a recent decision you made:

- What was the decision? _____

2. Describe the decision-making process:

- How did you identify options?
- How did you evaluate the options?
- What criteria did you use to make the decision?

3. Evaluate the outcomes of the decision:

- What were the results?
- Did the decision meet your expectations?

4. Reflect on your feelings about the decision:

- How did you feel before, during, and after making the decision?

5. Identify lessons learned and future improvements:

- What did you learn from this experience?
- How can you improve your decision-making process in the future?

Day 1: Workshop 2: Understanding Self-Determination

(2:00 PM - 3:30 PM)

Objective: To educate participants on self-determination and provide practical strategies to foster it in individuals with intellectual and developmental disabilities (IDD).

Concepts of Self-Determination

1. Definition and Importance:

- Self-determination refers to the process by which an individual controls their own life.
- It encompasses the ability to make choices and decisions, set goals, and take the initiative to achieve them.
- It is essential for individuals with IDD because it enhances quality of life, promotes independence, and fosters a sense of empowerment.

2. Core Components of Self-Determination:

- **Autonomy:** Making independent choices.
- **Self-Regulation:** Managing one's actions and emotions.
- **Psychological Empowerment:** Believing in one's ability to influence outcomes.
- **Self-realisation:** Understanding one's strengths and weaknesses.

3. Theories and Models of Self-Determination:

- **Self-Determination Theory (SDT):** Focuses on the need for autonomy, competence, and relatedness.
- **Ecological Model:** Considers the impact of environmental factors on self-determination.
- **Person-Centered Planning (PCP):** Emphasizes the individual's preferences, strengths, and needs.

Practical Strategies to Foster Self-Determination

1. Encouraging Choice-Making:

- Provide opportunities for individuals to make choices in daily activities.
- Use structured activities that offer limited choices to start, gradually increasing complexity.

2. Teaching Decision-Making Skills:

- Break down the decision-making process into manageable steps.
- Use real-life scenarios to practice and reinforce decision-making.

3. Promoting Goal-Setting and Achievement:

- Assist individuals in setting realistic and achievable goals.
- Use goal-setting worksheets and regularly review progress.

4. Developing Problem-Solving Skills:

- Introduce problem-solving models and techniques.
- Role-play different scenarios to practice problem-solving skills.

5. Enhancing Communication Skills:

- Teach effective communication strategies, including assertiveness training.

- Use visual aids and communication devices as needed.

6. Building Self-Advocacy:

- Educate on the rights and responsibilities of self-advocacy.
- Provide platforms for individuals to practice self-advocacy in a supportive environment.

Handouts:

1. Self-Determination Skills Overview:

- Definitions and examples of crucial self-determination skills.

2. Self-Assessment Questionnaire:

- A tool for individuals to evaluate their current level of self-determination.

3. Goal-Setting Worksheet:

- A template to help individuals set and track personal goals.

4. Problem-Solving Steps:

- A step-by-step guide to practical problem-solving.

5. Communication Tips:

- Strategies for clear and assertive communication.

Self-Reflection Exercises:

1. Personal Strengths and Areas for Improvement:

- Reflect on personal strengths and identify areas for growth.

2. Decision-Making Reflection:

- Reflect on past decisions and their outcomes to learn and improve future decision-making.

3. Goal Achievement Reflection:

- Reflect on personal goals achieved and the strategies used to achieve them.

Self-Reflection Exercises

Title: Self-Reflection Exercises: Personal Strengths and Areas for Improvement

Objective: To help participants reflect on their strengths and identify areas for growth, enhancing their self-awareness and guiding their self-determination journey.

Self Reflection Workshop Structure:

Introduction:

- Begin with a brief talk on the importance of self-reflection.
- Explain how self-reflection helps in understanding oneself better, leading to improved self-determination.

Activity 1: Identifying Personal Strengths:

- Distribute handouts with a list of potential strengths and a blank section for participants to fill in their strengths.
- Instruct participants to spend 10 minutes reflecting and writing down their strengths.
- After 10 minutes, discuss why it is essential to recognise and acknowledge one's strengths.

Activity 2: Identifying Areas for Improvement:

- Distribute handouts with prompts to help participants think about areas they wish to improve.
- Instruct participants to spend 10 minutes reflecting and writing down these areas.
- After 10 minutes, discuss how recognising areas for improvement is the first step towards personal growth.

Group Discussion: Sharing Reflections:

- Divide participants into small groups of 4-5.
- Instruct each participant to share one strength and one area for improvement.
- Encourage group members to provide constructive feedback and support.
- Allocate 5 minutes per participant for sharing and feedback.

Activity 3: Creating a Personal Development Plan:

- Distribute handouts with a personal development plan template.
- Guide participants in using their reflections to fill out the plan and set specific goals for growth.
- Provide an example of a personal development plan.
- Allocate 20 minutes for participants to complete their plans.
- Encourage participants to share their plans with a partner for additional feedback.

Closing Remarks and Q&A:

- Summarise the importance of self-reflection in personal growth and self-determination.
- Open the floor for questions and additional reflections from participants.
- Thank participants for their engagement and participation.

Handouts:

1. Personal Strengths Reflection Sheet:

- List of potential strengths.
- Blank section for personal entries.

2. Areas for Improvement Reflection Sheet:

- Prompts to identify areas for growth.
- Blank section for personal entries.

3. Personal Development Plan Template:

- Sections for specific goals, steps to achieve them, and timelines.
- Example of a completed plan.

This structure ensures a comprehensive, interactive, and engaging workshop that helps participants enhance their self-awareness and develop a clear path for personal growth.

Self-Determination Theory (SDT): Focuses on the Need for Autonomy, Competence, and Relatedness

Introduction to Self-Determination Theory (SDT)

Self-determination theory (SDT) is a psychological framework for understanding human motivation. Developed by Edward Deci and Richard Ryan, it posits that people are driven by a need to grow and gain fulfilment. This theory emphasises three essential core needs for fostering motivation and well-being: autonomy, competence, and relatedness.

Core Components of SDT

1. Autonomy

- **Definition:** Autonomy refers to the need to feel in control of one's behaviour and goals. It is the sense of being the author of one's actions rather than feeling pressured or coerced by external forces.
- **Importance:** Individuals who experience autonomy are more likely to be motivated and engaged in activities. This sense of control and self-direction fosters intrinsic motivation, where individuals pursue activities because they find them inherently exciting or enjoyable.
- **Examples:**
 - They are allowing students to choose their projects in school.
 - Employees have the flexibility to decide how to approach their work tasks.

2. Competence

- **Definition:** Competence involves feeling effective and capable in one's activities. It is about mastering tasks and learning new skills, which provides a sense of accomplishment and confidence.
- **Importance:** Competence enhances motivation by making individuals feel capable and skilled. When people experience growth and success, they are more likely to persist and invest effort in their activities.
- **Examples:**
 - We are providing opportunities for skill development and training in the workplace.
 - Teachers offer constructive feedback and challenges that match students' skill levels.

3. Relatedness

- **Definition:** Relatedness is the need to feel connected to others, belong, and be significant in others' lives. It involves having meaningful relationships and interactions with others.
- **Importance:** Feeling connected and valued by others supports motivation and well-being. Social interactions and a sense of community provide emotional support and enhance engagement in various activities.
- **Examples:**
 - It is creating team-building activities that promote collaboration and social bonding.
 - We encourage family involvement in a student's education to strengthen support networks.

Application of SDT in Various Settings

1. Educational Settings

- **Autonomy:** Teachers can provide students with choices in their learning activities, fostering a sense of control and engagement.
- **Competence:** Schools can offer tailored challenges and resources that match students' abilities, helping them feel competent and motivated.
- **Relatedness:** Creating a supportive classroom environment where students feel connected to peers and teachers enhances their motivation and well-being.

2. Workplace Settings

- **Autonomy:** Employers can promote job satisfaction by allowing employees flexibility and input in their work processes.
- **Competence:** Offering professional development opportunities and recognising achievements helps employees feel competent and valued.
- **Relatedness:** Encouraging teamwork and fostering a collaborative culture can strengthen relationships and a sense of belonging among employees.

3. Social Settings

- **Autonomy:** In community programs, allowing individuals to choose how they participate can enhance their engagement and satisfaction.
- **Competence:** Providing resources and support for individuals to develop new skills can boost their confidence and participation in community activities.
- **Relatedness:** Creating inclusive and supportive social networks helps individuals feel connected and valued within their communities.

Conclusion

Self-determination theory emphasises the importance of autonomy, competence, and relatedness in fostering motivation and well-being. Educators, employers, and community leaders can create environments that support intrinsic motivation, personal growth, and fulfilment by understanding and addressing these core needs.

Ecological Model: Considering the Impact of Environmental Factors on Self-Determination

Introduction

The ecological model emphasises the importance of environmental factors in understanding and fostering self-determination among individuals, particularly those with intellectual and developmental disabilities (IDD). This model recognises that self-determination is not solely an individual trait but is significantly influenced by various environmental contexts.

Critical Components of the Ecological Model

The ecological model includes multiple layers of environmental influence, each playing a crucial role in the development and expression of self-determination:

1. Microsystem:

- **Definition:** The immediate environment in which an individual interacts, such as family, school, and peer groups.
- **Impact on Self-Determination:**
 - Supportive family dynamics and positive peer relationships can enhance self-determination.
 - Inclusive educational settings that promote autonomy and provide opportunities for decision-making contribute to the development of self-determined behaviours.

2. Mesosystem:

- **Definition:** The interactions and relationships between different microsystems, such as the connection between home and school.
- **Impact on Self-Determination:**
 - Consistency and communication between family and educational institutions reinforce self-determined behaviours across settings.
 - Collaborative efforts among various microsystems can create a cohesive support network for the individual.

3. Exosystem:

- **Definition:** External environments that indirectly influence the individual, such as community resources, social services, and parents' workplaces.
- **Impact on Self-Determination:**
 - Access to community resources and supportive services can enhance opportunities for self-determined actions.
 - Policies and practices within social services that prioritise person-centred planning foster environments conducive to self-determination.

4. Macrosystem:

- **Definition:** The broader societal and cultural context, including societal norms, values, laws, and public policies.
- **Impact on Self-Determination:**
 - Societal attitudes towards disability and inclusion significantly affect opportunities for self-determination.

- Public policies that promote the rights and inclusion of individuals with IDD support their ability to exercise self-determination.

5. Chronosystem:

- **Definition:** The dimension of time, which includes life transitions, historical events, and changes over the lifespan.
- **Impact on Self-Determination:**
 - Life transitions, such as moving from school to work, require adjustments and new opportunities for self-determined behaviour.
 - Historical changes in societal attitudes and policies towards disability influence the evolving context for self-determination.

Practical Applications of the Ecological Model

Understanding the ecological model can inform the development of strategies and interventions to enhance self-determination. Here are some practical applications:

1. Family and Caregiver Support:

- Educate families about the importance of promoting autonomy and decision-making within the home.
- Provide resources and training for caregivers to support self-determined behaviours.

2. Inclusive Education:

- Implement curricula emphasising self-determination skills, such as goal-setting, problem-solving, and self-advocacy.
- Create inclusive classroom environments that encourage student participation and choice-making.

3. Community Resources:

- Develop and promote accessible community programs and services that support self-determination.
- Advocate for public policies that enhance access to inclusive education, employment, and community participation.

4. Policy Advocacy:

- Work towards societal and legislative changes that recognise and support the rights of individuals with IDD to make choices and control their own lives.
- Promote public awareness campaigns to change societal attitudes towards disability and self-determination.

Conclusion

The ecological model highlights the importance of considering environmental factors in understanding and promoting self-determination. By addressing influences at various levels, from immediate family interactions to broader societal policies, we can create supportive environments that empower individuals with intellectual and developmental disabilities to lead self-determined lives.

Person-Centered Planning (PCP): Emphasizes the Individual's Preferences, Strengths, and Needs

Overview

Person-centred planning (PCP) is an approach that puts the individual at the centre of the planning process. It aims to ensure that the person's preferences, strengths, and needs are the driving forces behind their support and services development. This method is essential for individuals with intellectual and developmental disabilities (IDD), as it promotes autonomy, respect, and personalised support.

Key Principles

1. Individual Preferences:

- PCP begins with understanding and honouring the preferences of the individual. This includes their likes, dislikes, aspirations, and goals. The person's voice is paramount, and their choices should guide all decisions.

2. Strengths-Based Approach:

- The focus is on the individual's strengths and capabilities rather than their limitations. Recognising and building on these strengths helps create a positive and empowering plan to enhance the individual's quality of life.

3. Holistic View:

- PCP considers the whole person's physical, emotional, social, and psychological needs. It acknowledges the interconnectedness of different aspects of a person's life and aims to create a balanced plan that supports overall well-being.

4. Inclusive Process:

- The planning process involves the individual and their chosen support network, including family members, friends, and professionals. This collaborative approach ensures the plan is comprehensive and reflects the individual's needs.

Steps in Person-Centered Planning

1. Preparation:

- Engage the individual and their support network.
- Gather information about the person's history, preferences, strengths, and needs.
- Set clear goals for the planning process.

2. Meeting and Discussion:

- Meet with all relevant parties to discuss the individual's preferences and strengths.
- Use charts, maps, or other visual aids to facilitate understanding and participation.

3. Development of the Plan:

- Create a detailed plan that outlines the individual's goals and the steps needed to achieve them.
- Assign roles and responsibilities to different members of the support network.
- Establish timelines and methods for monitoring progress.

4. Implementation:

- Put the plan into action, ensuring all agreed-upon supports and services are provided.
- Encourage regular communication among all parties involved to address any challenges or changes needed.

5. Review and Adjust:

- Continuously review the plan to ensure it remains relevant and practical.
- Make necessary adjustments based on the individual's changing needs and preferences.

Benefits of Person-Centered Planning

1. Empowerment:

- Individuals feel more in control of their lives and decisions, increasing their self-esteem and confidence.

2. Improved Quality of Life:

- Tailored support and services enhance the individual's overall well-being and satisfaction.

3. Enhanced Relationships:

- Collaborative planning strengthens relationships between the individual and their support network.

4. Better Outcomes:

- Services and supports aligning with the individual's preferences and strengths are more likely effective and sustainable.

Challenges and Considerations

1. Ensuring Authentic Participation:

- It's crucial to ensure that the individual's voice is genuinely heard and respected, not overshadowed by the opinions of others.

2. Balancing Needs and Resources:

- Finding the right balance between the individual's needs and the available resources can be challenging.

3. Training and Support:

- Training for all participants in the PCP process is essential to effectively understand and implement person-centred principles.

4. Flexibility:

- The planning process and the resulting plan must be flexible to adapt to changes in the individual's life and circumstances.

Person-centred planning (PCP) is a dynamic and empowering approach that prioritises the individual's preferences, strengths, and needs. By focusing on the person as the central figure in support planning, PCP promotes autonomy, respect, and a higher quality of life for individuals with intellectual and developmental disabilities.

Day 1: Success Stories and Case Presentations: Problem-solving Skills in Day-to-Day Life for Persons with IDD

(3:30 PM - 5:00 PM)

Objective: To showcase and discuss real-life examples of problem-solving skills in persons with intellectual and developmental disabilities (IDD), highlighting their successes and the strategies that facilitated these achievements.

Structure:

1. Introduction

- A brief overview of the session's purpose and objectives.
- Importance of problem-solving skills in day-to-day life for persons with IDD.

2. Presentation of Success Stories

- **Story 1: Rishi's Journey to Independent Living**
 - Background: Rishi, a young man with Down syndrome, is an artist who makes his paintings desire to live independently.
 - Problem: Difficulty managing household tasks and finances.
 - Solution: Participation in a life skills training program focused on problem-solving techniques.
 - Outcome: Rishi successfully lived with their parents, earning from his paintings, and managed his daily tasks with minimal assistance.

○ **Story 2: Amulya's Educational Triumph**

- Background: Amulya, a teenager with autism, faced challenges in mainstream education and living in a Home of Distitute Children.
- Problem: Struggles with social interactions and adapting to different teaching styles.
- Solution: Implementation of individualised education plans (IEP) with problem-solving strategies tailored to her needs.
- Outcome: Amulya graduated with honours and is now pursuing higher education.

○ **Story 3: Gaurav's Employment Success**

- Background: Gaurav, an adult with IDD, wanted to secure a meaningful job.
- Problem: Difficulty in job search and interviews due to communication barriers.
- Solution: Engagement in a job readiness program that included problem-solving and interview skills training.
- Outcome: Gaurav is now employed and thriving in a customer service role.

3. Case Studies on Problem-Solving Skills

○ **Case Study 1: Managing Daily Routines**

- Scenario: Harish, an adult with IDD, struggles with organising his daily activities.
- Problem-Solving Strategies: Use of visual schedules and time management tools.
- Discussion: How visual aids and consistent routines can enhance independence.

○ **Case Study 2: Overcoming Social Challenges**

- Scenario: Amit, a young adult with IDD, experiences anxiety in social situations.
- Problem-Solving Strategies: Role-playing and social stories to practice and prepare for interactions.
- Discussion: The effectiveness of preparatory strategies in reducing social anxiety.

○ **Case Study 3: Enhancing Decision-Making Skills**

- Scenario: Sharma, a teenager with IDD, has difficulty deciding her future.
- Problem-Solving Strategies: Decision-making frameworks and guided support from mentors.
- Discussion: Empowering individuals with IDD to make informed decisions about their lives.

○

4. Interactive Discussion

- Open floor for questions and sharing of additional success stories by participants.
 - Summarise key takeaways and encourage the application of discussed strategies in various settings.
-

Case Study 1: Managing Daily Routines

Scenario

Harish, an adult with intellectual and developmental disabilities (IDD), struggles with organising his daily activities.

Problem-Solving Strategies

1. Use of visual schedules:

- Visual schedules can clearly outline daily activities, helping Harish understand what needs to be done and when.
- Depending on Harish's preference and comprehension level, these schedules can include pictures, symbols, or words.

2. Time management tools:

- Tools such as timers, alarms, and reminders can help Harish stay on track with his activities.
- Apps and digital calendars can set reminders for tasks and appointments.

Discussion

How visual aids and consistent routines can enhance independence:

1. Visual aids can reduce anxiety by providing a transparent and predictable structure for the day.
 2. Consistent routines help reinforce habits, making it easier for Harish to manage his activities independently.
 3. Regular use of visual schedules and time management tools can improve Harish's time management skills, leading to increased confidence and self-reliance.
 4. Engaging in discussions about the effectiveness of these strategies can provide insights into how they can be tailored to meet Harish's needs better.
-

Case Study 2: Overcoming Social Challenges

Scenario

Amit, a young adult with intellectual and developmental disabilities (IDD), experiences anxiety in social situations.

Problem-Solving Strategies

1. Role-Playing:

- Amit practices social interactions in a safe and controlled environment through role-playing exercises.
- These exercises help him anticipate various social scenarios and develop appropriate responses.

2. Social Stories:

- Amit uses social stories, short descriptions of a situation, event, or activity, including specific information about what to expect and why.
- Social stories help Amit understand social cues and expectations, making him feel more prepared and less anxious.

Discussion

The effectiveness of preparatory strategies in reducing social anxiety can be significant for individuals with IDD. Through role-playing, Amit gains confidence by repeatedly practising social interactions, which helps relieve his stress. Social stories provide a clear framework and understanding of social norms and expectations, allowing Amit to feel more in control and less fearful of social situations. These preparatory strategies empower Amit to engage more comfortably and successfully in social interactions, enhancing his social skills and overall well-being.

Case Study 3: Enhancing Decision-Making Skills

Scenario

Sharma, an Adult with intellectual and developmental disabilities (IDD), has difficulty deciding his future.

Problem-Solving Strategies

1. Decision-Making Frameworks:

- Sharma uses structured decision-making frameworks to break down complex decisions into manageable steps.
- These frameworks include identifying options, weighing pros and cons, and considering potential outcomes.

2. Guided Support from Mentors:

- Sharma receives guidance from mentors who provide support and advice during decision-making.
- Mentors help Sharma explore her interests, strengths, and preferences, ensuring her decisions align with his goals.

Discussion

Empowering individuals with IDD to make informed decisions about their lives is crucial for their independence and self-determination. Decision-making frameworks provide a structured approach that simplifies complex choices, making them more manageable. Guided support from mentors offers personalised assistance and encouragement, helping individuals like Sharma to explore their options and make choices that reflect their true desires and aspirations. By fostering decision-making skills, we enable individuals with IDD to take control of their lives and achieve their personal goals.

Day-2 Workshop 3: Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD)

Introduction to the SDS-IDD Tool and Its Application

Objective:

- To introduce participants to the Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD).
- To provide a comprehensive understanding of the SDS-IDD tool and its practical application.

Overview: The Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) is a standardised assessment tool designed to measure the self-determination levels of individuals with intellectual and developmental disabilities. It helps identify areas of strength and areas needing improvement, facilitating tailored interventions and support plans.

Session Outline:

1. Introduction to Self-Determination

- Definition and importance of self-determination.
- Benefits of assessing self-determination in individuals with IDD.

2. Overview of the SDS-IDD Tool

- Purpose and structure of the SDS-IDD.
- Components and subscales of the SDS-IDD.
- How the SDS-IDD was developed and validated.

3. Using the SDS-IDD Tool

- Administration guidelines.
- Scoring and interpretation.

- Case study examples.

4. Practical Application

- Integrating SDS-IDD results into individual support plans.
- Developing strategies based on assessment outcomes.

5. Q&A Session

- Addressing participant questions and providing clarifications.

Introduction to Self-Determination

Definition and Importance of Self-Determination

Self-determination is how individuals control their lives, make choices, and set goals based on their values and preferences. It is a fundamental human right and a key component of personal autonomy and dignity.

- **Definition:** Self-determination involves making choices, learning to solve problems effectively, and taking control and responsibility for one's own life.
- **Importance:**
 - **Empowerment:** It empowers individuals with IDD to take control of their lives.
 - **Quality of Life:** Enhances overall quality of life by promoting independence.
 - **Self-Advocacy:** Encourages self-advocacy, leading to better personal outcomes.
 - **Social Inclusion:** Facilitates greater social inclusion and participation in the community.

Benefits of Assessing Self-Determination in Individuals with IDD

Assessing self-determination helps understand an individual's strengths and areas for growth, guiding personalised support plans.

- **Identifies Strengths and Needs:** Helps identify specific strengths and needs of individuals.
- **Guides Support Plans:** A foundation for developing personalised support and intervention plans.
- **Promotes Individual Growth:** Encourages continuous personal development and growth.
- **Improves Outcomes:** Leads to better educational, vocational, and social outcomes.

Overview of the SDS-IDD Tool

Purpose and Structure of the SDS-IDD

The Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) is a standardised tool designed to measure self-determination in IDD individuals.

- **Purpose:** To provide a reliable and valid measure of self-determination.
- **Structure:** Consists of various components and subscales that assess different aspects of self-determination.

Components and Subscales of the SDS-IDD

The SDS-IDD comprises several subscales that collectively measure the overall self-determination of an individual.

- **Autonomy:** Measures the ability to make independent choices.
- **Self-Regulation:** Assesses the ability to manage and regulate one's behaviour.
- **Psychological Empowerment:** Evaluates the feeling of control over one's own life.
- **Self-realisation:** Assesses self-awareness and the understanding of one's strengths and limitations.

How the SDS-IDD Was Developed and Validated

The SDS-IDD was developed through rigorous research and testing to ensure its reliability and validity.

- **Development Process:** Involved collaboration with experts in the field, extensive literature review, and pilot testing.
- **Validation:** Conducted through statistical analysis and field testing with individuals with IDD to ensure accuracy and reliability.

Administration Guidelines for Using the SDS-IDD Tool

Proper administration of the SDS-IDD ensures accurate and consistent results.

- **Preparation:** Familiarize with the tool and its components.
- **Environment:** Ensure a comfortable and distraction-free environment for the assessment.
- **Instructions:** Provide clear and simple instructions to the individual.

Scoring and Interpretation

Accurate scoring and interpretation are crucial for meaningful results.

- **Scoring:** Follow the standardised scoring guidelines provided with the tool.
- **Interpretation:** Analyze the scores to identify areas of strength and areas needing support.

Case Study Examples

Providing real-life examples helps in understanding the practical application of the SDS-IDD.

- **Case Study 1:** Example of an individual with high autonomy but low self-regulation and the resulting support plan.
- **Case Study 2:** Example of an individual with balanced scores across all subscales and the comprehensive support strategy developed.

Practical Application

Integrating SDS-IDD Results into Individual Support Plans

Using the results from the SDS-IDD to develop effective and personalised support plans.

- **Personalised Goals:** Set goals based on the individual's strengths and areas for improvement.
- **Tailored Strategies:** Develop strategies that align with the individual's unique needs and preferences.

Developing Strategies Based on Assessment Outcomes

Creating actionable plans based on the assessment outcomes to promote self-determination.

- **Skill Development:** Focus on developing specific skills identified as areas for growth.
- **Support Networks:** Build a support network involving family, educators, and peers.
- **Continuous Monitoring:** Regularly monitor progress and adjust strategies as needed.

[Download Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities \(SDS-IDD\)](#)

Demographic Information Form

Participant ID:

A. Personal Information

A.1. Name (optional):

A.2. Age:..... A.3. Date of Birth:

A.4. Gender: ☐ Male ☐ Female

A.5. Religion:..... A.6. Marital Status:.....

A.7. Living Situation: ☐ Urban ☐ Semiurban ☐ Rural

B. Education and Employment

B.1. Highest Level of Education Completed:.....

B.2. Current Employment Status:.....

C. Diagnosis and Disability Information

(If you have a disability, please provide relevant documentation such as Disability Certificate, UDID Card, Diagnostic Prescription, or any Documented diagnosis of IDD.):

C.1. Primary Diagnosis:.....

C.2. Percentage of Disability:.....

C.3. Severity of Disability ☐ Mild ☐ Moderate ☐ Severe ☐ Profound

C.4. Age of Diagnosis:.....

C.5. Any Assistive Devices Used:.....

D. Additional Information (if any):.....

Consent for Participation in Self-Determination Assessment

I, [Participant's Name], understand that I am invited to take the Self-Determination Assessment. This will help me know how well I can express myself and solve problems. My participation is my choice, and I can stop anytime.

Purpose: This helps me understand how I make decisions and solve problems.

Confidentiality: All information about me will be kept private.

Voluntary Participation: You can say no or stop anytime. It won't affect anything else.

Consent: I agree to join the Self-Determination Assessment.

Participant's Signature/Verbal Consent: _____

Date: _____

Guardian Consent (if applicable):

I, [Guardian's Name], agree to let [Participant's Name] join the assessment.

Guardian's Signature: _____

Date: _____

Unwillingness (if applicable):

If I don't want to participate, please write the reason below:

Reason: _____

Date: _____

Researcher's Signature: _____

Thank you! If you have questions, contact Alok Kumar “Bhuwan” at Manovikas- M:991110772,
E: alok@manovikas.family.

Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) (Indian Version)

The Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) assesses an individual's self-determination and self-advocacy skills. Please rate each statement according to how well it applies to you.

Statement	Not at All (1)	Rarely (2)	Sometimes (3)	Often (4)	Very Often (5)
1. I know what I'm good at and the areas that need improvement.					
2. I can explain my disability.					
3. I can tell others how I learn best.					
4. I can tell others what doesn't help me learn.					
5. I am confident in expressing my interests.					
6. I am confident in expressing my values.					
7. I can ask for help without getting upset.					
8. I can communicate what I want to learn.					
9. I can communicate my plans for the future.					
10. I am aware of my rights as a person with a disability.					
11. I can communicate my needs to teachers.* ¹					
12. I can communicate my needs to work supervisors.* ²					

Statement	Not at All (1)	Rarely (2)	Sometimes (3)	Often (4)	Very Often (5)
13. I can gather information.					
14. I can make decisions.					
15. I can solve problems.					
16. I can make plans to achieve my goals.					
17. I am punctual.					
18. I can follow a schedule.					
19. I can work independently.					
20. I understand the importance of taking care of my physical health.					
21. I understand the importance of taking care of my mental health.					
Total Score					

Levels of self-determination and self-advocacy skills:

1. Low Self-Determination/Self-Advocacy Skills (1-40)

2. Moderate Self-Determination/Self-Advocacy Skills (41-70)

3. High Self-Determination/Self-Advocacy Skills (71-105)

Characteristics:.....
.....
.....

Support Strategies:.....
.....
.....

Date of Assessment:

Assessment is done by name and Signature.

Day-2 Workshop 4: Effective Communication for Advocacy and Accommodations or Support Services

Techniques for Effective Communication in Advocacy

1. Introduction to Effective Communication

- Definition and importance of effective communication in advocacy.
- The role of clear and assertive communication in self-advocacy.

2. Key Communication Techniques

- **Active Listening:** Techniques for listening attentively and empathetically.
- **Assertiveness:** Balancing assertiveness with respect in communication.
- **Clarity and Conciseness:** Clear and concise messaging is essential.
- **Non-verbal Communication:** Understanding and using body language effectively.
- **Feedback:** Giving and receiving constructive feedback.

3. Communication in Different Contexts

- Communicating with professionals and service providers.
- Peer communication and support.
- Public speaking and advocacy in community settings.

4. Overcoming Communication Barriers

- Identifying common barriers to effective communication.
- Strategies to overcome these barriers.
- Importance of cultural competence in communication.

Discussion Materials:

1. Communication Strategies Handouts

- **Handout 1:** Overview of Effective Communication Techniques.
- **Handout 2:** Active Listening Strategies.
- **Handout 3:** Assertiveness Tips.
- **Handout 4:** Clarity and Conciseness in Messaging.
- **Handout 5:** Non-verbal Communication Guide.
- **Handout 6:** Overcoming Communication Barriers.

2. Role-Play Scenarios

- **Scenario 1:** Communicating with a healthcare provider about a specific need.
- **Scenario 2:** Advocating for accommodations in an educational setting.
- **Scenario 3:** Participating in a peer support group discussion.
- **Scenario 4:** Public speaking at a community event for advocacy.
- **Scenario 5:** Resolving a conflict with a service provider.

Handout 1: Overview of Effective Communication Techniques

Effective communication is essential for advocacy and support services. Here are vital techniques to enhance your communication skills:

Active Listening: Pay full attention to the speaker, show empathy, and provide feedback.

Assertiveness: Communicate your needs and opinions confidently while respecting others.

Clarity and Conciseness: Be clear and to the point, avoiding unnecessary jargon.

Non-verbal Communication: Use body language, facial expressions, and gestures to support your message.

Feedback: Give and receive constructive feedback to improve communication.

Handout 2: Active Listening Strategies

Active listening involves:

Paying Attention: Focus entirely on the speaker, avoid distractions, and acknowledge the message.

Showing You're Listening: Use body language and gestures like nodding or smiling.

Providing Feedback: Reflect on what has been said by paraphrasing. 'What I'm hearing is...'

Deferring Judgment: Allow the speaker to finish each point before asking questions.

Responding Appropriately: Be candid, open, and honest in your response.

Handout 3: Assertiveness Tips

Assertiveness means expressing your thoughts, feelings, and beliefs directly, honestly, and respectfully. Tips include:

Use 'I' Statements: Communicate your needs and feelings by starting sentences with 'I'.

Maintain Eye Contact: Shows confidence and sincerity.

Keep Your Posture Open and Relaxed: Avoid crossing your arms or appearing closed off.

Practice Saying No: It's important to say no when necessary.

Rehearse Your Statements: Practice what you want to say in advance.

Handout 4: Clarity and Conciseness in Messaging

Being clear and concise ensures your message is understood. Techniques include:

Know Your Audience: Tailor your language to the audience's level of understanding.

Stay on Topic: Avoid tangents confusing your message.

Use Simple Language: Avoid jargon and complex terms.

Be Specific: Give clear examples and avoid vague statements.

Organise Your Thoughts: Structure your message logically.

Handout 5: Non-verbal Communication Guide

Non-verbal communication can enhance or undermine your message. Key aspects include:

Body Language: Use open gestures and avoid crossing arms.

Facial Expressions: Ensure your facial expressions match your message.

Eye Contact: Maintain appropriate eye contact to show engagement.

Posture: Stand or sit up straight to convey confidence.

Space: Be aware of personal space; avoid standing too close or far.

Handout 6: Overcoming Communication Barriers

Communication barriers can hinder understanding. Strategies to overcome them include:

Identify Barriers: Recognize what prevents effective communication (e.g., noise, language differences).

Simplify Language: Use clear and simple language to avoid misunderstandings.

Listen Actively: Ensure you fully understand the message before responding.

Provide Feedback: Confirm understanding by summarising what you heard.

Cultural Sensitivity: Be aware of cultural differences and adjust your communication accordingly.

Workshop Instructions on Role-Play Scenarios

Introduction

Role-play scenarios are designed to help participants practice and enhance their communication skills in various advocacy and support contexts. These scenarios provide a safe environment to simulate real-life situations, receive constructive feedback, and improve their techniques.

Scenario 1: Communicating with a Healthcare Provider about a Specific Need

Objective: Practice clear and assertive communication with healthcare providers to ensure specific needs are addressed.

Instructions:

1. **Participants:** One person will play the role of the patient, and another will be the healthcare provider.
2. **Situation:** The patient must communicate a specific health concern or need to the healthcare provider.
3. **Focus:** The patient should practice explaining their needs clearly and assertively, while the healthcare provider should actively listen and provide feedback.
4. **Discussion Points:** After the role-play, discuss how the communication went, what worked well, and what could be improved.

Script Example:

- **Patient:** "Doctor, I have been experiencing severe headaches daily and need your help to understand why."
- **Healthcare Provider:** "I understand your concern. Can you describe the headaches in more detail?"

Scenario 2: Advocating for Accommodations in an Educational Setting

Objective: Learn how to advocate effectively for necessary accommodations in an educational environment.

Instructions:

1. **Participants:** One person will play the role of the student, and another will be the teacher or school administrator.
2. **Situation:** The student needs to request specific accommodations for their learning needs.
3. **Focus:** The student should practice explaining their needs and why the accommodations are necessary. The teacher or administrator should practice listening and responding appropriately.
4. **Discussion Points:** After the role-play, discuss the clarity of the student's request and the response of the teacher or administrator.

Script Example:

- **Student:** "I have difficulty concentrating during exams due to my ADHD. I would benefit from extended time on tests."
- **Teacher:** "Thank you for sharing that. Let's discuss how we can accommodate your needs."

Scenario 3: Participating in a Peer Support Group Discussion

Objective: Practice effective communication and active listening in a peer support group setting.

Instructions:

1. **Participants:** 3-4 participants, with one person leading the discussion.
2. **Situation:** The group discusses topics relevant to their experiences, such as managing stress or coping with a disability.
3. **Focus:** Participants should practice sharing their thoughts, actively listening to others, and providing supportive feedback.
4. **Discussion Points:** After the role-play, discuss the effectiveness of the communication and the support provided.

Script Example:

- **Participant 1:** "I find managing stress difficult, especially during exams. How do you all cope with stress?"
- **Participant 2:** "I use deep breathing exercises and find them very helpful."

Scenario 4: Public Speaking at a Community Event for Advocacy

Objective: Enhance public speaking skills to advocate for a cause at a community event.

Instructions:

1. **Participants:** One person will play the role of the speaker, and the rest will be the audience.
2. **Situation:** The speaker presents a short speech advocating for a specific cause, such as improving accessibility in the community.
3. **Focus:** The speaker should practice clear, confident, and persuasive communication. The audience should provide constructive feedback.
4. **Discussion Points:** After the role-play, discuss the effectiveness of the speech, the speaker's delivery, and the audience's response.

Script Example:

- **Speaker:** "Good evening, everyone. I am here to talk about the importance of making our community more accessible for people with disabilities."
- **Audience Member:** "Can you provide examples of how we can achieve this?"

Scenario 5: Resolving a Conflict with a Service Provider

Objective: Practice conflict resolution and effective communication with a service provider.

Instructions:

1. **Participants:** One person will play the role of the customer, and another will be the service provider.
2. **Situation:** The customer needs to resolve a conflict with the service provider regarding a service issue.
3. **Focus:** The customer should practice explaining the issue calmly and assertively, while the service provider should actively listen and find a resolution.
4. **Discussion Points:** After the role-play, discuss the effectiveness of the communication and the resolution process.

Script Example:

- **Customer:** "I have been experiencing repeated issues with my internet service, and it has not been resolved despite multiple calls."
- **Service Provider:** "I apologize for the inconvenience. Let's go over the issue again to find a solution."

Conclusion

Role-play scenarios are an effective way to practice and refine communication skills in a supportive environment. Participants are encouraged to engage fully, provide honest feedback, and reflect on their experiences to improve their advocacy and communication techniques.

Day 2: Workshop 5: Self-Advocacy Curriculum

Development and Implementation of a Self-Advocacy Curriculum

Objective:

- To develop a comprehensive self-advocacy curriculum tailored for individuals with intellectual and developmental disabilities (IDD).
- To provide practical strategies for implementing the curriculum effectively.

Discussion Materials

Curriculum Outline:

- **Introduction to Self-Advocacy**
 - Definition and Importance
 - Historical Context and Evolution
- **Core Components of Self-Advocacy**
 - Self-Awareness
 - Communication Skills
 - Decision-Making
 - Rights and Responsibilities
- **Practical Application**
 - Role-Playing Scenarios
 - Real-Life Case Studies
 - Community Involvement

Sample Lessons:

Lesson 1: Understanding Self-Advocacy

- **Objective:** Introduce the concept of self-advocacy.
- **Materials:** Handouts on self-advocacy definitions and videos of self-advocates.
- **Activities:** A group discussion on what self-advocacy means to participants, viewing and discussing video examples.

Lesson 2: Developing Self-Awareness

- **Objective:** Help participants understand their strengths and areas for improvement.
- **Materials:** Self-assessment tools and reflection worksheets.
- **Activities:** Guided self-assessment, sharing findings in pairs or small groups.

Lesson 3: Communication Skills for Advocacy

- **Objective:** Teach effective communication techniques.
- **Materials:** Communication skills handbook, role-play scripts.
- **Activities:** Practice role-playing scenarios feedback sessions.

Lesson 4: Decision-Making and Problem-Solving

- **Objective:** Enhance decision-making and problem-solving skills.
- **Materials:** Decision-making models and problem-solving worksheets.
- **Activities:** Case studies analysis, group problem-solving exercises.

Lesson 5: Knowing Your Rights and Responsibilities

- **Objective:** Educate participants on their legal rights and responsibilities.
- **Materials:** Legal rights handouts, advocacy success stories.
- **Activities:** Interactive Q&A and guest speaker session with a legal expert.

Introduction to Self-Advocacy

Definition and Importance

- **Definition:** Self-advocacy refers to the ability of an individual to effectively communicate, convey, negotiate, or assert their interests, desires, needs, and rights.
- **Importance:** Self-advocacy empowers individuals, especially those with disabilities, to take control of their lives, make informed decisions, and pursue their goals and aspirations. It promotes independence and self-confidence and ensures their voices are heard and respected.

Historical Context and Evolution

- **Early Movements:** Exploration of the origins of self-advocacy within the broader disability rights movement.
- **Key Milestones:** Significant events and legislation that have shaped the self-advocacy landscape.
- **Current Trends:** Modern approaches and advancements in self-advocacy, including digital and social media's role in amplifying voices.

Core Components of Self-Advocacy

a. Self-Awareness

- **Understanding Self:** Encouraging individuals to recognise their strengths, weaknesses, needs, and desires.
- **Self-Assessment Tools:** Instruments and exercises to help individuals gain insight into their attributes.

b. Communication Skills

- **Effective Communication:** Teaching clear, assertive, and respectful communication techniques.
- **Active Listening:** The importance of listening actively and empathetically in advocacy.

c. Decision-Making

- **Informed Choices:** Guiding individuals on how to make well-informed decisions.
- **Problem-Solving Strategies:** Techniques for addressing and resolving issues.

d. Rights and Responsibilities

- **Understanding Rights:** Educating about legal rights and protections.
- **Responsibilities:** Emphasizing the importance of personal and societal responsibilities.

Practical Application

a. Role-Playing Scenarios

- **Interactive Exercises:** Engaging in role-playing to practice self-advocacy skills in a safe environment.
- **Feedback and Reflection:** Constructive feedback sessions to improve performance.

b. Real-Life Case Studies

- **Case Analysis:** Studying real-life examples of successful self-advocacy.
- **Lessons Learned:** Discuss the challenges and successes faced by self-advocates.

c. Community Involvement

- **Engagement Strategies:** Encouraging participation in community activities and organisations.
- **Building Networks:** Developing support networks and alliances to strengthen advocacy efforts.

Sample Lessons for Self-Advocacy Curriculum

Lesson 1: Understanding Self-Advocacy

Objective: Introduce the concept of self-advocacy.

Materials:

- Handouts on self-advocacy definitions
- Videos of self-advocates

Activities:

1. Group Discussion:

- Start with a brief introduction to self-advocacy.
- Pose questions to the group: “What does self-advocacy mean to you?” “Why is it important?”
- Write down key points from the discussion on a whiteboard or flip chart.

2. Video Viewing and Discussion:

- Show videos featuring self-advocates sharing their experiences.
- After viewing, facilitate a discussion: “What did you learn from these videos?” “How can you apply these lessons to your own life?”

Presentation:

- Slides on the definition of self-advocacy and its importance.
 - Key discussion points and summary of the videos.
-

Lesson 2: Developing Self-Awareness

Objective: Help participants understand their strengths and areas for improvement.

Materials:

- Self-assessment tools
- Reflection worksheets

Activities:

1. Guided Self-Assessment:

- Provide self-assessment tools to participants.
- Guide them through the assessment, explaining each section and its importance.

2. Pair or Small Group Sharing:

- Have participants share their findings in pairs or small groups.
- Encourage them to discuss their strengths and areas for improvement.

Presentation:

- Slides explaining the importance of self-awareness.
 - Examples of self-assessment tools and reflection prompts.
-

Lesson 3: Communication Skills for Advocacy

Objective: Teach effective communication techniques.

Materials:

- Communication skills handbook
- Role-play scripts

Activities:

1. Practice Role-Playing Scenarios:

- Provide role-play scripts to participants.
- Divide them into pairs or small groups to practice different scenarios.

2. Feedback Sessions:

- After role-playing, have participants give and receive feedback on their communication skills.
 - Discuss what went well and areas for improvement.
-

Lesson 4: Decision-Making and Problem-Solving

Objective: Enhance decision-making and problem-solving skills.

Materials:

- Decision-making models
- Problem-solving worksheets

Activities:

1. Case Studies Analysis:

- Provide case studies for participants to analyse.
- Discuss the decision-making and problem-solving processes used in each case.

2. Group Problem-Solving Exercises:

- Engage participants in group exercises to solve hypothetical problems.
 - Encourage them to apply decision-making models and techniques.
-

Lesson 5: Knowing Your Rights and Responsibilities

Objective: Educate participants on their legal rights and responsibilities.

Materials:

- Legal rights handouts
- Advocacy success stories

Activities:

1. Interactive Q&A:

- Distribute handouts on legal rights and responsibilities.
- Conduct an interactive Q&A session to clarify doubts and answer questions.

2. Guest Speaker Session:

- Invite a legal expert to speak about rights and responsibilities.
- Facilitate a discussion and allow participants to ask questions.

Day 2: Presentation and Discussion: Community Resources and Engagement for Self-Advocacy Programme

Content Outline:

1. Introduction to Community Resources

- Definition and Importance of Community Resources
- Types of Community Resources (Educational, Vocational, Social, Health)
- Benefits of Utilizing Community Resources for Self-Advocacy

2. Identifying Community Resources

- How to Locate and Identify Available Resources
- Key Criteria for Selecting Useful Resources
- Building a Personal Resource Directory

3. Engagement Strategies

- Effective Communication Techniques with Community Resources
- Building Relationships with Community Leaders and Organizations
- Volunteer Opportunities and Community Involvement

4. Case Studies and Success Stories

- Real-Life Examples of Successful Community Engagement
- Lessons Learned from Successful Advocacy Campaigns

5. Interactive Session: Developing Your Own Resource and Engagement Plan

- Guided Activity: Creating a Personal or Group Resource Directory
- Role-Playing Scenarios for Practicing Engagement Strategies
- Group Discussion and Feedback

Discussion Materials:

1. Resource Directories

- Templates for Personal and Group Resource Directories
- Examples of Comprehensive Resource Directories from Different Regions
- Online and Offline Resources for Building Directories

2. Engagement Strategies

- Handouts on Effective Communication Techniques
- Step-by-Step Guides to Building Relationships with Community Resources
- Examples of Volunteer Opportunities and How to Get Involved

Introduction to Community Resources

Definition and Importance of Community Resources

- **Definition:** Community resources are the assets, services, and supports available within a community that can be utilised to meet various needs and goals.
- **Importance:** These resources are critical in supporting individuals' well-being, enhancing quality of life, and promoting self-advocacy and self-determination.

Types of Community Resources

- **Educational Resources:** Schools, libraries, tutoring services, educational programs.
- **Vocational Resources:** Job training programs, employment services, career counselling.
- **Social Resources:** Social clubs, community centres, support groups.
- **Health Resources:** Clinics, hospitals, mental health services, wellness programs.

Benefits of Utilizing Community Resources for Self-Advocacy

- **Increased Independence:** Access to resources can enhance self-reliance and autonomy.
- **Empowerment:** Resources provide tools and knowledge that empower individuals to advocate for themselves.
- **Improved Quality of Life:** Utilizing resources can improve health, education, and social outcomes.

Identifying Community Resources

How to Locate and Identify Available Resources

- **Research Methods:** Online searches, community bulletin boards, local directories.
- **Networking:** Asking friends, family, and community members for recommendations.

Key Criteria for Selecting Useful Resources

- **Accessibility:** Proximity, affordability, and availability of services.
- **Relevance:** Alignment with personal needs and goals.
- **Quality:** Reputation, reviews, and effectiveness of the resource.

Building a Personal Resource Directory

- **Organisation:** Categorize resources by type (educational, vocational, etc.).
- **Details:** Include contact information, services offered, and operating hours.
- **Updates:** Regularly review and update the directory to ensure current information.

Engagement Strategies

Effective Communication Techniques with Community Resources

- **Preparation:** Know what information you need and what questions to ask.
- **Clarity:** Be clear and concise in your communication.
- **Follow-Up:** Maintain contact and follow up as necessary.

Building Relationships with Community Leaders and Organizations

- **Networking:** Attend community events and meetings.
- **Collaboration:** Volunteer or participate in community projects.
- **Advocacy:** Share your experiences and advocate for improvements.

Volunteer Opportunities and Community Involvement

- **Finding Opportunities:** Look for volunteer positions that match your interests and skills.
- **Benefits:** Volunteering can build skills, expand your network, and increase community engagement.

Case Studies and Success Stories

Real-Life Examples of Successful Community Engagement

- **Case Study 1:** Example of an individual using community resources to achieve educational goals. **Goldu**
- **Case Study 2:** Story of a community coming together to support a local advocacy campaign.

Lessons Learned from Successful Advocacy Campaigns

- **Strategies:** Effective planning, clear goals, and strong partnerships.
- **Challenges:** Overcoming obstacles such as limited resources and resistance to change.
- **Outcomes:** Positive changes in policies, increased awareness, and improved services.

Interactive Session: Developing Your Own Resource and Engagement Plan

Guided Activity: Creating a Personal or Group Resource Directory

- **Steps:** Identify needs, research resources, organise information, and create a directory.

Role-Playing Scenarios for Practicing Engagement Strategies

- **Scenario 1:** Communicating with a local service provider.
- **Scenario 2:** Networking at a community event.
- **Scenario 3:** Volunteering and advocating for a cause.

Group Discussion and Feedback

- **Sharing Plans:** Participants share their resource directories and engagement plans.
- **Feedback:** The group provides constructive feedback and suggestions for improvement.
- **Q&A:** Open floor for questions and additional tips.

By integrating these components into the workshop, participants will gain a thorough understanding of community resources, their importance, and practical strategies for utilising and engaging with these resources effectively.

Role-Playing Scenarios for Practicing Engagement Strategies

Overview

Role-playing scenarios provide a hands-on way to practice and develop effective engagement strategies. These exercises will help participants build confidence and improve their communication and advocacy skills in real-world situations.

Scenario 1: Communicating with a Local Service Provider

Objective:

Practice practical communication skills when seeking services or support from a local provider.

Instructions:

1. Introduction (5 minutes):

- Briefly explain the importance of clear and assertive communication when interacting with service providers.
- Highlight key points: being prepared, asking straightforward questions, and following up.

2. Role-Play Setup (5 minutes):

- Participants pair up. One person acts as the service provider, and the other as the individual seeking services.
- Provide a sample scenario: "You need to find out about vocational training programs available at a local community center."

3. Role-Play Exercise (10 minutes):

- The individual seeking services prepares questions and approaches the service provider.
- Engage in a dialogue, focusing on clear communication and obtaining necessary information.

4. Debrief and Feedback (10 minutes):

- Each pair discusses what went well and areas for improvement.
- The facilitator provides additional feedback and tips for effective communication.

Scenario 2: Networking at a Community Event

Objective: To develop networking skills and build relationships with community leaders and peers.

Instructions:

1. Introduction (5 minutes):

- Discuss the benefits of networking and building relationships within the community.
- Highlight strategies such as active listening, asking open-ended questions, and sharing information about yourself.

2. Role-Play Setup (5 minutes):

- Participants form small groups. Each group has community leaders (played by some members) and individuals attending the event (played by others).
- Provide a sample scenario: "You are attending a community fair and want to connect with leaders who can support your advocacy efforts."

3. Role-Play Exercise (10 minutes):

- Individuals practice introducing themselves, asking questions, and finding common ground with community leaders.
- Rotate roles to give everyone the chance to practice networking.

4. Debrief and Feedback (10 minutes):

- Groups discuss their experiences, focusing on successful strategies and challenges.
- The facilitator provides additional insights on effective networking techniques.

Scenario 3: Volunteering and Advocating for a Cause

Objective: To practice advocating for a cause while volunteering and engaging with community members.

Instructions:

1. Introduction (5 minutes):

- Explain the dual role of volunteering: contributing to a cause and advocating for improvements or support.
- Emphasise the importance of being passionate, informed, and persuasive.

2. Role-Play Setup (5 minutes):

- Participants split into small groups—some act as volunteers, others as community members or stakeholders.
- Provide a sample scenario: "You are volunteering at a local shelter and want to advocate for better funding and resources."

3. Role-Play Exercise (10 minutes):

- Volunteers practice explaining their cause, highlighting the need for support, and persuading community members to get involved or provide resources.
- Rotate roles to ensure everyone has a chance to practice advocating.

4. Debrief and Feedback (10 minutes):

- Groups discuss their role-playing experiences, focusing on effective advocacy techniques and challenges.
- The facilitator provides additional tips on persuasive communication and advocacy.

General Tips for All Scenarios:

- **Preparation:** Understand the context and objectives of your engagement.
- **Active Listening:** Pay close attention to the responses and cues from others.
- **Clarity and Confidence:** Speak clearly and confidently, ensuring your message is understood.
- **Follow-up:** Always consider the following steps and how to maintain the connection or communication.

Participating in these role-playing scenarios will gain practical experience and build confidence in their ability to engage effectively with community resources, leaders, and peers.

Day-3 Developing and Implementing Policy Advocacy Plans

This session will focus on the creation and execution of effective policy advocacy plans. Participants will explore key advocacy components, learn how to identify issues, set objectives, and develop strategic plans to influence policy changes.

Discussion Materials:

1. Policy Advocacy Planning Templates

- **Template 1: Issue Identification and Analysis**
 - Issue Description
 - Stakeholders Involved
 - Current Policies/Legislation
 - Impact on Target Population
- **Template 2: Goal Setting**
 - Advocacy Goal
 - Specific Objectives
 - Measurable Outcomes
- **Template 3: Strategy Development**
 - Key Messages
 - Advocacy Tactics (e.g., lobbying, media campaigns, coalition building)
 - Timeline
- **Template 4: Implementation Plan**
 - Action Steps
 - Responsible Parties
 - Resources Needed
 - Monitoring and Evaluation Plan

2. Discussion Prompts

- What are the most pressing issues facing individuals with IDD in your community?
- How can policy changes improve the lives of individuals with IDD?
- What strategies have you found effective in advocating for policy changes?
- How do you engage stakeholders and build coalitions for advocacy efforts?
- What challenges have you faced in policy advocacy, and how have you overcome them?

Discussion Prompts

1. What are the most pressing issues facing individuals with IDD in your community?

Consider the specific challenges and barriers that individuals with intellectual and developmental disabilities (IDD) encounter. These include access to education, healthcare, employment opportunities, social inclusion, or support services. Identify and prioritise these issues based on their impact and the community's needs.

2. How can policy changes improve the lives of individuals with IDD?

Discuss potential policy changes that could address the identified issues. This may include legislation aimed at increasing funding for support services, improving accessibility standards, ensuring inclusive education, or protecting the rights of individuals with IDD. Consider the benefits and potential outcomes of these policy changes.

3. What strategies have you found effective in advocating for policy changes?

Share your experiences and successful strategies in policy advocacy. These might include grassroots organising, lobbying, using media to raise awareness, public speaking, or collaborating with other organisations. Highlight the approaches that have yielded positive results and explain why they were effective.

4. How do you engage stakeholders and build coalitions for advocacy efforts?

Examine the importance of engaging various stakeholders, including individuals with IDD, their families, advocacy groups, policymakers, and the general public. Discuss methods for building strong coalitions, such as identifying common goals, fostering open communication, and creating partnerships that leverage the strengths of different organisations.

5. What challenges have you faced in policy advocacy, and how have you overcome them?

Identify common obstacles in policy advocacy efforts, such as political resistance, limited resources, or public misunderstanding of IDD issues. Share strategies and solutions that have effectively overcome these challenges, such as persistent advocacy, building public support, or finding alternative funding sources.

These discussion prompts aim to facilitate a comprehensive and interactive dialogue among participants, encouraging them to share their insights, experiences, and ideas for effective policy advocacy.

Policy Advocacy Planning Templates

Template 1: Issue Identification and Analysis

Issue Description:

Stakeholders Involved:

Current Policies/Legislation:

Impact on Target Population:

Template 2: Goal Setting

Advocacy Goal:

Specific Objectives:

Measurable Outcomes:

Template 3: Strategy Development

Key Messages:

Advocacy Tactics (e.g., lobbying, media campaigns, coalition building):

Timeline:

Template 4: Implementation Plan

Action Steps:

Responsible Parties:

Resources Needed:

Monitoring and Evaluation Plan:

Day-3 Panel Discussion: Voices of Self-Advocates

Introduction:

The panel discussion, "Voices of Self-Advocates," aims to provide a platform for individuals with intellectual and developmental disabilities (IDD) to share their personal experiences, challenges, and triumphs in advocating for their rights and self-determination. The session will include stories of empowerment, insights into effective advocacy strategies, and discussions on the impact of self-advocacy on their lives.

Panelist Bios:

Mr. UK Shukla

Mr. UK Shukla is the former Director of the National Trust, an organization dedicated to the welfare of persons with disabilities. With decades of experience in disability rights and advocacy, Mr. Shukla has been instrumental in shaping policies and programs that promote inclusion and support for individuals with intellectual and developmental disabilities (IDD). His expertise and dedication have made significant contributions to the field of disability rights in India.

Self-Advocate Panelist

Mrs. Suvarna Raj

Mrs. Suvarna Raj is the Founder of the Women with Disabilities Network and a prominent activist for the rights of persons with disabilities. She is a member of the World Assembly of Women with Disabilities, where she advocates for the inclusion and empowerment of women with disabilities globally. Mrs. Raj's work focuses on promoting accessibility, equality, and opportunities for individuals with disabilities, making her a respected leader and voice in the disability rights movement.

Mr. Soham Deb

Mr. Soham Deb is a Board Member of Manovikas, an organization dedicated to the education and empowerment of individuals with intellectual and developmental

disabilities. As a self-advocate, Mr. Deb brings valuable insights and experiences starting from as a Student of Manovikas joining higher education and supporting and advocating for persons with disabilities.

Ms. Deepika Bobal

Ms. Deepika Bobal is a Board Member of Manovikas and an active self-advocate for the rights of persons with intellectual and developmental disabilities. Through her role at Manovikas, Ms. Deepika has been involved in various initiatives aimed at promoting self-advocacy, inclusion, and empowerment for individuals with IDD. Her dedication and advocacy efforts have been pivotal in advancing the cause of disability rights and fostering a more inclusive society.

Moderator

Dr. Alok Bhuwan

He is a renowned expert in the field of disability studies and advocacy. With extensive experience in moderating discussions and facilitating workshops, Dr. Bhuwan brings a wealth of knowledge and a deep understanding of the challenges and opportunities in the realm of disability rights. As the moderator of the panel, he will guide the discussions, ensuring that the voices and perspectives of all panelists are heard and valued.

Discussion Questions:

1. For all panellists:

- Can you share your journey and what motivated you to become a self-advocate?
- What are some of your biggest challenges in your advocacy efforts?
- How have you overcome these challenges?

2. For the self-advocates:

- What impact has self-advocacy had on your personal and professional life?
- Can you share a specific instance where your advocacy made a significant difference?

3. For the dignitaries:

- From your perspective, what are the most critical areas where self-advocates need support?
- How can organisations and the government better support self-advocates in their efforts?

4. Open discussion:

- What advice would you give someone just starting their journey as a self-advocate?
- How can the community at large contribute to the success of self-advocacy initiatives?

Day-3 Planning for Self-Advocacy Organisation and Its Management

Introduction to Self-Advocacy Organizations

Definition of Self-Advocacy Organizations

Self-advocacy organisations are groups or associations formed by individuals with intellectual and developmental disabilities (IDD) to advocate for their rights and interests. These organisations are typically led and run by the individuals they represent, ensuring their voices and needs are heard. Critical characteristics of self-advocacy organisations include:

- **Leadership by Individuals with IDD:** These organisations prioritise the leadership and decision-making of individuals with IDD, promoting autonomy and empowerment.
- **Focus on Rights and Inclusion:** They advocate for the rights of individuals with IDD, striving for inclusion and equal opportunities in all areas of life.
- **Peer Support and Networking:** Members provide mutual support and share experiences, fostering community and belonging.
- **Educational and Training Programs:** They offer education and training to enhance self-advocacy skills and knowledge about rights and resources.

Importance of Self-Advocacy in Empowering Individuals with IDD

Self-advocacy plays a critical role in empowering individuals with IDD. Here are several ways in which self-advocacy is essential:

1. **Promoting Independence and Autonomy:**

- Self-advocacy enables individuals with IDD to make their own decisions and take control of their lives. They gain confidence and independence by learning to speak up for themselves.
- **Example:** An individual with IDD who has learned self-advocacy skills might independently request reasonable accommodations at work, ensuring their needs are met without relying on others.

2. Enhancing Self-Esteem and Confidence:

- When individuals with IDD successfully advocate for themselves, it boosts their self-esteem and confidence—knowing that their voice matters can be incredibly empowering.
- **Example:** A person with IDD who effectively communicates their needs in a healthcare setting gains confidence in their ability to navigate similar situations.

3. Ensuring Rights and Legal Protections:

- Self-advocacy organisations educate members about their legal rights and protections, enabling them to fight for their entitlements and challenge discrimination or injustice.
- **Example:** Members of a self-advocacy organisation may collectively lobby for policy changes that improve accessibility in public spaces and ensure compliance with disability rights laws.

4. Fostering Social Inclusion and Participation:

- By advocating for their rights and participating in decision-making processes, individuals with IDD become more integrated into their communities. This fosters social inclusion and reduces isolation.
- **Example:** A self-advocate might join a local advisory board, ensuring that the needs and perspectives of individuals with IDD are considered in community planning.

5. Building Peer Support Networks:

- Self-advocacy organisations provide a platform for individuals with IDD to connect with peers who share similar experiences. This peer support network is vital for emotional support and practical advice.
- **Example:** Through regular meetings, self-advocates share strategies for overcoming common challenges, offering mutual support and encouragement.

6. Influencing Policy and Systems Change:

- Self-advocacy organisations can influence policy and systems change by voicing their members' collective concerns and needs. Their advocacy efforts can lead to significant improvements in services and support.
- **Example:** A self-advocacy organisation may campaign for changes in the education system to better support students with IDD and result in more inclusive educational practices.

Summary

Self-advocacy organisations are pivotal in empowering individuals with IDD. They foster independence, enhance self-esteem, ensure rights and protections, promote social inclusion, build peer support networks, and influence policy and systems change. By participating in self-advocacy organisations, individuals with IDD can take charge of their lives, advocate for their needs, and contribute to a more inclusive society.

Planning a Self-Advocacy Organization

This guide outlines the steps to establish and develop a self-advocacy organisation. Each step includes detailed content, discussion materials, and presentation slides for effective understanding and implementation.

Step 1: Establishing the Vision and Mission

Content:

- **Purpose and Goals of the Organization:**
 - Define the core purpose of the organisation.
 - Identify specific, measurable goals to be achieved.
 - Ensure the goals align with the needs and rights of the community you serve.
- **Creating a Mission Statement:**
 - Reflect on the organisation's core values and objectives.
 - Craft a concise mission statement communicating the organisation's purpose and goals.
 - Ensure the mission statement is inclusive and empowering.

Discussion Materials:

- Examples of mission statements from successful self-advocacy organisations.
- Worksheets for drafting and refining the mission statement.

Step 2: Conducting Needs Assessment

Content:

- **Identify the Needs of the Community:**
 - Understand the challenges and needs of the community.
 - Engage with community members to gather their input.
- **Use Surveys, Focus Groups, and Interviews:**
 - Design surveys to gather quantitative data.
 - Organise focus groups for in-depth discussions.
 - Conduct interviews with key stakeholders to get detailed insights.

Discussion Materials:

- Sample survey templates.
- Guidelines for conducting focus groups and interviews.
- Tools for analysing collected data.

Step 3: Develop a Strategic Plan

Content:

- **Set Short-term and Long-term Goals:**
 - Define immediate objectives and future aspirations.
 - Ensure goals are specific, measurable, achievable, relevant, and time-bound (SMART).
- **Outline Strategies to Achieve These Goals:**
 - Develop actionable strategies to meet the defined goals.
 - Identify key activities, resources, and timelines.
- **Allocate Resources Effectively:**
 - Determine the necessary resources (financial, human, technical).
 - Plan for efficient use and management of these resources.

Discussion Materials:

- Strategic planning templates.
- Examples of strategic plans from other organisations.
- Resource allocation worksheets.

Step 4: Creating a Budget

Content:

- **Determine Funding Sources:**
 - Identify potential funding sources (grants, donations, fundraising events).
 - Develop a fundraising strategy.
- **Prepare a Detailed Budget Plan:**
 - List all potential expenses and income.
 - Ensure the budget aligns with the strategic plan.
- **Monitor and Adjust the Budget as Needed:**
 - Regularly review the budget.
 - Make necessary adjustments based on actual income and expenses.

Discussion Materials:

- Sample budget templates.
- List of potential funding sources.
- Budget monitoring tools.

Step 5: Legal and Administrative Setup

Content:

- **Register the Organization Legally:**
 - Understand the legal requirements for registering a non-profit organisation.
 - Complete the necessary paperwork and registration processes.
- **Develop Bylaws and Governance Policies:**
 - Draft bylaws outlining the organisation's structure and operating procedures.
 - Establish governance policies to ensure transparency and accountability.
- **Ensure Compliance with Local Regulations:**
 - Stay informed about local laws and regulations.
 - Ensure ongoing compliance to avoid legal issues.

Discussion Materials:

- Legal requirements checklist.
- Sample bylaws and governance policies.
- Compliance monitoring tools.

Managing a Self-Advocacy Organization

Step 6: Building a Strong Leadership Team

Recruit board members and leaders with diverse skills

- **Content:**
 - Identify the necessary skills and expertise required for the leadership team.
 - Develop a recruitment strategy targeting individuals with these skills.
 - Promote inclusivity and diversity in the recruitment process.
- **Discussion Materials:**
 - List of desired skills and expertise for board members and leaders.
 - Recruitment strategy outline.
 - Diversity and inclusion guidelines.

Provide training and support to leaders.

- **Content:**
 - Create a comprehensive training program for new leaders.
 - Offer ongoing professional development opportunities.
 - Establish a mentorship system for continuous support.
- **Discussion Materials:**
 - Training program outline.
 - List of professional development opportunities.
 - Mentorship program guidelines.

Step 7: Volunteer and Staff Management

Develop a volunteer recruitment and retention plan

- **Content:**
 - Identify the roles and responsibilities of volunteers.
 - Create a recruitment plan targeting suitable candidates.
 - Develop strategies for volunteer retention and engagement.
- **Discussion Materials:**
 - Volunteer roles and responsibilities outlined.
 - Recruitment plan template.
 - Volunteer retention strategies guide.

Offer training and development opportunities for staff and volunteers

- **Content:**
 - Develop a training program for staff and volunteers.
 - Offer continuous learning and development opportunities.
 - Encourage feedback and improvement.
- **Discussion Materials:**
 - Training program outline.
 - List of development opportunities.
 - Feedback collection methods.

Step 8: Program Development and Implementation

Design programs that meet the needs of the community

- **Content:**
 - Conduct a needs assessment to identify community requirements.
 - Develop programs tailored to these needs.
 - Ensure programs are inclusive and accessible.
- **Discussion Materials:**
 - Needs assessment tools.
 - Program design templates.
 - Accessibility guidelines.

Implement programs with clear objectives and measurable outcomes

- **Content:**
 - Define clear objectives for each program.
 - Establish measurable outcomes to track progress.
 - Implement a monitoring system to evaluate effectiveness.
- **Discussion Materials:**
 - Program objective setting guide.
 - Outcome measurement tools.
 - Monitoring and evaluation framework.

Step 9: Fundraising and Financial Management

Create a fundraising plan

- **Content:**
 - Identify potential funding sources.
 - Develop a comprehensive fundraising strategy.
 - Set fundraising goals and timelines.
- **Discussion Materials:**
 - Fundraising plan template.
 - List of potential funding sources.
 - Goal-setting worksheet.

Diversify funding sources

- **Content:**
 - Explore various funding options, including grants, donations, and events.
 - Build relationships with potential donors and sponsors.
 - Ensure a mix of funding sources for sustainability.
- **Discussion Materials:**
 - List of diverse funding sources.
 - Donor and sponsor engagement guide.
 - Sustainability plan.

Maintain transparency in financial management.

- **Content:**
 - Implement robust financial management practices.
 - Ensure transparency in all financial dealings.
 - Regularly report financial status to stakeholders.
- **Discussion Materials:**
 - Financial management guidelines.
 - Transparency and accountability checklist.
 - Reporting templates.

Step 10: Monitoring and Evaluation

Set up a system for regular monitoring and evaluation

- **Content:**
 - Develop a comprehensive monitoring and evaluation plan.
 - Establish key performance indicators (KPIs) to track progress.
 - Regularly review and update the plan.
- **Discussion Materials:**
 - Monitoring and evaluation plan template.
 - List of KPIs.
 - Review and update schedule.

Use feedback to improve programs and operations

- **Content:**
 - Collect feedback from stakeholders regularly.
 - Analyse feedback to identify areas for improvement.
 - Implement changes based on feedback.
- **Discussion Materials:**
 - Feedback collection methods.
 - Feedback analysis tools.
 - Improvement implementation plan.

Step 11: Building Partnerships and Networks

Collaborate with other organisations and stakeholders

- **Content:**
 - Identify potential partner organisations and stakeholders.
 - Develop collaboration strategies and agreements.
 - Foster long-term partnerships for mutual benefit.
- **Discussion Materials:**
 - List of potential partners.
 - Collaboration strategy template.
 - Partnership agreement guidelines.

Engage with the community and build a support network

- **Content:**
 - Develop community engagement strategies.
 - Build a network of supporters and advocates.
 - Maintain regular communication with the community.
- **Discussion Materials:**
 - Community engagement plan.
 - Support network building guide.
 - Communication templates.

Discussion Materials for a Self-Advocacy Organization

Examples of Vision Statements from Successful Self-Advocacy Organizations

1. **Vision Statement 1:** We aim to celebrate the diverse beauty within us all, fostering unity and understanding among individuals from all walks of life.

Worksheets for Drafting and Refining the Mission Statement

1. **Vision Statement:**

- What is the long-term vision of your organisation?

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Focus on these questions to craft a concise and impactful vision statement:

1. **Impact:** What positive change do you want to create?
2. **Uniqueness:** What sets your vision apart from others?
3. **Feeling:** What emotion do you want to evoke? (e.g., unity, understanding, acceptance)

Visualisation Exercise

Take a moment to close your eyes and visualise your ideal future state. What images, sounds, or emotions come to mind? Jot down these details to further inspire your vision statement.

Examples of Mission Statements from Successful Self-Advocacy Organizations

1. **Mission Statement 1:** To empower individuals with intellectual and developmental disabilities (IDD) to advocate for their rights and lead independent lives.
2. **Mission Statement 2:** To provide self-advocates education, resources, and support to enhance their quality of life and societal inclusion.

Worksheets for Drafting and Refining the Mission Statement

2. Vision Statement:

- What is the long-term vision of your organisation?

3. Core Values:

- What values guide your organisation?

4. Primary Goals:

- What are the main goals your organisation aims to achieve?

5. Target Audience:

- Who are the primary beneficiaries of your organisation's work?

6. Draft Mission Statement:

- Combine the elements above to draft your mission statement.

Sample Survey Templates

1. General Survey Template:

- Questions about service satisfaction, areas of improvement, and additional support needs.

2. Specific Program Survey Template:

- Questions tailored to gather feedback on specific programs or initiatives.

Guidelines for Conducting Focus Groups and Interviews

1. Planning:

- Define objectives, select participants, and prepare questions.

2. Conducting:

- Facilitate discussion, ensure inclusivity and record responses.

3. Analysing:

- Summarise key points, identify trends, and compile a report.

Tools for Analyzing Collected Data

- 1. Data Categorization:**
 - Sort data into categories for more straightforward analysis.
- 2. Statistical Analysis Tools:**
 - Use software like Excel, SPSS, or similar tools to analyse data.

Strategic Planning Templates

- 1. Vision Statement**
- 2. Mission Statement**
- 3. Goals and Objectives**
- 4. SWOT Analysis**
- 5. Action Plan**
- 6. Evaluation and Monitoring**

Examples of Strategic Plans from Other Organizations

- 1. XYZ Advocacy Group**
- 2. ABC Self-Advocacy Network**

Resource Allocation Worksheets

- 1. Project Resource Allocation**
- 2. Monthly Resource Allocation**

Sample Budget Templates

- 1. Annual Budget Template**
- 2. Project-Specific Budget Template**

List of Potential Funding Sources

- 1. Government Grants**
- 2. Private Donations**
- 3. Corporate Sponsorships**

Budget Monitoring Tools

1. **Budget Tracking Spreadsheet**
2. **Financial Reporting Templates**

Legal Requirements Checklist

1. **Registration Requirements**
2. **Compliance with Local Laws**
3. **Reporting Obligations**

Sample Bylaws and Governance Policies

1. **Organisational Bylaws Template**
2. **Governance Policies for Nonprofits**

Compliance Monitoring Tools

1. **Compliance Checklist**
 2. **Annual Compliance Review Template**
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Managing a Self-Advocacy Organization

List of Desired Skills and Expertise for Board Members and Leaders

- **Financial Management:** Understanding of budgeting, financial planning, and resource allocation.
- **Strategic Planning:** Ability to develop and implement long-term goals and strategies.
- **Legal Expertise:** Knowledge of relevant laws and regulations affecting the organisation.
- **Fundraising:** Experience in securing funds through grants, donations, and sponsorships.
- **Public Relations and Marketing:** Skills in promoting the organisation and its mission.
- **Program Development and Evaluation:** Ability to design, implement, and assess programs.
- **Human Resources:** Experience in staff and volunteer management.

Recruitment Strategy Outline

1. **Identify Needed Skills:** Assess current board and leadership gaps.
2. **Develop a Recruitment Plan:** Outline steps for attracting candidates.
3. **Conduct Outreach:** Use networks, advertisements, and recruitment agencies.
4. **Interview and Select:** Screen candidates through interviews and reference checks.
5. **Onboarding:** Provide orientation and training for new members.

Diversity and Inclusion Guidelines

- **Promote Inclusivity:** Foster an environment where all voices are heard.
- **Ensure Diverse Representation:** Actively recruit individuals from varied backgrounds.
- **Implement Anti-Discrimination Policies:** Enforce policies that prevent discrimination.

Training Program Outline

1. **Training Needs Assessment:** Identify the skills and knowledge gaps.
2. **Program Development:** Create a curriculum tailored to these needs.
3. **Implementation and Evaluation:** Deliver the training and assess its effectiveness.

List of Professional Development Opportunities

- **Workshops and Seminars:** Regular sessions on relevant topics.
- **Online Courses:** Access to courses for ongoing learning.
- **Mentorship Programs:** Pairing with experienced leaders for guidance.

Mentorship Program Guidelines

1. **Mentor Selection Criteria:** Define what makes a good mentor.
2. **Program Structure:** Outline the mentorship process and duration.
3. **Evaluation Metrics:** Assess the effectiveness of the mentorship program.

Volunteer Roles and Responsibilities Outline

- **Role Descriptions:** Detailed descriptions of volunteer positions.
- **Responsibilities and Expectations:** Clear expectations for each role.
- **Training Requirements:** Necessary training for each position.

Recruitment Plan Template

1. **Define Volunteer Needs:** Identify the roles and number of volunteers required.
2. **Develop Outreach Strategy:** Plan how to attract volunteers.
3. **Conduct Recruitment Drives:** Implement the strategy through events and campaigns.

Volunteer Retention Strategies Guide

- **Recognition Programs:** Regularly acknowledge volunteer contributions.
- **Engagement Activities:** Organize events to keep volunteers motivated.
- **Feedback Mechanisms:** Provide channels for volunteers to share their experiences.

Training Program Outline

1. **Needs Assessment:** Determine training needs.
2. **Program Development:** Create training modules.
3. **Implementation:** Deliver training sessions.

List of Development Opportunities

- **Skill-Building Workshops:** Sessions focused on specific skills.
- **Continuing Education:** Opportunities for formal education.
- **Networking Events:** Events to build professional connections.

Feedback Collection Methods

- **Surveys:** Regular surveys to gather feedback.
- **Focus Groups:** Small group discussions to delve deeper into issues.
- **Suggestion Boxes:** Anonymous feedback options.

Needs Assessment Tools

- **Surveys and Questionnaires:** Tools to assess needs.
- **Interviews:** One-on-one discussions to understand needs.
- **Community Meetings:** Group discussions for broader input.

Program Design Templates

- **Program Overview:** General description of the program.
- **Objectives and Outcomes:** Clear goals and expected results.
- **Implementation Plan:** Steps to execute the program.

Accessibility Guidelines

- **Physical Accessibility:** Ensure facilities are accessible to all.
- **Digital Accessibility:** Ensure online resources are accessible.
- **Inclusive Communication:** Use clear and inclusive language.

Program Objective Setting Guide

1. **Define Clear Objectives:** Specific and measurable goals.
2. **Align with Mission and Vision:** Ensure objectives support the overall mission.
3. **Set Measurable Goals:** Define how success will be measured.

Outcome Measurement Tools

- **Performance Metrics:** Indicators to measure success.
- **Data Collection Methods:** Tools to gather data.
- **Analysis and Reporting:** Methods to analyse and report on outcomes.

Monitoring and Evaluation Framework

1. **Regular Monitoring Schedule:** Set timelines for monitoring.
2. **Evaluation Criteria:** Define what success looks like.
3. **Feedback Incorporation:** Use feedback to make improvements.

Fundraising Plan Template

1. **Identify Funding Needs:** Determine the financial requirements.
2. **Develop Fundraising Strategies:** Outline how to raise funds.
3. **Set Goals and Timelines:** Establish clear targets and deadlines.

List of Potential Funding Sources

- **Foundations and Grants:** Apply for grants from foundations.
- **Individual Donors:** Encourage donations from individuals.
- **Corporate Sponsorships:** Secure sponsorships from businesses.

Goal-Setting Worksheet

1. **Define Goals:** Clear and achievable goals.
2. **Set Milestones:** Break goals into smaller steps.
3. **Track Progress:** Regularly monitor progress towards goals.

List of Diverse Funding Sources

- **Government Grants**
- **Crowdfunding**
- **Sponsorships**

Donor and Sponsor Engagement Guide

1. **Identify Potential Donors:** Research and list potential donors.
2. **Develop Engagement Plan:** Plan how to approach and engage donors.
3. **Build Relationships:** Maintain ongoing communication and relationships with donors.

Sustainability Plan

1. **Diversify Funding Sources:** Ensure multiple income streams.
2. **Build Long-Term Partnerships:** Establish strong, lasting relationships.
3. **Implement Cost-Effective Practices:** Optimize the use of resources.

Financial Management Guidelines

1. **Budget Planning:** Create and manage budgets effectively.
2. **Financial Reporting:** Regularly report financial status.

Managing a Self-Advocacy Organization

Transparency and Accountability Checklist

1. Financial Reporting:

- Regularly publish financial statements.
- Ensure all financial transactions are documented and accessible.

2. Open Meetings:

- Hold regular board and committee meetings that are open to members.
- Provide meeting minutes to the public.

3. Stakeholder Engagement:

- Actively seek feedback from stakeholders.
- Implement a transparent decision-making process.

Reporting Templates

1. Financial Report Template:

- Income and expenses breakdown.
- Balance sheet and cash flow statements.

2. Progress Report Template:

- Summary of activities and achievements.
- Challenges faced and solutions implemented.

3. Annual Report Template:

- Comprehensive overview of the year's activities.
- Financial summary and future goals.

Monitoring and Evaluation Plan Template

1. Define Evaluation Goals:

- Identify the key objectives of the evaluation.

2. Develop Monitoring Plan:

- Establish a timeline for regular monitoring activities.

3. Implement Evaluation:

- Collect and analyse data.
- Use findings to make informed decisions.

List of KPIs (Key Performance Indicators)

1. **Program Participation Rates:**
 - Track the number of participants in each program.
2. **Client Satisfaction Scores:**
 - Use surveys to measure client satisfaction.
3. **Financial Performance Indicators:**
 - Monitor income, expenses, and financial growth.

Review and Update Schedule

1. **Annual Review:**
 - Conduct a comprehensive review of all programs and operations annually.
2. **Quarterly Updates:**
 - Provide quarterly progress reports to stakeholders.
3. **Ongoing Feedback:**
 - Collect and incorporate feedback continuously.

Feedback Collection Methods

1. **Surveys:**
 - Distribute surveys to clients and stakeholders regularly.
2. **Focus Groups:**
 - Conduct focus group discussions for in-depth feedback.
3. **Suggestion Boxes:**
 - Place suggestion boxes in accessible locations.

Feedback Analysis Tools

1. **Thematic Analysis:**
 - Identify and analyse common themes from qualitative data.
2. **Statistical Analysis:**
 - Use statistical software to analyse quantitative data.
3. **Reporting Tools:**
 - Compile and present findings in an understandable format.

Improvement Implementation Plan

1. Identify Areas for Improvement:

- Use feedback and evaluation results to pinpoint areas needing improvement.

2. Develop Action Plan:

- Create a detailed action plan to address identified issues.

3. Monitor Progress:

- Regularly track the implementation of improvement actions.

List of Potential Partners

1. Local Nonprofits:

- Collaborate with other local nonprofit organisations.

2. Government Agencies:

- Partner with relevant government bodies.

3. Community Groups:

- Engage with community groups and leaders.

Collaboration Strategy Template

1. Identify Common Goals:

- Determine shared objectives with potential partners.

2. Develop Collaboration Plan:

- Outline the roles and responsibilities of each partner.

3. Implement and Monitor:

- Execute the plan and monitor progress regularly.

Partnership Agreement Guidelines

1. Define Roles and Responsibilities:

- Clearly outline the roles and responsibilities of each party.

2. Set Goals and Expectations:

- Agree on common goals and expectations.

3. Establish Communication Channels:

- Set up effective communication methods for ongoing collaboration.

Community Engagement Plan

1. Identify Community Needs:

- Conduct needs assessments to understand community requirements.

2. Develop Engagement Strategies:

- Create strategies to engage the community effectively.

3. Implement and Evaluate:

- Put engagement strategies into action and evaluate their impact.

Support Network Building Guide

1. Identify Key Stakeholders:

- Recognise important stakeholders and supporters.

2. Develop Engagement Plan:

- Plan how to engage and maintain relationships with stakeholders.

3. Build and Maintain Relationships:

- Foster long-term relationships with consistent communication and collaboration.

Communication Templates

1. Press Releases:

- Template for announcing news and updates to the media.

2. Newsletters:

- Regular updates to keep stakeholders informed.

3. Social Media Posts:

- Templates for sharing information on social media platforms.

FAQ

1. Question: What is the primary goal of person-centered planning (PCP)?

Answer: Ensure that the individual's preferences, strengths, and needs are the driving forces behind the development of their support and services.

2. Question: What are the fundamental principles of person-centered planning?

Answer: Individual preferences, strengths-based approach, holistic view, and inclusive process.

3. Question: Name one benefit of person-centered planning.

Answer: Empowerment, improved quality of life, enhanced relationships, or better outcomes.

Establishing Self-Advocacy Programs

4. Question: What are two key components of a self-advocacy curriculum?

Answer: Self-awareness and communication skills.

5. Question: Describe one method for developing a self-advocacy organisation.

Answer: Establishing a vision and mission, conducting needs assessments, or developing a strategic plan.

6. Question: Why is it essential to have a diverse leadership team in a self-advocacy organisation?

Answer: A diverse leadership team brings various skills and perspectives, enhancing the organisation's effectiveness.

7. Question: What is a crucial strategy for retaining volunteers?

Answer: Recognizing and rewarding contributions regularly.

8. Question: What should be included in a fundraising plan?

Answer: Clear fundraising goals, strategies, and planned activities or campaigns.

Problem-Solving Skills and Success Stories

9. Question: What is the primary objective of problem-solving skills for persons with IDD?

Answer: To enhance their ability to handle day-to-day challenges and improve their independence.

10. Question: Give an example of a problem-solving strategy used in Amulya's educational success case study.

Answer: Implementation of an individualised education plan (IEP) with tailored problem-solving strategies and support.

11. Question: What role do mentors play in enhancing decision-making skills for individuals with IDD?

Answer: Mentors provide guidance and support during decision-making, helping individuals explore their interests and preferences.

12. Question: What is the purpose of role-playing in reducing social anxiety for individuals with IDD?

Answer: Role-playing helps individuals practice social interactions in a safe environment, building confidence and reducing anxiety.

13. Question: Why is it essential to continuously review and adjust the self-advocacy programs?

Answer: To ensure the programs remain relevant, effective, and responsive to the changing needs of individuals with IDD.

14. Question: What is one benefit of using decision-making frameworks for individuals with IDD?

Answer: They help simplify complex choices, making them more manageable.

15. Question: Name one method used for monitoring and evaluating the effectiveness of a self-advocacy program.

Answer: Regular data collection, data analysis, or feedback mechanisms.

Quiz

1. Question: What is the primary goal of person-centered planning (PCP)?

- A) To focus on the caregiver's preferences
- B) To ensure that the individual's preferences, strengths, and needs drive their support and services
- C) To prioritise organisational efficiency

Answer: B

2. Question: Which of the following is NOT a fundamental principle of person-centred planning?

- A) Individual preferences
- B) Strengths-based approach
- C) Cost-effectiveness

Answer: C

3. Question: Name one benefit of person-centered planning.

- A) Increased organisational control
- B) Enhanced relationships
- C) Reduced administrative work

Answer: B

Establishing Self-Advocacy Programs

4. Question: What are two key components of a self-advocacy curriculum?

- A) Financial management and self-awareness
- B) Self-awareness and communication skills
- C) Communication skills and cost-saving

Answer: B

5. Question: Which of the following is a method for developing a self-advocacy organisation?

- A) Establishing a vision and mission
- B) Reducing operational costs
- C) Increasing membership fees

Answer: A

6. Question: Why is it essential to have a diverse leadership team in a self-advocacy organisation?

- A) It brings a variety of skills and perspectives
- B) It reduces the workload for existing members
- C) It ensures compliance with legal standards.

Answer: A

7. Question: What is a crucial strategy for retaining volunteers?

- A) Providing high salaries
- B) Recognizing and rewarding contributions regularly
- C) Reducing volunteer duties

Answer: B

8. Question: What should be included in a fundraising plan?

- A) Financial penalties for donors
- B) Clear fundraising goals and strategies
- C) Mandatory volunteer donations

Answer: B

9. Question: What is the primary objective of problem-solving skills for persons with IDD?

- A) To increase their reliance on caregivers
- B) To enhance their ability to handle day-to-day challenges
- C) To minimise social interactions.

Answer: B

10. Question: Which of the following was used as a problem-solving strategy in the case study of Amulya's educational success?

- A) Individualized education plan (IEP)
- B) Increased homework assignments
- C) Peer tutoring sessions

Answer: A

11. Question: What role do mentors play in enhancing decision-making skills for individuals with IDD?

- A) They make decisions on behalf of the individuals
- B) They provide guidance and support during the decision-making process
- C) They only provide financial assistance

Answer: B

12. Question: What is the purpose of role-playing in reducing social anxiety for individuals with IDD?

- A) To reduce physical activity
- B) To practice social interactions in a safe environment
- C) To avoid social interactions

Answer: B

13. Question: Why is it essential to continuously review and adjust self-advocacy programs?

- A) To maintain program relevance and effectiveness
- B) To reduce program costs
- C) To limit participant involvement

Answer: A

14. Question: What is one benefit of using decision-making frameworks for individuals with IDD?

- A) They complicate the decision-making process
- B) They help simplify complex choices
- C) They limit options available to the individual

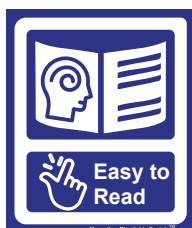
Answer: B

15. Question: Which method is used for monitoring and evaluating the effectiveness of a self-advocacy program?

- A) Ignoring participant feedback
- B) Regular data collection
- C) Reducing program activities

Answer: B

Cognitively Accessible Communications



Manovikas Family is raising awareness on **cognitively accessible communications across the government and public and private establishments.**

Self-advocates hope all establishments will use the accessible communications in **Easy Read to give the right information at the right time.**

What is accessible information?

It is information that everyone can understand.

Here are a few ways to provide accessible information:

Spoken words

Large print

Information provided on CD or MP3

Braille

Sign language

Easy-Read, including picture

Why make information accessible?

Everyone can understand

About 20 million people with intellectual and developmental disabilities are living in India and need Cognitively Accessible Information.

Easy-Read communication will make persons with IDD **easy-to-understand about government policies and services.**

Some special provisions tell us we must make information accessible?

- UNCRPD
- The Rights of Persons with Disability Act 2016
- National Education Policy 2020

Learn More: <https://manovikasfamily.org/gyanshala/easy-read/>



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Appendix III

UNIT: 4

Empowering Your Child with Self-Determination:
A Guide for Parents of Children with IDD



Empowering Your Child with Self-Determination:



A Guide for Parents of Children with Intellectual and Developmental Disabilities (IDD)



MANOVIKAS मनोविकास

Manovikas Charitable Society

"Encouraging Independence and Advocacy for a Brighter Future"

Existing Programs of Manovikas:



Advocacy: Manovikas Charitable Society advocates for the rights and inclusion of individuals with disabilities, influencing policy reforms and increasing awareness through programs like the Manbhavan Friendship Circle.



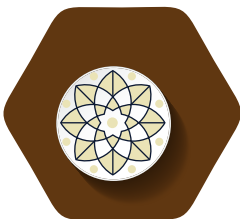
Care: The organisation provides a safe and supportive living environment at Manolaya Home, emphasising autonomy and offering tailored assistance, education, and community engagement opportunities for individuals with intellectual and developmental disabilities.



Education: Manovikas empowers individuals through inclusive education, implementing accessible UDL modules aligned with NEP 2020 and providing a continuum of educational programs from early childhood to adult education.



Mental Health: Focusing on mental health awareness and well-being, Manovikas offers professional assistance tailored to individuals and families, addressing specific mental health issues through specialised psychiatric services.



Spirituality: To facilitate spiritual growth, Manovikas provides practices and tools like Sachetan for unique spiritual journeys, therapeutic techniques and sessions to promote meaningful experiences.

As one of the leading providers of comprehensive services to persons with disabilities, Manovikas Family brings together **over two million stakeholders across 25 years**.

Get involved in advocacy, care, education, mental health, spirituality and governance programs and projects – all designed to positively impact the lives of those we serve.

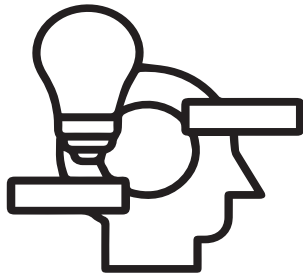
Together, let's make a difference!

To access the **Position Paper of 25 years** of service and the **STRATEGIC PLAN** of Manovikas Charitable Society, please click on the following links:

- <https://bit.ly/MCS-Position-Paper>
- <https://bit.ly/STRATEGIC-PLAN-2024-2025>



STRATEGIC PLAN



Empowering Your Child with Self-Determination: A Guide for Parents of Children with Intellectual and Developmental Disabilities (IDD)



Published by: Manovikas Charitable Society

Author: Dr Alok Kumar “Bhuwan”



Supported by: Home of Hope Inc.



Presented at Regional Parents Meet organised by:
PARIVAAR – National Confederation of Parents Organizations (NCPO) &
Institute for the Empowerment of Persons with Intellectual Disabilities (NIEPID)
Ministry of Social Justice & Empowerment, Government of India

Event Venue:

Prof. K.N. Udupa Auditorium, Institute of Medical Science,
Banaras Hindu University (BHU), Varanasi, Uttar Pradesh

Event Date: 21st and 22nd of September, 2024,

This resource material has been specially designed for the Regional Parents Meet to provide parents with the knowledge and tools they need to empower their children with Intellectual and Developmental Disabilities (IDD). Through this guide, we aim to promote self-determination, independence, and social inclusion for children with IDD, helping parents foster a brighter and more inclusive future for their families.

Empowering Your Child with Self-Determination: A Guide for Parents of Children with Intellectual and Developmental Disabilities (IDD)

Published by: Manovikas Charitable Society

Author:

Dr Alok Kumar "Bhuwan"

www.alokbhuwan.org

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We are grateful to the parents, children, and professionals who contributed to this guide, helping us empower the lives of children with intellectual and developmental disabilities.

Introduction

Welcome to "Empowering Your Child with Self-Determination: A Guide for Parents of Children with Intellectual and Developmental Disabilities (IDD)." This guide is designed to support parents and caregivers in empowering their children with IDD to lead more independent, confident, and fulfilling lives through the power of self-determination.

Self-determination is the ability to make choices and take control of one's own life. For children with IDD, this means making decisions—both small and big—about their day-to-day activities, future goals, and personal preferences. This guide will provide you with practical strategies, real-life examples, and expert advice to help your child grow into an advocate for their own needs and dreams.

This guide is based on the extensive experience of the Manovikas Charitable Society, which has been working in the field of intellectual and developmental disabilities for over 27 years. Through its work, Manovikas has seen first-hand the transformative power of self-determination in enabling children with IDD to become confident, independent individuals. Their journey of working with thousands of families has shaped the contents of this guide, making it practical and deeply rooted in real-world success stories.

We hope this guide will help you take the next step in supporting your child's journey to independence and self-advocacy.

This guide is not just a resource—it is a reflection of the collective experiences of families, educators, and professionals who believe in the potential of every child. We hope that using this guide will empower you to support your child in becoming independent, confident, and a strong advocate for themselves.

Dr. Alok Kumar "Bhuwan"

Senior Rehabilitation Specialist

Managing Secretary,

Manovikas Charitable Society, Bharat

Free Resources: SCAN the Code

Assessing Self-Determination Skills and
Establishing Self-Advocacy Programs



Individualized Education Plan (IEP)



Comprehensive Guide to Inclusive Higher Education



Make My Choice Workshop Resources



Online portal for Self-Determination Assessment



Manbhavan Self Advocacy Presentation



Registration for Manbhavaban Mitr-Mandali
(Join Self-Advocacy Group)



What is Self-Determination?



Self-determination means giving your child the power to make choices and decisions about their life.

For children with intellectual and developmental disabilities (IDD), this can be as simple as letting them decide what to eat or wear or even making more significant decisions about their future.

Why is Self-Determination Important?



Builds Confidence: When your child makes their own choices, they feel more confident and independent.

Improves Social Skills: Children who make decisions better interact with others and become part of the community.

Encourages Self-Advocacy: Your child learns to speak up for their needs and wants, which helps them lead a more fulfilling life.

Myths Among About the Capabilities

Many parents of children with IDD have understandable concerns about their child's abilities to make independent decisions. However, these concerns often stem from common myths that can limit a child's potential. Let's explore a few of these myths:

Myth: "My child cannot make their own decisions."

Reality: While some children may need more time or guidance, most children with IDD can learn to make choices, especially with proper support and encouragement. Starting with small decisions, like picking out clothes or choosing a meal, can build their confidence and decision-making skills over time.



Myth: "My child is too dependent on me to be independent."

Reality: Children with IDD may appear highly dependent, but with consistent encouragement and training, they can learn to do many things independently. Start by offering small opportunities for independence in daily routines.

Myth: "My child will be overwhelmed by choices."

Reality: It's essential to introduce choices gradually and in a structured way. Limiting options at first (e.g., offering two choices instead of many) can help them feel less overwhelmed and more in control of their decisions.

Likely Challenges & Their Solutions

While encouraging self-determination, parents may face particular challenges. Below are some common difficulties and solutions to help guide the process:

Challenge: Difficulty Communicating Choices

Solution: When offering choices, use visual aids or simple, clear language. For example, showing pictures of two meal options or using communication boards can help children better understand their choices.

Challenge: Fear of Failure or Making Wrong Decisions

Solution: Allow your child to experience small, safe failures. It's a natural part of learning and helps build resilience. Reinforce the idea that making mistakes is okay, and focus on teaching problem-solving skills to correct those mistakes.

Challenge: Resistance to Change or New Routines

Solution: Introduce changes gradually. Explain why changes are happening and provide a predictable structure. Encourage your child to make the new routine, which will help them feel more involved and less anxious about the change.

Challenge: Lack of Confidence in Their Abilities

Solution: Celebrate small wins and progress. Positive reinforcement and encouragement can significantly boost your child's confidence. Offer praise when your child successfully makes a choice or completes a task independently.

Challenge: Involving Others in Your Child's Self-Determination Journey

Solution: Engage with educators, therapists, and family members to create a support network that encourages decision-making and independence. Consistency across all environments helps your child feel more secure and capable.

Step-by-Step Guide to Building Self-Determination Skills

Helping your child with Intellectual and Developmental Disabilities (IDD) become independent takes time and practice. Here's a simple, step-by-step guide to teach them to make decisions and feel confident about their choices.

1. Start with Simple Choices

Why it's important: Making small choices helps children feel confident and learn decision-making.

How to do it:

Offer two simple choices at a time, like choosing between two outfits or two snacks.

Keep it accessible, and praise them for making a choice.

Example: Let your child decide whether to wear a blue or red shirt and celebrate their decision!

2. Teach Problem-Solving

Why it's important: Problem-solving helps children handle challenges on their own.

How to do it:

Give them simple problems to solve, like fixing a toy or packing their school bag.

Ask questions like, "What can we do about this?" to help them find solutions.

Example: If a toy breaks, ask your child if it can be fixed or if they want to replace it.

3. Increase Responsibility Gradually

Why it's important: Giving your child more responsibility helps them feel independent.

How to do it:

Start with small daily tasks, like setting the table or choosing their clothes.

Slowly increase responsibilities, like letting them plan a family activity.

Example: Ask your child to pick their clothes for the day. Later, you can let them choose a family outing.

4. Encourage Social Interaction

Why it's important: Social interactions build confidence and communication skills.

How to do it:

Encourage your child to greet others or ask simple questions.

Let them choose social activities, like which park to visit or who to invite.

Example: Let your child greet a neighbour or decide which friend to invite for a playdate.

5. Support Independent Travel

Why it's important: Learning to travel independently gives children freedom and confidence.

How to do it:

Start with short, supervised walks around the neighbourhood.

Teach them about safety, like looking both ways before crossing the street.

Example: Let your child walk to a nearby park while you follow at a safe distance.

6. Set Long-Term Goals Together

Why it's important: Setting goals helps children understand how to plan and achieve something over time.

How to do it:

Help your child set small goals, like learning a new skill or saving money for a toy.

Break the goal into small steps, and celebrate each achievement.

Example: If your child wants to learn to swim, make a plan and celebrate each step, such as floating or swimming a short distance.

7. Teach Self-Advocacy

Why it's important: Self-advocacy helps your child speak up for their needs and make decisions.

How to do it:

Teach them to express their needs with phrases like "I would like..." or "I need help with..."

Role-play situations where they need to ask for help, like talking to a teacher or a friend.

Example: Practice with your child on how to ask their teacher for extra time on an assignment.

8. Encourage Positive Feedback

Why it's important: Positive feedback helps your child stay motivated and confident.

How to do it:

Celebrate small wins when they make decisions or solve problems.

Use rewards or verbal praise to reinforce positive behaviour.

Example: After your child makes a choice, say, "Great job choosing what to wear today! You're getting so independent!"

Teaching self-determination to your child is a slow process, but every small step counts. Start with simple choices, gradually increase responsibilities, and always encourage them. By guiding them through each step, you'll help your child grow confident and independent, ready to make their own decisions and take charge of their life.

How Manovikas Supports Self-Determination

manovikas comprehensive rehabilitation & research centre IEP No.

Individual Education Plan **व्यक्तिगत शिक्षण योजना** **IEP**

REASON FOR DEVELOPING THE IEP **आई ई पी विक्रम का उद्देश्य**

☐ Student identified as exceptional after assessment
छात्र को असाधारण माना गया है कि कारण बताएं

☐ Student not formally identified but requires special education program services, including alternative learning expectations and/or accommodations.
छात्र को औपचारिक तरीके से नहीं जाना था कि उसे विशेष शिक्षण की जरूरत है

STUDENT PROFILE **छात्रों की जानकारी**

Name / नाम: _____ Gender / लिंग: _____ Date of Birth / जन्म तिथि: _____

School / विद्यालय: _____ Class Teacher / शिक्षक: _____

Current Grade/ Special Class / कक्षा: _____ School Year / वर्ष: _____

Exceptionality / विशेषता: _____

ASSESSMENT DATA / मूल्यांकन
List relevant educational, medical health (hearing, vision, physical, neurological), psychological, speech/language, occupational, physiotherapy and behavioral assessments.

Information Source / स्रोत	Date / तिथि	Summary of Results / परिणाम

STUDENT'S STRENGTHS AND NEEDS / छात्रों की योग्यताएं और जरूरतें

Areas of Strength / योग्यताएं	Area of Need / जरूरतें

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At Manovikas, we have helped thousands of IDD students learn to make decisions. *Here's how we do it:*

Changes in Education

In 2000, we began working to ensure that students with disabilities had the right to attend mainstream schools. We helped change how Individualised Education Plans (IEPs) were made, ensuring that teaching methods and assessments were tailored to the student's needs. This allowed the students to have a say in their education, which helped them integrate into regular schools.



By 2009, our ideas were included in the Right to Education (RTE) Act, ensuring that all students, including those with IDD, could learn together in the same classrooms.

Independent Living: A New Approach



In 2004, we launched a Residential and Respite Care project in Delhi, supported by the National Trust. At first, we had difficulty understanding the residents' needs and ensuring they were happy with their care.

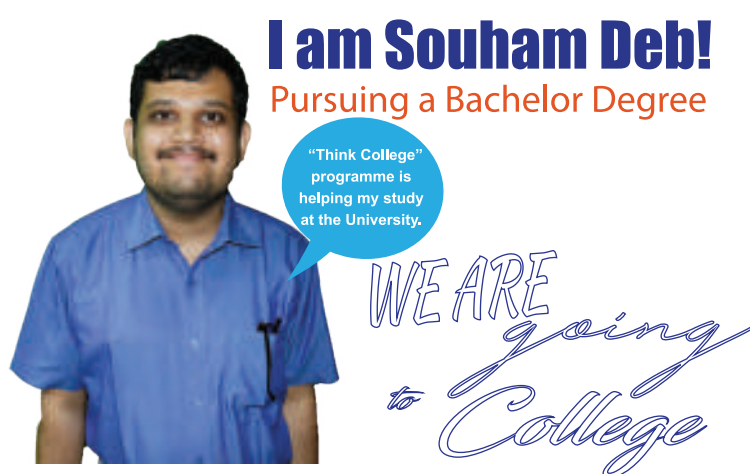
To improve this, we created a new model based on Independent Living. This allowed our residents to live more freely by attending school, getting jobs, and participating in the community. They could visit parks, temples, and shops just like everyone else, which made them feel more connected to society.



Empowerment Through Education and Jobs



We also started a Community College for Persons with Intellectual Disabilities, and our first group of students graduated in 2013. We worked hard to ensure their rights to education and employment, and in 2016, the RPD Act granted a 1% reservation for people with IDD in education and jobs.



We launched the "Think College!" initiative to take this further. This program focuses on inclusive higher education for students with IDD. So far, we have partnered with **five universities** and over **38 colleges** in India. More than **302 students** with IDD are now part of higher education programs. We have also trained over **1,000 faculty members** to support and include students with IDD.

Through education and job opportunities, we empower IDD students to learn, grow, and build a better future.



Teaching Self-Determination



In 2013, we introduced workshops called 'Make My Choice' to help students with IDD learn how to make their own decisions. The first level, 'Listen to Me', showed parents that their children could decide for themselves when given options.

Since then, we have held over **250 workshops, training more than 5,000 individuals with IDD in THREE levels:**

Empowering Training on Well-Being

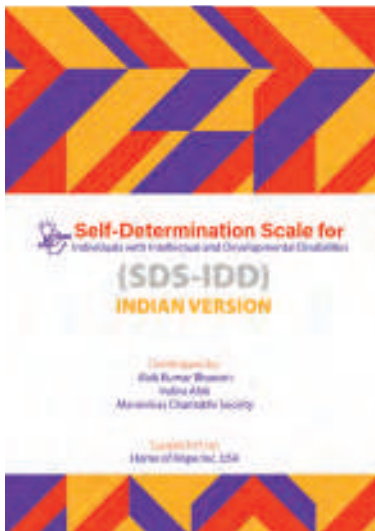


As part of our Teaching Self-Determination program, we introduced Well-Being Training for individuals with Intellectual and Developmental Disabilities (IDD), including Autism, Intellectual Disability, and Cerebral Palsy.

This training helped participants improve their **mental, emotional, and physical health**. They also learned to make decisions about their well-being and engage in activities that promote **self-care and independence**.

By focusing on well-being, this workshop empowered individuals to advocate for their needs, build confidence, and take charge of their lives.

Self-Determination Scale and Online Assessment



In 2016, we developed the Self-Determination Scale to measure how well individuals with Intellectual and Developmental Disabilities (IDD) can make decisions and advocate for themselves. The scale focuses on 12 key areas: understanding strengths and weaknesses, setting goals, communicating effectively, and knowing their rights.

The scale includes 25 questions that help teachers, parents, or caregivers assess a student's level of self-determination. Based on the results, personalised training programs can be developed to improve decision-making, goal-setting, and self-advocacy skills. The scale categorises the level as:

1. Low Self-Determination (1-40)
2. Moderate Self-Determination (41-80)
3. High Self-Determination (81-120)



To make this process easier, we launched an **online portal where you can take the Self-Determination Assessment:**

Go to the Link: <https://manovikasfamily.org/sdsidd/> or Scan the QR Code and Log in to Start Assessment:

After submitting your responses to the 25 questions, the portal generates a detailed report, providing recommendations on areas where additional support is needed. It also gives personalised suggestions to help you improve your self-determination skills.



This tool is here to help you interpret the findings and develop a plan to enhance self-determination for yourself or your child.

Building a Community of Self-Advocates:

Manbhavan Mitra Mandali



MEMORANDUM OF ASSOCIATION OF MANBHAVAN SELF ADVOCACY GROUP

ARTICLE I

Section A: Name of the Society

The name of the society shall be
MANBHAVAN SELF ADVOCACY GROUP.

Section B: Registered Office

The Society shall be operational Nationwide, and its Registered Office of the Society shall be located in the Union Territory of Delhi. The current address is:

C/o Manovikas Charitable Society,
60A, Radhey Puri Extension – I,
Swami Dayanand Marg, Delhi 110051.

ARTICLE II

Section A: Mission

The MANBHAVAN SELF ADVOCACY GROUP's mission is to foster an inclusive society where individuals with intellectual and developmental disabilities (IDD) are valued, participate in decisions, and have equal access to opportunities.

Tanya Bhutani
President

Harish Vij
Vice President

Khushboo
Secretary

1

During the COVID-19 pandemic, we created a self-advocacy group called Manbhavan Mitra Mandali. This group was formed to provide a space where individuals with Intellectual and Developmental Disabilities (IDD) could support each other, share experiences, and address personal and family challenges.

The group meets monthly, and each meeting is carefully planned. Agendas are circulated in easy-to-read formats, ensuring that all members understand the topics and goals for the meeting. These meetings cover various topics, including self-care, advocacy, and daily problem-solving.

So far, 31 self-advocates are actively involved in these meetings. They have created a supportive community where they can raise their voices and advocate for their rights. The group plans to form its organisation to continue advocating for the rights of people with IDD, empowering each member to take charge of their life and future.

Nothing About Us Without Us

Self-Advocacy Group "Manbhavan Mitra Mandali", Friendship Circle of Manovikas

Let's Speak up!

Join@ <https://manovikasfamily.org/gyanshala/self-advocacy/>

What You Can Do as Parents:

You can help your child become more independent by



Letting Them Make Simple Choices: Let your child decide what to wear or eat. Small decisions build confidence.

Encouraging Social Interaction: Allow your child to talk to others, even if it's just a simple greeting. This helps develop social skills.

Planning Outings Together: Ask your child where they want to go on family outings. Let them be part of the decision-making process.

Supporting Independent Travel: Start with short trips around the neighbourhood and build their confidence to travel alone.

Exploring Job Opportunities: Help your child find a part-time job to learn responsibility and independence.

Take the First Step!



Self-determination is the key to your child's future. By giving them the freedom to make decisions and encouraging independence, you are helping them become more confident, independent, and ready to advocate for themselves.

Let's start today—give your child the chance to make choices and watch them grow!

मनोविकास की एक अनोखी पहल:

अपने बच्चे को उनके द्वारा स्वयं निर्णय [Self-Determination/स्वनिर्णय] लेने के लिए सशक्त बनाना:

स्वनिर्णय [Self-Determination] क्या है?

स्वनिर्णय (Self-Determination) का मतलब है कि आप अपने बच्चे को उनके जीवन से जुड़े फैसले लेने के लिए प्रोत्साहन दें, बौद्धिक और विकासात्मक दिव्यांगजन के लिए, इसका मतलब हो सकता है कि उन्हें यह चुनने का मौका दें, कि वे क्या खाना चाहते हैं? या क्या पहनना चाहते हैं? इसके साथ ही, बड़े फैसलों जैसे- उनके भविष्य से जुड़े निर्णय भी वे खुद ले सकें।

स्वनिर्णय क्यों महत्वपूर्ण है?

आत्मविश्वास बढ़ता है: जब आपका बच्चा अपने फैसले खुद करता है, तो वह ज्यादा आत्मविश्वासी और स्वतंत्र महसूस करता है।

सामाजिक कौशल में सुधार होता है: जो बच्चे खुद निर्णय लेते हैं, वे दूसरों के साथ बेहतर तरीके से बातचीत कर सकते हैं और समाज का हिस्सा बन सकते हैं।

सेल्फ एडवोकेट बनने में मदद मिलती है: आपका बच्चा अपनी ज़रूरतों और इच्छाओं को व्यक्त करना सीखता है, जिससे उसे एक संतुष्ट और खुशहाल जीवन जीने में मदद मिलती है।

मनोविकास स्वनिर्णय को कैसे बढ़ावा देता है

मनोविकास में, हमने हजारों IDD छात्रों को सिखाया है कि वे खुद निर्णय कैसे ले सकते हैं? आइए जानते हैं कि हम यह कैसे करते हैं।

शिक्षा में बदलाव

2000 में, हमने यह सुनिश्चित करने के लिए काम शुरू किया कि दिव्यांगता से जूझ रहे छात्र- छात्राओं को मुख्यधारा के स्कूलों में पढ़ने का अधिकार मिले। हमने व्यक्तिगत शैक्षिक योजना (IEP) को इस तरह बदला कि पढ़ाई और परीक्षाओं को छात्रों की ज़रूरतों के हिसाब से ढाला जा सके। इससे छात्रों को अपनी शिक्षा में योगदान देने का मौका मिला, और वे धीरे-धीरे नियमित स्कूलों में शामिल हो सके।

2009 तक, हमारी सिफारिशों को शिक्षा का अधिकार (RTE) अधिनियम में शामिल कर लिया गया, जिससे यह सुनिश्चित हुआ कि सभी छात्र, जिनमें IDD वाले बच्चे भी शामिल हैं, एक साथ कक्षा में पढ़ सकें।

स्वतंत्र जीवन जीने की एक नई शुरुआत

नेशनल ट्रस्ट के सहयोग से 2004 में, मनोविकास द्वारा दिल्ली में रेजिडेंशियल और रिस्पाइट (राहत) देखभाल परियोजना को शुरू किया गया। शुरुआत में हमें इस रेजिडेंशियल और रिस्पाइट केयर में रह रहे सहभागियों की ज़रूरतों को समझने में दिक्कत हुई और यह सुनिश्चित करना कठिन था कि वे अपनी देखभाल से संतुष्ट हैं या नहीं। इसे सुधारने के लिए, हमने स्वतंत्र जीवन (Independent Living) पर आधारित एक नया मॉडल बनाया। उसने हमारे सहभागियों को ज्यादा स्वतंत्रता से जीने में मदद की। जिससे वे स्कूल जा सके, नौकरी कर सके, और समाज में भाग ले सकें। वे पार्क, मंदिर, दुकानों आदि में जाकर समाज से जुड़कर ज्यादा खुशी महसूस करने लगे और स्वयं को समाज का हिस्सा समझने लगे।

<https://sites.google.com/manovikas.family/hostel/>

शिक्षा और नौकरियों के ज़रिए सशक्तिकरण:-

हमने बौद्धिक और विकासात्मक दिव्यांगजनों के लिए एक कम्युनिटी कॉलेज भी शुरू किया। हमारे पहले बैच के छात्र 2013 में पास हुए साथ ही उनकी शिक्षा और नौकरी के अधिकारों के लिए वकालत की, 2016 में RPD अधिनियम के तहत IDD वाले लोगों को शिक्षा और नौकरियों में 1% आरक्षण मिला।

हमने इसे आगे बढ़ाने के लिए "थिंक कॉलेज!" परियोजना की पहल की। यह कार्यक्रम IDD वाले छात्रों के लिए समावेशी उच्च शिक्षा पर केंद्रित है। अब तक, हमने भारत में **पाँच विश्वविद्यालयों** और **38 से अधिक कॉलेजों** के साथ भागीदारी की है। **302 से अधिक IDD वाले छात्र अब उच्च शिक्षा कार्यक्रमों का हिस्सा हैं।** हमने IDD वाले छात्रों को सहयोग करने के लिए और उन्हें उच्च शिक्षा में शामिल करने के लिए **1,000 से अधिक संकाय सदस्यों (Faculty Members)** को भी प्रशिक्षित किया है।

हम IDD छात्रों को शिक्षा और नौकरी के अवसरों के माध्यम से सीखने, बढ़ने और बेहतर भविष्य बनाने के लिए सशक्त बनाते हैं।

स्वनिर्णय लेने के लिए सिखाना

2013 में, हमने “**अपनी पसंद बनाना**” (मेक माय चॉइस/Make my Choice) नाम की कार्यशाला शुरू की, ताकि IDD वाले छात्र-छात्राओं को खुद फैसले लेना सिखाया जा सके। इसका पहला स्तर ‘मुझे सुनो’ (Listen to Me) था, जिसने माता-पिता को यह दिखाया कि जब बच्चों को विकल्प दिए जाते हैं, तो वे खुद फैसले ले सकते हैं। तब से, हमने **250 से अधिक कार्यशालाएं** आयोजित की हैं, जिसमें **5000 से अधिक IDD व्यक्तियों** को तीन स्तरों में प्रशिक्षित किया गया।

स्तर 1: मुझे सुनो (Listen to Me)

स्तर 2: अपनी पसंद का करियर चुनना (My Career Choice)

स्तर 3: स्वयं के लिये वकालत करना (Self Advocacy)

स्वनिर्णय के लिए प्रशिक्षण: आपका हालचाल वेल-बीइंग (Well-Being) महत्वपूर्ण है

हमारे स्वनिर्णय सिखाने के कार्यक्रम के हिस्से के रूप में, हमने बौद्धिक और विकासात्मक दिव्यांगजन (IDD) के लिए ‘**आपका हालचाल महत्वपूर्ण है (वेल-बीइंग (Well-Being)) पर प्रशिक्षण**’ शुरू किया, जिसमें ऑटिज्म, बौद्धिक अक्षमता और सेरेब्रल पाल्सी आदि सभी दिव्यांगता की स्थिति वाले लोग शामिल होते हैं।

इस प्रशिक्षण से प्रतिभागियों के शारीरिक, मानसिक, और भावनात्मक स्वास्थ्य में सुधार लाने में मदद मिल रही है। उन्होंने यह भी सीखा कि अपने हित के बारे में फैसले कैसे लें और ऐसी गतिविधियों में भाग लें जो स्वयं के देखभाल और स्वतंत्रता को बढ़ावा दें।

इस कार्यशाला ने उनके हित और कल्याण के लिए और अपने अधिकारों के लिए आवाज़ उठाने, आत्मविश्वास बढ़ाने, और अपने जीवन की जिम्मेदारी लेने के लिए सशक्त किया।

स्वनिर्णय लेने का पैमाना निश्चित करना [Self-Determination Scale]

2016 में, हमने IDD वाले व्यक्तियों के लिए Self-Determination Scale (स्वनिर्णय का पैमाना) विकसित किया ताकि उनकी निर्णय लेने और खुद के लिए वकालत करने की क्षमता मापी जा सके। इसमें 12 प्रमुख प्रकार के डोमेन शामिल हैं, जैसे अपनी ताकत और कमजोरियों को समझना, प्रभावी संवाद करना, लक्ष्य निर्धारित करना और अपने अधिकारों को जानना, आदि।

यह पैमाना **25 प्रश्नों** पर आधारित है, जिससे शिक्षकों, माता-पिता या देखभाल करने वालों को छात्र की स्वनिर्णय क्षमता का आकलन करने में मदद मिलती है। इस पैमाने के आधार पर **Self-Determination के स्तर को तीन भागों में बांटा गया है:**

1. सामान्य स्वनिर्णय की क्षमता
2. मध्यम स्वनिर्णय की क्षमता
3. उच्च स्वनिर्णय की क्षमता

इस प्रक्रिया को आसान बनाने के लिए, हमने एक ऑनलाइन पोर्टल लॉन्च किया है जहाँ आप आत्मनिर्णय मूल्यांकन ले सकते हैं:

<https://manovikasfamily.org/sdsidd/>

<https://bit.ly/sds-idd>

25 प्रश्नों के उत्तर देने पर, पोर्टल एक विस्तृत रिपोर्ट तैयार करता है, जिसमें उन क्षेत्रों पर सिफारिशें की जाती हैं जहाँ अतिरिक्त सहायता की आवश्यकता है। यह आपके आत्मनिर्णय कौशल को बेहतर बनाने में आपकी मदद करने के लिए व्यक्तिगत सुझाव भी देता है।

परिणामों के आधार पर, हम व्यक्तिगत प्रशिक्षण कार्यक्रम बना सकते हैं ताकि निर्णय लेने, लक्ष्य निर्धारित करने और सेल्फ एडवोकेट (स्वयं के लिए वकालत करना) आदि बनने की क्षमता में सुधार किया जा सके।

सेल्फ एडवोकेसी [स्वयं के लिए वकालत करने वालों का समूह बनाना]

COVID-19 महामारी के दौरान, हमने “**मनभावन मित्र मंडली**” नाम का एक सेल्फ एडवोकेसी समूह बनाया। यह समूह हर महीने मिलकर एक-दूसरे का सहयोग करते हैं, अपनी और परिवार की समस्याओं को सुलझाते हैं, और अपने अनुभव साझा करते हैं। अब तक **31 सेल्फ एडवोकेट** इस समूह में सक्रिय रूप से भाग ले रहे हैं, और वे IDD वाले लोगों के अधिकारों के लिए वकालत करने के लिए **अपनी खुद की संस्था ‘मनभावन मित्र मंडली’ बना चुके हैं।**

समूह हर महीने मीटिंग करता है, और प्रत्येक बैठक की योजना बनाई जाती है। एजेंडा को आसानी से पढ़े जाने वाले प्रारूपों में दिया जाता है, ताकि यह सुनिश्चित हो सके कि सभी सदस्य बैठक के विषयों और लक्ष्यों को समझें। इन बैठकों में स्व-देखभाल, वकालत और दैनिक समस्या-समाधान सहित विभिन्न विषयों को शामिल किया जाता है।

माता-पिता, अभिभावक या केयर टेकर के रूप में आप क्या कर सकते हैं:

आपके बच्चे को आत्मनिर्भर बनाने में आपकी बहुत बड़ी भूमिका हो सकती है:

उन्हें छोटे-छोटे निर्णय लेने के लिए उत्साहित करें: अपने बच्चे को यह निर्णय लेने दें कि वह क्या पहनेगा या क्या खाएगा। छोटे फैसले आत्मविश्वास बढ़ाते हैं।

सामाजिक मेलजोल को प्रोत्साहित करें: अपने बच्चे को दूसरों से बात करने का मौका दें, चाहे वह सिर्फ एक साधारण 'नमस्ते' ही क्यों न हो। इससे उनके सामाजिक कौशल में सुधार होता है।

साथ में घूमने की योजना बनाना: अपने बच्चे से पूछें कि वे पारिवारिक सैर पर कहाँ जाना चाहते हैं। उन्हें निर्णय लेने की प्रक्रिया का हिस्सा बनने दें।

अपने आप यात्रा के लिए सहयोग करें: आस-पड़ोस या आसपास छोटी यात्राओं से शुरुआत करें और अकेले यात्रा करने के लिए उनका आत्मविश्वास बढ़ाएं।

नौकरी के अवसर तलाशना: अपने बच्चे को जिम्मेदारी और स्वतंत्रता सीखने के लिए अंशकालिक नौकरी खोजने में मदद करें।

पहला कदम उठाएं!

स्वनिर्णय आपके बच्चे के भविष्य की कुंजी है। जब आप उन्हें अपने फैसले लेने का मौका देते हैं और स्वतंत्रता की ओर बढ़ने के लिए प्रोत्साहित करते हैं, तो आप उन्हें अधिक आत्मविश्वासी, स्वतंत्र और अपने लिए वकालत करने के लिए तैयार करते हैं।

आइए आज से शुरुआत करें—अपने बच्चे को चुनाव करने का विकल्प दें और उन्हें बढ़ते हुए देखें!





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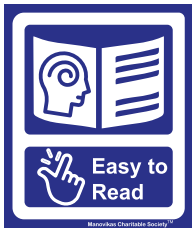
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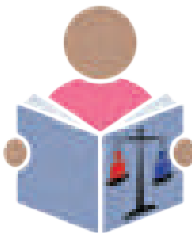
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has participated as a Presenter in the

**National Seminar on
Reasonable Accommodation for
Person with Intellectual and Developmental
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6th of April 2024

Date

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Development and Validation of a Culturally Relevant Self-Determination Scale for adults with Intellectual and Developmental Disabilities in India

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Abstract

Background:

Self-determination is a fundamental component influencing autonomy, well-being, and societal participation among individuals with intellectual and developmental disabilities (IDD). However, in India, the absence of culturally adapted and psychometrically validated tools poses significant barriers to accurately assessing self-determination capacities and supporting person-centred interventions.

Objective:

This study aimed to develop and validate the Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD), an assessment tool tailored to the Indian sociocultural context.

Methods:

Following a rigorous multi-phase process, the SDS-IDD was developed through literature review, expert panel consultations, and focus group discussions involving stakeholders, including adults with IDD, caregivers, and special educators. A sample of 100 adults with mild to moderate intellectual and developmental disabilities (IDD) from urban and semi-urban regions of India was recruited for field testing. Psychometric evaluation included assessments of internal consistency using

Cronbach's alpha, test-retest reliability over a two-week interval, and construct validity through exploratory factor analysis (EFA).

Results:

The SDS-IDD demonstrated high internal consistency (Cronbach's $\alpha = 0.86$) and strong test-retest reliability ($r = 0.82$, $p < 0.001$). Factor analysis revealed a robust three-factor structure encompassing Autonomy, Goal-Setting, and Self-Advocacy domains, explaining 68.7% of the total variance. Convergent validity was supported by moderate positive correlations with adapted versions of The Arc's Self-Determination Scale.

Conclusion:

The SDS-IDD emerges as a culturally sensitive, reliable, and valid instrument for measuring self-determination among Indian adults with IDD. Its application holds significant potential for enhancing individualised support planning, program evaluation, and disability policy development in India. Future research should focus on broader regional adaptations and longitudinal validation to strengthen its utility across diverse Indian contexts.

Keywords

Self-Determination, Intellectual and Developmental Disabilities (IDD), Scale Development, Cultural Adaptation, Psychometric Validation, Autonomy, Self-Advocacy, Disability Assessment, India

Highlights

- Developed the culturally adapted Self-Determination Scale for Indian adults with IDD.
- Conducted psychometric validation with 100 adults across urban and semi-urban regions.
- SDS-IDD showed high internal consistency ($\alpha = 0.86$) and strong test-retest reliability ($r = 0.82$).
- Factor analysis revealed three core domains: Autonomy, Goal-Setting, and Self-Advocacy.
- SDS-IDD enables culturally sensitive assessment for planning supports and policy formulation.

1. Introduction

Self-determination, encompassing the ability to make informed decisions, set personal goals, and regulate one's life, is increasingly recognised as a vital component of quality of life for individuals with intellectual and developmental disabilities (IDD). Research consistently demonstrates that higher levels of self-determination among individuals with intellectual and developmental disabilities (IDD) are associated with improved educational attainment, better employment outcomes, increased independent living, and enhanced mental health (Wehmeyer & Schalock, 2001; Shogren et al., 2015). Self-determination is not only an educational or rehabilitative goal but a fundamental human right, underscored by international mandates such as the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD, 2006).

Despite the growing emphasis on self-determination globally, culturally sensitive measurement tools remain scarce, particularly in

non-Western, collectivist societies such as India. Internationally recognised instruments such as The Arc's Self-Determination Scale (Wehmeyer, 1995) and the AIR Self-Determination Scale (Wolman et al., 1994) were developed in Western contexts. These instruments embed assumptions about autonomy and decision-making that may not fully align with the Indian sociocultural fabric, where family-centred decision-making, interdependence, and hierarchical social structures play significant roles. Consequently, direct adoption of these tools may lead to inaccurate assessments or misinterpretation of self-determination capacities among Indian adults with IDD.

India's unique socio-demographic diversity, encompassing regional, linguistic, and socio-economic differences, further complicates the application of standardised international measures. Moreover, legal frameworks such as the Rights of Persons with Disabilities (RPwD) Act, 2016, and initiatives under the National Education Policy (NEP) 2020 emphasise the need for inclusive practices, autonomy, and empowerment of individuals with disabilities. However, the meaningful implementation of these rights-based frameworks requires reliable and culturally appropriate assessment tools to monitor, support, and enhance self-determination outcomes.

Existing self-determination assessments face critical challenges when applied in the Indian context. These include linguistic complexity that is unsuitable for varying literacy levels, concepts of independence that may conflict with familial expectations, and cognitive demands that exceed the abilities of individuals with mild to moderate intellectual and developmental disabilities (IDD). Furthermore, tools heavily reliant on self-report formats may disadvantage individuals with communication difficulties, which are common within the IDD population. These limitations necessitate the development of an indigenous tool that reflects the lived realities, aspirations, and social structures of Indian adults with IDD.

Recognising this gap, the present study sought to develop and validate the Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD). The SDS-IDD was designed to capture critical domains of self-determination—Autonomy, Goal-Setting, and Self-Advocacy—through culturally relevant language, scenarios, and normative frameworks. It aims to facilitate individualised support planning, enable person-centred interventions, and inform broader disability inclusion policies within India.

The development process of the SDS-IDD was guided by the Functional Model of Self-Determination (Wehmeyer, 1999), which conceptualises self-determined behaviour as a set of volitional, goal-directed actions that enable individuals to act as causal agents in their lives. This model, emphasising autonomy, self-regulation, psychological empowerment, and self-realisation, offers a robust framework adaptable across cultural contexts. However, adaptation required contextualising domains to reflect Indian familial structures, community participation patterns, and decision-making dynamics.

This research involved a systematic, multi-phase process beginning with a literature review and expert consultations to define culturally appropriate domains and items. Focus group discussions with adults with intellectual and developmental disabilities (IDD), caregivers, and special educators ensured linguistic simplicity, relevance, and comprehensibility. Subsequent field testing with 100 adults across urban and semi-urban settings evaluated the psychometric properties of the scale, including internal consistency, test-retest reliability, and construct validity through exploratory factor analysis.

The findings from this study significantly contribute to disability research in India by providing a psychometrically validated, culturally responsive tool. The SDS-IDD provides a framework for professionals to accurately assess self-determination levels, design targeted interventions, and monitor

individual and systemic progress toward achieving autonomy and inclusion. Furthermore, it supports the broader goals of the RPwD Act and UNCRPD by promoting assessment practices that respect cultural contexts and individual aspirations.

In addition to filling a critical measurement gap, the SDS-IDD fosters a paradigm shift toward recognising adults with IDD as autonomous individuals capable of exercising choice and control over their lives. This shift is fundamental to dismantling paternalistic care models and advancing the rights-based, person-centred approach to disability services and policy in India.

Thus, the present paper details the development, validation, and implications of the Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD), advancing both the scientific and practical frontiers of disability assessment and intervention within the Indian context.

2. Materials and Methods

2.1 Study Design

This study employed a cross-sectional, tool-development and validation design, incorporating both qualitative and quantitative methodologies. The primary aim was to develop a culturally relevant, psychometrically validated Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) tailored to the Indian sociocultural context.

2.2 Instrument Development Process

2.2.1 Item Generation

Initial items for the SDS-IDD were generated through an extensive review of existing literature on self-determination theory (Wehmeyer, 1999; Deci & Ryan, 2000), analysis of international scales such as The Arc's Self-Determination Scale and AIR Self-Determination Scale, and consultations with subject-matter experts. Focus group discussions (FGDs) with adults with IDD, caregivers, and special educators helped refine items for cultural and linguistic appropriateness.

2.2.2 Content Validation

An expert panel comprising five specialists in special education, clinical psychology, and disability studies reviewed the initial 40-item pool. Items were evaluated for clarity, cultural relevance, and developmental appropriateness. Based on their feedback, redundant and ambiguous items were removed, resulting in a 30-item draft scale organised under three domains: Autonomy, Goal-Setting, and Self-Advocacy.

2.3 Participants

2.3.1 Inclusion Criteria

- Adults aged 14–35 years
- Clinical diagnosis of mild to moderate intellectual and developmental disabilities
- Ability to provide informed assent, with consent from guardians as necessary
- Basic communication abilities (verbal or alternative modes)

Table 1: Participant Demographic Characteristics

Characteristic	Category	Frequency (n)	Percentage (%)
Age (years)	14–25	58	58%
	26–35	42	42%
Gender	Male	58	58%
	Female	42	42%
Severity of IDD	Mild IDD	63	63%
	Moderate IDD	37	37%
Region	Urban	61	61%
	Semi-Urban	39	39%

Describes the age distribution, gender, severity of intellectual and developmental

disability (IDD), and regional background of the study participants (N = 100).

2.3.2 Sampling and Recruitment

A purposive sample of 100 adults with intellectual and developmental disabilities (IDD) was recruited from vocational training centres, inclusive educational settings, and community-based rehabilitation

programs across urban and semi-urban regions in North and West India. Sampling focused on ensuring diversity in gender, socio-economic background, and educational experiences.

2.4 Ethical Considerations

The study received ethical approval from the Institutional Research Ethics Committee. Informed consent was obtained from participants' legal guardians, and participant assent was sought using accessible communication formats. Confidentiality, voluntary participation, and the right to withdraw were ensured throughout the study.

2.5 Data Collection Procedure

Participants individually completed the SDS-IDD in a structured interview format, which accommodated varied literacy levels. For individuals requiring assistance, trained facilitators familiar with disability communication protocols conducted the administration using visual supports, simplified language, and clarifications as needed.

A subset of 40 participants was re-administered the SDS-IDD two weeks later to assess test-retest reliability.

2.6 Psychometric Evaluation

2.6.1 Internal Consistency Reliability

The internal consistency of the SDS-IDD was assessed using Cronbach's alpha coefficients, both for the full scale and its domains. A value of $\alpha \geq 0.70$ was considered acceptable.

2.6.2 Test-Retest Reliability

Test-retest reliability was evaluated using Pearson's correlation coefficient between scores from the initial administration and the two-week follow-up administration.

2.6.3 Construct Validity

Exploratory factor analysis (EFA) was conducted using Principal Component Analysis (PCA) with varimax rotation to examine the underlying factor structure. The Kaiser-Meyer-Olkin (KMO) measure and

Bartlett's test of sphericity were used to verify sampling adequacy and the suitability of the data for factor analysis.

2.6.4 Convergent Validity

Convergent validity was assessed by correlating the SDS-IDD scores with adapted scores from The Arc's Self-Determination Scale, using Pearson's correlation analysis.

3. Results

3.1 Participant Characteristics

The final sample consisted of 100 adults with intellectual and developmental disabilities (IDD), aged between 14 and 35 years (Mean age = 26.4 years; SD = 4.9).

- **Gender distribution:** 58% male and 42% female.
- **Geographical representation:** Participants were drawn from both urban (61%) and semi-urban (39%) regions in North and West India.
- **Functional profiles:** 63% were classified as having mild IDD, and 37% as moderate IDD based on clinical assessments.

3.2 Internal Consistency Reliability

The Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) demonstrated strong internal consistency.

- **Overall Cronbach's alpha:** 0.86, indicating excellent internal consistency.
- **Domain-wise reliability:**
 - Autonomy domain: $\alpha = 0.84$
 - Goal-Setting domain: $\alpha = 0.81$
 - Self-Advocacy domain: $\alpha = 0.79$

All values exceeded the acceptable threshold ($\alpha \geq 0.70$), supporting the scale's internal consistency.

3.3 Test-Retest Reliability

A subset of 40 participants was reassessed after two weeks to determine temporal stability.

- **Test-retest correlation coefficient:** $r = 0.82$ ($p < 0.001$), indicating strong test-retest reliability and suggesting that the SDS-IDD yields stable results over time.

3.4 Construct Validity: Exploratory Factor Analysis (EFA)

EFA was conducted to explore the underlying factor structure of the SDS-IDD.

- **Kaiser-Meyer-Olkin (KMO) measure:** 0.82, indicating meritorious sampling adequacy.
 - **Bartlett's Test of Sphericity:** $\chi^2 (435) = 1987.45$, $p < 0.001$, confirming the appropriateness of factor analysis.
- Principal Component Analysis with varimax rotation yielded three factors with

eigenvalues greater than 1.0, collectively accounting for 68.7% of the total variance.

- **Factor 1:** Autonomy (eigenvalue = 5.72; variance explained = 34.2%)
- **Factor 2:** Goal-Setting (eigenvalue = 2.85; variance explained = 19.4%)
- **Factor 3:** Self-Advocacy (eigenvalue 1.62; variance explained = 15.1%)

Item loadings within each factor were above 0.60, indicating strong associations between items and their corresponding domains.

3.5 Convergent Validity

Convergent validity was assessed by correlating SDS-IDD scores with scores from an adapted version of The Arc's Self-Determination Scale.

- **Correlation coefficient:** $r = 0.64$ ($p < 0.001$), indicating a moderate to strong positive relationship and supporting the convergent validity of SDS-IDD.

3.6 Summary of Psychometric Findings

Table 2: SDS-IDD is a psychometrically sound tool

Property	SDS-IDD Result	Interpretation
Internal Consistency (α)	0.86	Excellent
Test-Retest Reliability (r)	0.82	Strong
Total Variance Explained	68.7%	Robust construct
Convergent Validity (r)	0.64	Moderate to strong

These results confirm that the SDS-IDD is a psychometrically sound, culturally

4. Discussion

This study aimed to develop and validate the Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) tailored to the Indian sociocultural context. The findings indicate that the SDS-IDD is a reliable and

appropriate instrument for assessing self-determination among adults with IDD in the Indian context.

valid tool, demonstrating robust psychometric properties across internal consistency, test-retest reliability, construct validity, and convergent validity.

The overall Cronbach's alpha of 0.86 reflects high internal consistency, exceeding the recommended minimum threshold of

0.70 for psychological instruments (Nunnally & Bernstein, 1994). Domain-wise reliability for Autonomy, Goal-Setting, and Self-Advocacy subscales also met acceptable standards, confirming the internal coherence of items within each domain.

Temporal stability was confirmed by a test-retest correlation of $r = 0.82$, indicating that the SDS-IDD reliably measures self-determination over time. These results are consistent with prior validations of international self-determination scales, such as The Arc's Self-Determination Scale (Wehmeyer, 1995), reinforcing the scale's empirical soundness.

Exploratory factor analysis supported construct validity, yielding a clear three-factor solution that explained 68.7% of the total variance. The identified autonomy, Goal-Setting, and Self-Advocacy align closely with theoretical models of self-determination and reflect the contextual adaptations necessary for the Indian setting, where collective decision-making and family involvement are integral aspects of daily life.

Convergent validity, demonstrated through a moderate to strong positive correlation ($r = 0.64$) with an adapted version of The Arc's scale, further strengthens the claim that SDS-IDD effectively captures the construct of self-determination among Indian adults with IDD.

The present study's outcomes emphasise the importance of culturally responsive assessment tools. Western measures often assume individualistic notions of autonomy, which may not translate seamlessly into collectivist societies. The SDS-IDD, by contrast, integrates culturally relevant scenarios, accessible language, and contextually appropriate constructs, offering a more accurate reflection of self-determination capacities within the Indian sociocultural milieu.

From a practical perspective, the SDS-IDD offers valuable implications for individualised educational planning, vocational training, community-based rehabilitation, and disability-inclusive policymaking. It can serve as a foundational assessment to identify individual strengths and areas for intervention and to design programs that foster autonomy, self-advocacy, and goal-directed behaviour.

Limitations of the study include the restriction of the sample to urban and semi-urban areas of North and West India, which may limit generalizability across India's broader regional and linguistic diversity. Additionally, individuals with severe or profound IDD were omitted, suggesting a need for adapted versions of the SDS-IDD to cater to varying levels of support needs. Future research should focus on longitudinal validation, broader regional adaptations, and testing with diverse populations with disabilities.

5. Conclusion

The Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD) represents a significant contribution to disability assessment practice in India. Developed through culturally responsive methodologies and validated through rigorous statistical analyses, the SDS-IDD provides a reliable, valid, and contextually appropriate measure of self-determination for adults with intellectual and developmental disabilities (IDD).

By capturing the domains of Autonomy, Goal-Setting, and Self-Advocacy within the Indian sociocultural framework, the SDS-IDD addresses critical gaps in assessment tools available for this population. Its application can inform individualised supports, empower adults with IDD to lead more autonomous lives, and contribute to

the realisation of disability rights as enshrined in the Rights of Persons with Disabilities (RPwD) Act, 2016 and the UNCRPD.

Future research should focus on extending validation efforts across diverse regions of India, developing simplified versions for individuals with non-verbal or severe disabilities, and exploring the longitudinal impacts of interventions using the SDS-IDD. Ultimately, widespread adoption of culturally relevant tools like the SDS-IDD can play a transformative role in advancing autonomy, dignity, and meaningful inclusion for adults with intellectual and developmental disabilities in India.

6. Acknowledgements

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7. Conflict of Interest

The authors declare that there are no conflicts of interest related to the research, authorship, and/or publication of this article.

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Barriers and Enablers of Self-Advocacy among Indian Adults with Intellectual and Developmental Disabilities: A Mixed-Methods Inquiry

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Abstract

Self-advocacy—being able to state one's preferences, make one's own decisions, and direct the course of one's life—is a pillar of autonomy and democratic citizenship. For Indian adults with intellectual and developmental disabilities (IDD), the practice of self-advocacy is frequently limited by deeply rooted sociocultural norms, institutionalised barriers, and uneven access to inclusive schooling and support services. In this study, we examine the diverse barriers and enablers that condition self-advocacy in this group through a mixed-methods approach that blends quantitative measurements and qualitative inquiry.

A culturally adapted Self-Determination Scale for Individuals with Intellectual and Developmental Disability (SDS-IDD) was constructed and tested across 100 linguistically and regionally diverse Indian adults. Participants also underwent a systematic Self-Advocacy Curriculum to establish decision-making skills, communication, rights awareness, and goal-setting. Quantitative pre- and post-intervention data reflected statistically significant improvements in self-determination across all subscales ($p < 0.01$), with a substantial gain in the 21–30 years group. Simultaneously, qualitative data obtained through interviews and

observation identified enablers in terms of support by family, peer interaction, inclusive pedagogy, and culturally adapted teaching strategies. This underscores the urgent need for culturally adapted tools in the field of special education.

The results underscore the essential significance of contextualising self-advocacy interventions in the sociocultural environment of India and validate the potential of adults with IDD to develop autonomy if equipped with adequate tools and support. This study provides a basis for policy, educational practice, and further studies to enhance the dignity, rights, and inclusion of individuals with intellectual and developmental disabilities in India, instilling a sense of hope and optimism in the audience.

Keywords: Self-advocacy, Intellectual and Developmental Disabilities (IDD), Autonomy, Inclusive Education, India, Disability Rights, Self-Determination, Cultural Context, Mixed-Methods Research, Empowerment

1. Introduction

The appreciation of self-advocacy as a fundamental element of human rights and individualised growth has become increasingly prominent in disability

discourse. For people with intellectual and developmental disabilities (IDD), self-advocacy is more than a simple expression—it is the right to be engaged in making decisions that direct their lives, ranging from day-to-day options to future goals. Even though disability policy in India, such as the Rights of Persons with Disabilities (RPWD) Act (2016), asserts autonomy and inclusive involvement explicitly, there exists a continuing disjunction between legislative abstraction and everyday practice. This disjunction is particularly evident in the lives of adults with IDD, where the rights and autonomy guaranteed by the law often do not translate into real-life decision-making power and opportunities.

In the Indian scenario, sociocultural forces significantly shape self-advocacy, especially in collectivist family settings where caregivers or elders enjoy authority in decision-making roles. Linguistic differences, disparities in economic status, a lack of comprehensive education opportunities, and shortages of well-trained support staff complicate the application of self-determination principles to this population. Current assessment procedures and intervention models, which were initially developed in Western settings, fail to reflect these complexity-laden realities and are, therefore, poorly adapted for purposeful application in India.

To address this critical shortfall, the current study uses a mixed-methods approach to explore the barriers and facilitators of self-advocacy in Indian adults with IDD. Pivotal to this study is creating and using the Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD)—a culturally sensitive assessment tool—and a modular Self-Advocacy Curriculum to support autonomy, communication, and decision-making.

This study attempts to illuminate both enabling opportunities and structures of constraint through the combination of quantitative results and deep, qualitative accounts. It aligns with the growing body of literature calling for rights-oriented, contextualised interventions that prioritise the voices, autonomy, and potential of people with IDD in India.

2. Literature Review

The principle of self-advocacy as a critical aspect of disability rights, autonomy, and inclusion discourse was developed on the foundations of self-determination theory. As we define it, self-advocacy encompasses the ability to recognise and articulate individual needs, make decisions, and invoke rights across life settings. For individuals with intellectual and developmental disabilities (IDD), self-advocacy is both a developmental skill and a powerful tool for social inclusion and dignity.

2.1 Global Views of Self-Advocacy and Self-Determination

The Wehmeyer (1999) Functional Model of Self-Determination outlines autonomy, psychological empowerment, self-regulation, and self-realisation as key areas for self-determined behaviour. Western empirical studies show that people scoring high on self-determination perform better in employment, schooling, and living independently (Wehmeyer & Palmer, 2003; Carter et al., 2009). These models, however, are predominantly based on individualistic paradigms and may lack applicability in a collectivist society like India.

2.2 Indian Legal and Educational Context

India's legislative system, including the Rights of Persons with Disabilities Act (RPWD), 2016, and the National Education Policy (NEP), 2020, champions inclusive education and enshrines the right of people with disabilities to live in dignity and exercise independent choice. Nevertheless,

in the face of enlightened legislative imperatives, uneven application exists. Reports identify the unavailability of systematic programming and assessment instruments, particularly for adult populations of IDD in India, especially those beyond the schooling system.

2.3 Barriers to Self-Advocacy in India

Sociocultural norms pose a significant challenge. Indian family systems tend to appropriate decision-making roles for people with IDD, resulting in overprotection and a lack of agency. Further, language diversification, poverty, restricted availability of services, and stigma altogether restrict advocacy opportunities. Empirical examination of these dynamics and validation of indigenous assessment models of self-determination are rare in Indian studies.

2.4 Facilitators and Models of Intervention

International literature also promotes role-play, visual aids, goal-setting exercises, and peer mentoring as successful methods for teaching advocacy skills. Variations of these strategies in small-scale Indian programs are reported as promising yet lack systematic validation. Literature also emphasises family involvement, culturally responsive pedagogy, and community-based implementation as crucial for successful outcomes.

2.5 Research Gap

Despite policy acknowledgement, the convergence of culture, disability, and self-advocacy is underdeveloped in Indian scholarship. A critical need exists for instruments and curricula that are both psychometrically sound and culturally relevant. Here, that need is met by placing international frameworks in Indian contexts and empirically testing a dual model of

intervention—an Indigenous self-determination scale and a systematic self-advocacy course.

Methodology

3.1 Research Design

This study adopted a mixed-methods approach to investigating the barriers and facilitators of self-advocacy among Indian adults with intellectual and developmental disabilities (IDD). By combining quantitative and qualitative techniques, the research aimed to capture measurable outcomes and contextual depth. A pre-and post-intervention framework was implemented to evaluate the impact of a newly developed Self-Advocacy Curriculum in conjunction with the culturally adapted Self-Determination Scale for Individuals with Intellectual and Developmental Disabilities (SDS-IDD).

3.2. Participants and Sampling

A purposive sample of 100 adults aged 18 to 35 with mild to moderate IDD was selected from vocational training centres and inclusive educational institutions in northern and western India. Participants were chosen based on their ability to engage in structured learning and complete assessments. Informed consent was obtained from either the participants themselves or their legal guardians. Individuals with profound disabilities were excluded due to communication needs that required alternative research designs.

3.3. Instruments and Tools

Self-Determination Scale for IDD (SDS-IDD): This tool, developed specifically for the study, measured levels of autonomy, empowerment, and self-advocacy. The scale employed simplified language, culturally resonant examples, and flexible responses such as verbal answers, pictures, or gestures.

Self-Advocacy Curriculum: This

Self-Advocacy Curriculum: This structured six-module curriculum covers identity, communication, rights, decision-making, seeking support, and personal planning. It uses interactive teaching methods, including role-playing, visual aids, and real-life scenarios, to ensure accessibility and engagement.

Qualitative Instruments: Data were gathered through semi-structured interviews with participants and caregivers, structured observation checklists, and detailed facilitator notes. Reliability of the scale was evaluated using Cronbach's alpha.

Qualitative Analysis: Interview transcripts and observational data were thematically coded using NVivo. Codes were grouped into key themes representing the main barriers and enablers of self-advocacy. This comprehensive, multi-dimensional methodology allowed for a robust assessment of the intervention's effectiveness while shedding light on the broader social and cultural factors shaping self-advocacy outcomes in the Indian context.

4. Results and Findings

4.1 Quantitative Results

The Self-Determination Scale for Individuals with Intellectual and Developmental Disability (SDS-IDD) was given pre- and post-intervention to 80 individuals completing the self-advocacy program. Statistical analysis indicated a significant gain in every domain.

A. Autonomy: Mean pre-test score = 18.2; post-test = 22.5 ($t = 4.23$, $p < 0.01$)

B. Empowerment: Mean pre-test = 16.1; post-test = 20.3 ($t = 3.87$, $p < 0.01$)

C. Self-Advocacy: Mean pre-test = 13.6; post-test = 18.7 ($t = 5.12$, $p < 0.01$)

D. Overall Score: Increased from 67.9 to 78.4 ($t = 6.94$, $p < 0.001$)

These outcomes validate the efficacy of the curriculum in improving participants' skills in expressing needs, making decisions, and taking self-initiated actions.

Participation by Level of Self-Determination After Intervention

A. High: 28%

B. Moderate: 72%

C. Low: 0%

Regional Variations (Mean SDS-IDD Scores)

A. East India: 80.4

B. North India: 74.2

C. South India: 69.8

D. West India: 64.6

($F(3,96) = 7.12$, $p < 0.01$)

The most significant gains were made in the 21–30-year-old group, indicating this as a critical window of developmental opportunity for self-advocacy interventions.

4.2 Qualitative Results

A range of barriers and facilitators was derived through a thematic interview and observation data analysis that influenced participants' self-advocacy skills.

Barriers:

A. Family Overprotection: Participants' caregivers frequently made decisions for them, precluding opportunities for autonomy performance.

B. Limitations of Communication: Participants with restricted expressive abilities could not state preferences, even with better comprehension.

C. Stigma and Social Norms: Prevalent cultural norms discouraged individual expression, particularly among women.

D. Inadequate Institutional Support: Variable application of inclusive practices and restricted facilitator training limited the curriculum uptake.

Enablers:

- A. Peer Support Networks:** Group environments fostered social learning and confidence-building.
- B. Inclusive Pedagogies:** Cultural examples, role-playing, and visual aids enabled comprehension and engagement.
- C. Family Involvement:** Increased caregiver participation in sessions enhanced skill translation to everyday life.
- D. Employment and Education:** Participants with previous vocational experience or formal education scored higher, suggesting the reinforcing effect of structured environments.

These results underscore the dual significance of one-to-one instruction and systemic change. Although participants made quantifiable gains, lasting change demands consistent support, accessible communication tools, and policies that validate the rights and abilities of individuals with IDD.

5. Discussion

The results of this research underscore the potential for the transformation of self-advocacy interventions among Indian adult participants with intellectual and developmental disabilities (IDD). Through a mixed-methods design, it was clear that systemic, cultural, and individual barriers are deeply ingrained, yet significant autonomy and agency gains are possible through systematic, context-sensitive interventions.

5.1 Self-Advocacy As A Desirable Developmental Goal

The statistically significant gains in all sectors of the SDS-IDD post-intervention substantiate the hypothesis that IDD individuals can increase self-determination if given accessible and culturally sensitive curricula. The most important gains were

made in the self-advocacy category, which implies that skill-building in communication and awareness of rights is responsive to systematic pedagogies. These results reinforce world literature on the efficacy of self-determination training but translate that wisdom to the Indian socio-cultural environment where family collective decision-making and protective caregiving tend to quash individual agency.

5.2. Socio-Cultural Mediation of Autonomy

Regional differences in post-intervention performance, especially the superior performance in Eastern India, can be attributed to differential access, social attitudes, and organisational readiness. The absence of gender-based differences implies that the design of the curriculum is neutral, though qualitative data point toward the presence of enduring social norms discouraging assertiveness, especially among women. This underlines the need to ensure that future interventions are built upon gender-sensitive and culture-based strategies.

5.3 Support Network and Institutional Inclusion Roles

Peer support and caregiver involvement were strong enablers of self-advocacy. These social dynamics offered support environments to express and practice skills, confirming that empowerment is as much a social co-construction as it is individual. At the same time, the lack of appropriately trained facilitators and inclusive organisational practices were commonplace deterrents—again indicating a systemic need for change in adult disability services, vocational rehabilitation, and lifelong learning.

5.4 Implications for Practice and Policy

The results of this study empirically justify the inclusion of self-advocacy training in adult disability programs in India. Successful execution of the SDS-IDD and curriculum model provides a template for scalable, culturally appropriate tools that can be replicated in different language, cognitive, and geographical contexts. Further, the study adds to the current policy debate surrounding the implementation of the RPWD Act by recommending that autonomy and inclusion can be enacted through focused, evidence-based programs.

6. Recommendations

For Practitioners and Educators:

A. Incorporate the self-advocacy curriculum into adult education, vocational training, and community-based rehabilitation programs.

B. Utilise the SDS-IDD tool as a developmental tracker to tailor instruction to individual levels of autonomy.

C. Offer professional development opportunities for facilitators focused on culturally responsive and inclusive teaching strategies.

For Policymakers:

A. Institutionalise self-determination training through existing national schemes such as the National Trust Act and the Deendayal Disabled Rehabilitation Scheme (DDRS).

B. Support regional adaptations of the curriculum to accommodate linguistic and cultural diversity.

C. Allocate funding for assistive technologies and communication support systems specifically designed for adults with IDD.

For Future Research:

A. Conduct longitudinal studies to assess the sustained impact of self-advocacy training on employment, independent living, and community participation.

B. Broaden research samples to include underrepresented regions, gender groups, and individuals with profound disabilities.

C. Explore digital delivery formats to scale the curriculum and enhance its reach and accessibility across diverse contexts.

7. Conclusion

Self-advocacy is both a developmental necessity and a fundamental human right. For adults with intellectual and developmental disabilities (IDD), the capacity to express needs, make decisions, and assert preferences is essential for achieving autonomy, dignity, and full participation in society. This study provides robust empirical evidence that, with the support of culturally relevant and structured interventions, Indian adults with IDD can significantly enhance their self-determination and advocacy competencies. Through the application of the Self-Determination Scale for IDD (SDS-IDD) and a modular Self-Advocacy Curriculum, the research demonstrated that self-advocacy is not only teachable but highly impactful—even in the face of entrenched social, linguistic, and institutional barriers. Participants exhibited measurable confidence, communication, autonomy, empowerment, and goal-setting gains. The findings reinforce that effective self-advocacy initiatives must be rooted in individuals' lived experiences, cultural values, and social networks.

They also signal the urgent need for systemic transformation, which involves translating inclusive policies into practice through educator training, community engagement, and curriculum development. Looking ahead, future efforts should prioritise the development of scalable, accessible delivery models, particularly those integrating digital technologies. Further exploration is also needed to understand long-term outcomes and to adapt strategies for individuals with higher support needs.

This study offers a replicable, rights-based framework for empowering adults with IDD in India to become active agents in shaping their lives—a pivotal step toward achieving inclusive citizenship and social justice.

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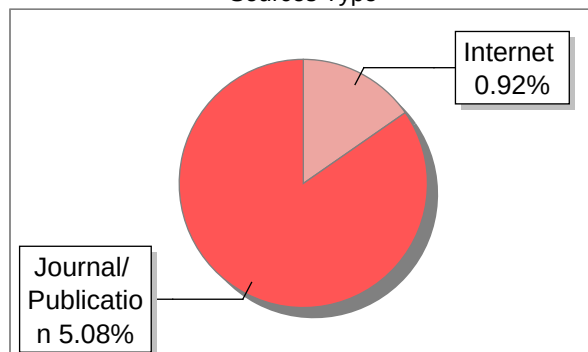
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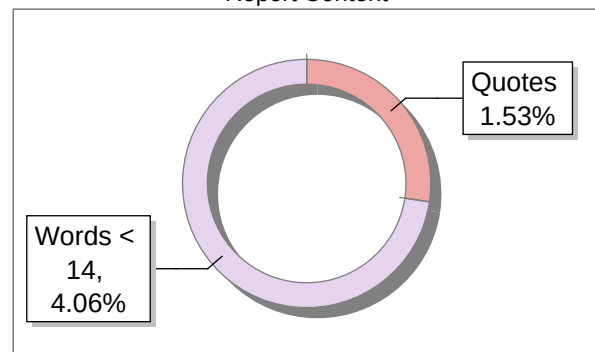
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