

THE EFFECTS OF A SELF-ADVOCACY INTERVENTION ON THE
PERFORMANCE OF HIGH SCHOOL STUDENTS WITH LEARNING
DISABILITIES WHEN REQUESTING ACADEMIC ACCOMMODATIONS

by

Dwannal Wade McGahee
A Dissertation
Submitted to the
Graduate Faculty
of
George Mason University
in Partial Fulfillment of
The Requirements for the Degree
of
Doctor of Philosophy
Education

Committee:

_____ Chair

_____ Program Director

_____ Dean, College of Education and Human
Development

Date: _____ Fall Semester 2017
George Mason University
Fairfax, VA

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Doctor of Philosophy at George Mason University

by

Dwannal Wade McGahee
Master of Arts
Trinity University, 2009
Master of Arts
Marymount University, 2002
Bachelor of Science
Florida A&M University, 1987

Director: Margaret King-Sears, Professor
College of Education and Human Development

Fall Semester 2017
George Mason University
Fairfax, VA



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Dedication

I dedicate this dissertation to my sons, Lamar, Tevin, and Tevon. You are the reasons why I do this work. I hope one day that my efforts inspire you to pursue your dreams.

This dissertation is also dedicated in memory of:

Dr. Roosevelt Martin Johnson

Brigette Matilda Simmons Hilton

Bobby Byrd

Latrese Dionne Williams

Acknowledgements

There are so many people to acknowledge who have supported me on my journey to complete my Ph.D. I would like to thank God for leading me down the path that He wanted me to follow and for giving me the courage to listen to His voice. I would like to acknowledge my parents who taught me at a very early age that I could do all things through Christ. You placed a high value on education. I hope that you are proud that all of your children are college graduates. I would like to thank Dr. Amy Brereton for seeing my potential when I didn't see it myself and for encouraging me to pursue a Ph.D. I will continue to see the potential in my students and encourage and support them to obtain higher levels of education and opportunities that they may have not considered for themselves.

My family deserves a trip around the world! I would like to thank Ron for supporting my educational pursuits for the last 17 years. You have been my biggest cheerleader. My sons Lamar, Tevin, and Tevon, are my inspiration and the reason why I do this work. I would like to thank my sister Karen for believing in her big brother. My Aunt Addie has been my closest confidante during this process. Our weekend phone calls, prayers, and encouraging words have been my lifeline during this process. Thanks for listening to my screams, complaints, my hopes, and my dreams. You were right by my side every step of the way as you proclaimed, "I'm getting my Ph.D."

I would like to express my sincerest gratitude to my dissertation committee. First, to my dissertation chairperson, Dr. Peggy King-Sears. Thank you for the high standard you set for all students and your undying belief in me. You have provided opportunities to coauthor a book chapter with you, review manuscripts, and present at regional and national conferences. You have persevered with me during this process, and I really appreciate your support. I would also like to thank Dr. Linn Jorgensen for your support of my research and the opportunity to intern in the Office of Disability Support Services on campus. A big thank you to Dr. Anya Evmenova for your passion and expertise in single-subject research. I appreciate your feedback and suggestions and the time that you invested to prepare me to conduct single-subject research.

I would like to thank Dr. Charles Palmer for granting permission to use the self-advocacy intervention, and Dr. Allison Jones (née Walker) for allowing me to modify the data collection forms used in this study. My sincerest gratitude to the students who participated in this study and their families for their support. You inspire my work in advocacy every day.

I would like to thank my friends Troy, Irma, Mark, Richard, and Jocelyn for your encouragement. I would like to thank my mentor, Dr. Theodore Pikes, for your guidance and support. A special thanks to Larry for the many hours you invested in reading my drafts and giving me feedback. I can never repay the enormous debt of gratitude for each proofread version of my dissertation. I would also like to extend a special thanks to Charles for reminding me that “To whom much is given much is required.” Although I would get annoyed every time you would say those words to me, I realize that you were simply reminding me of the importance of this work that I was entrusted.

I would like to acknowledge my late friend Brigette Hilton for always believing in me and being happy for all of my achievements. You were the first person that I shared my acceptance letter into the Ph.D program. You were calling me doctor before I took my first class. I would also like to acknowledge the late great Dr. Roosevelt Martin Johnson. You were a spiritual dad who always took an interest in my life and my work. My cousins Bobby and Latrese, your spirit has guided me during this process. To Max, my beautiful Labrador Retriever, who would curl up on the floor next to me as I worked on my dissertation, I miss you!

Finally, I would like to thank my fellow doctoral students and now friends, Katina, Kathy, Avé, Pam, Laura, and Shantha. It has been a pleasure and wonderful experience completing classes, presenting at conferences, and completing research projects with you. I definitely plan to stay in touch and continue collaboration in the future.

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List of Abbreviations

Accommodations Planning Training	APT
Air Self-Determination Scale.....	AIR
Americans with Disabilities Act	ADA
Analysis of Covariance	ANCOVA
Analysis of Variance	ANOVA
Arc Self-Determination Scale	ARC
Attention Deficit Disorder	ADD
Behavioral Disorders	BD
Classroom-Based Competency Building Program	CBCBP
College Self-Efficacy Inventory	CSEI
College Students with Disabilities Campus Climate Survey	CSDCC
Computer Assisted Instruction.....	CAI
Educational Planning Assessment	EPA
Emotional and Behavioral Disorders	EBD
Extended School Year.....	ESY
Family Educational Rights and Privacy Act.....	FERPA
Family Education Support	FES
Full Scale Intelligence Quotient.....	IQ
Goal Attainment Scale	GAS
Grade Point Average.....	GPA
IEP Participation Strategy.....	IPARS
Individualized Education Program	IEP
Intellectual Disability.....	ID
Interactive Hypermedia Program	IHP
Interobserver Agreement	IOA
Institutional Review Board	IRB
Learning Disability	LD
Live Instruction.....	LI
McGill Action Planning System	MAPS
No Instruction	NI
Occupational Therapy.....	OT
Office for Civil Rights	OCR
Office of Special Education Programs.....	OSEP
Other Health Impairment	OHI
Opportunity and Exercise of Self-Determination Scale.....	OESDS
Percentage of Nonoverlapping Data	PND
Perceptual Reasoning Index.....	PRI

Processing Speed Index	PSI
Quality of Life Questionnaire	QofLQ
Request Self-Efficacy	REQSE
Rights and Responsibilities: Disability Accommodation Knowledge Survey	RR-DAKS
Self-Advocacy.....	SA
Self-Advocacy CD-ROM.....	SACD
Self-Advocacy Strategy	SAS
Self-Advocacy Conflict Resolution	SACR
Self-Determination Scale	SDS
Self-Determination Skills Evaluation Scale.....	SDSES
Self-Determined Learning Model of Instruction	SDLMI
Single-Subject Research Design	SSRD
Specific Learning Disability	LD
Student Engagement Inventory.....	SEI
Verbal Comprehension Index	VCI
Visual Impairment	VI
Vocational Skills Self-Efficacy Scale.....	VSSS
Wechsler Intelligence Scale for Children – Second Edition.....	WISC
Wechsler Intelligence Scale for Children – Fourth Edition.....	WISC-IV
Whose Future is it Anyway?.....	WFA
Working Memory Index	WMI

Abstract

THE EFFECTS OF A SELF-ADVOCACY INTERVENTION ON THE PERFORMANCE OF HIGH SCHOOL STUDENTS WITH LEARNING DISABILITIES WHEN REQUESTING ACADEMIC ACCOMMODATIONS

Dwannal Wade McGahee, Ph.D.

George Mason University, 2017

Dissertation Director: Dr. Margaret King-Sears

The effects of a self-advocacy intervention on the performance of high school students with learning disabilities (LD) when requesting academic accommodations in a role-play situation were examined. Eligible participants were engaged in a combined single-subject research design study, which included multiple baselines across participants and changing criterion designs. The self-advocacy intervention occurred once a week for 5 to 6 consecutive weeks and consisted of 7 scripted lessons focusing on 1 or more of 17 target behaviors that were taught to the participants during 3 treatment subphases. The intervention occurred at the designated school after school hours or in community settings. The total intervention time for 5 participants across 3 treatment subphases ranged from 167 to 189 minutes for 5 to 6 sessions. The dependent variable in this study was the number of correctly demonstrated targeted behaviors in a role-play

situation. Visual analysis and percentage of nonoverlapping data (PND) were used to evaluate the effectiveness of the self-advocacy intervention.

The results from this study indicate evidence of high effectiveness and a functional relation between the self-advocacy intervention and an increase in the participants' performance while requesting academic accommodations in a role-play situation. Participants were able to generalize 4 different accommodation requests with 2 school-based personnel 1 week after withdrawal of intervention. Results demonstrate that participants also maintained self-advocacy skills 2 weeks after being taught and demonstrating mastery. Social validity data indicate that the effects of the self-advocacy intervention were socially important. Implications for practitioners and researchers are discussed as well as opportunities for future research.

Chapter One: Introduction

In this chapter, an overview of the characteristics of students with specific learning disabilities (LD) from elementary to high school is presented. Next, a statement of the problem is discussed, including barriers that prevent students with LD from developing self-advocacy skills while in high school. The background of the problem detailing challenges that students with LD face as they transition from high school to postsecondary settings is also presented. Finally, the purpose of the study, the research questions, and definitions of frequently used terms in this study are provided.

Characteristics of Students with Learning Disabilities

The Individuals with Disabilities Education Improvement Act (IDEIA, 2004) defines a student with a specific LD as having “a disorder in one or more basic psychological processes involved in understanding or in using language, spoken or written, that may manifest itself in the imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations” (Section 300.7[c][10]). Students receiving special education support services for LD often experience problems in one or several cognitive processes, such as perception (Mammarella & Pazzaglia, 2010; Mercer & Pullen, 2009), attention (Obrzut & Mahoney, 2011; Screeivasa & Jha, 2007), memory (Berninger et al., 2010; Swanson et al., 2011), processing speed (Donlam, 2007; Geary, Hoard, & Bailey, 2012; Vukovic & Siegel, 2006), social competence (Lane & Menzies,

2010; Milligan, Phillips, & Morgan, 2016), or metacognition (Kyndt, Cascallar, & Dochy, 2012; Rosenzweig, Krawec, & Montague, 2011). Students demonstrating cognitive disabilities may display low academic achievement (Fletcher, Lyon, Fuchs, & Barnes, 2007) or exhibit difficulty performing immediate verbal and visual working memory tasks (Kyndt et al., 2012; Masoura, 2006). Students may also experience academic deficits in expressive or receptive language (Backenson et al., 2015; Berninger & O'Malley May, 2011; Flanagan, Ortiz, Alfonso, & Dynda, 2006), phonological processing (Klingner, Vaughn, & Boardman, 2015; Steele & Watkins, 2010; Torgesen, 2000), and accessing previously learned material (Berninger, 2006; Morin & Franks, 2010; Swanson & Jerman, 2006; Swanson, Zheng, & Jerman, 2009).

Students with LD are a complex heterogeneous population who vary in presentation, intervention needs, and functional outcomes, and exhibit an extensive range of LD characteristics (Backenson et al., 2015; Heward, 2013). Students with LD do not all possess the same profile of strengths and needs. For example, one student with LD may experience significant difficulties performing basic math calculations, while another student with LD may not experience any difficulty performing basic math calculations, but may have significant deficits in reading and written expression.

Characteristics of students in elementary and middle school. During the elementary school years, a discrepancy between ability and achievement emerges in students with LD (McDevitt, Ormrod, Cupit, Chandler, & Aloa, 2012; Ormrod, 2014). These students seem to have strengths similar to those of their nondisabled peers in several areas, but their rate of learning is unexpectedly slower (McDevitt et al., 2012;

Ormrod, 2014). For example, a student with LD in elementary school may be able to follow directions, remember routines, and play age-appropriate games similar to his or her nondisabled peers, but may have difficulty reading accurately, learning new vocabulary words, or speaking in full sentences. In addition, during the elementary years, students with LD exhibit poor attention and motor skills and often have trouble acquiring one or more basic skills.

As students with LD reach the upper elementary grades, they may also develop emotional problems such as emotional distress, low academic self-concept, anxiety, and depression, due at least partly to frustration with repeated academic failures (McDevitt et al., 2012; Ormrod, 2014; Sundheim & Voeller, 2004). For example, take into account a student with LD who has difficulty with spatial organization and poor motor skills and who consistently turns in written assignments below the skill level of students his age. The student with LD has struggled often with the untidy appearance of his work and has been teased by his peers and admonished by his teachers for the quality of his work. After consistently receiving negative feedback, the student may begin to feel badly about his abilities and have negative thoughts about school. The student eventually becomes restless and inattentive in class, and begins to complain that school is boring. The student's restlessness and inattention could indicate anxiety and frustration experienced as a result of his learning difficulties.

During the middle school years, students with LD may continue to experience difficulty with handwriting and tend to avoid writing assignments (National Center for Learning Disabilities [NCLD], 2015). For example, a student with LD in middle school

may demonstrate reverse letter sequencing and be slow to learn prefixes, suffixes, root words, and other spelling strategies (e.g., phonemic awareness and spelling patterns). In addition, students with LD in middle school may avoid reading aloud, demonstrate difficulty solving word problems, display slow or poor recall of facts, have difficulty making friends, and have trouble understanding body language and facial expressions (NCLD, 2015). By no means do these characteristics describe all students with LD. For instance, many students with LD are attentive in class and work diligently on assignments, and some are socially skillful and popular with peers (Heward, 2013).

Characteristics of students in high school. By the time students with LD reach high school, they are typically the lowest achievers, performing below the 10th percentile in reading, written language, and math (Heward, 2013). Similarly, as in elementary school, students with LD in high school are particularly susceptible to emotional problems (McDevitt et al., 2012; Ormrod, 2014). In addition to dealing with the usual emotional issues of adolescence (e.g., peer pressure and dating), high school students with LD are prone to anxiety, depression, low self-esteem, and loneliness as they deal with more stringent academic demands (Ormrod, 2014). Learning in high school is highly dependent on reading and learning from textbooks, but the average high school student with LD reads at a third- to fifth-grade level and has few, if any, effective study strategies (McDevitt et al., 2012; Ormrod, 2014).

According to the National Center for Learning Disabilities (NCLD, 2015), students with LD can achieve at high levels if they receive specialized instruction tailored to their individual needs. While in high school, students with LD receive specialized

instruction that continues to focus on their specific learning disability. For example, students with LD who have deficits in decoding and word recognition may receive specialized instruction in phonological awareness and phonics (Berninger & Wolf, 2009; Calhoun, Sandow, & Hunter, 2010; Torgesen, Wagner, Rashotte, Herron, & Lindamood, 2010). Similarly, students identified as having specific LD in computation and problem solving may receive specialized instruction in conceptual knowledge while they practice problem solving and computational skills (Mercer & Mercer, 2010; Mercer & Pullen, 2009; Miller, Stringfellow, Kaffar, Ferreira, & Manel, 2011).

Meanwhile, students with LD have the capacity to learn and accommodations are noted on their individualized education program (IEP), such as use of a calculator, preferential seating, reduced distractions, or extended time on class assignments and examinations. For example, students with LD who have long-term retrieval deficits may learn information adequately, but exhibit difficulty efficiently recalling information for future use (Mather & Jaffe, 2016). An accommodation for students with LD who have long-term retrieval deficits is the use of a calculator during math computation in order to compensate for lack of recall of math facts (Mather & Jaffe, 2016).

Students with LD who have short-term memory deficits experience difficulty holding information in immediate mental awareness (Mather & Jaffe, 2016). This deficit often manifests in the inability to follow oral directions, take notes, and retain or understand information presented in a lecture format. Accommodations for students with LD with short-term memory deficits are preferential seating and reduced distractions in order to optimize attention (Mather & Jaffe, 2016). Students with LD with processing

speed deficits complete work at a slow rate on simple or routine tasks that are typically automatic in nature (Mather & Jaffe, 2016). Processing speed deficits affect one's ability to copy, complete academic assignments in a timely manner, take notes with speed and accuracy, and express oneself quickly and efficiently. One accommodation for students with LD with processing speed deficits is extended time on class assignments and examinations (Mather & Jaffe, 2016).

In regards to accommodations on the IEP, students are unaware of what their accommodations are and why they have them (Downing, Earles-Vollrath, & Schreiner, 2007). General education teachers are made aware of students' accommodations via the school's information system. However, teachers often do not know what specific accommodations mean. Students who are unaware of their accommodations and the reasons they have them will not self-advocate for their accommodations. In addition, teachers who do not know what the accommodations are will not be able to provide them.

Due to the complex nature of learning disabilities, students with LD may have difficulty self-advocating in the general education classroom and beyond. According to Cortiella and Horowitz (2014), students with LD earn lower grades and experience higher rates of course failure than their nondisabled peers. One third of students with LD have been retained in a grade at least once (Cortiella & Horowitz, 2014). Even so, 68% of students with LD leave high school with a regular diploma, while 19% drop out and 12% receive a certificate of completion (Cortiella & Horowitz, 2014). In addition to the complex nature of having LD and the many issues that students with LD face, they are

also spending more of their school day in the general education classroom where they are expected to self-advocate.

Statement of the Problem

High school students with LD are educated in general education classroom settings at increasing rates (Cortiella & Horowitz, 2014). According to data from the NCLD (Cortiella & Horowitz, 2014), 66% of students with LD spend 80% or more of the school day in general education classrooms, which is a 47% increase from a decade ago. General education teachers are responsible for ensuring that students with disabilities have access to the general education curriculum by providing the accommodations specified in their IEP. However, general education teachers are unaware of their students' accommodations. Therefore, students with LD need to be able to inform teachers of their accommodations and must develop self-advocacy skills as a result. Self-advocacy skills are not only important for the school years, but are critical lifelong skills because students who can self-advocate are more likely to attend college, be more independent, have better employment opportunities, and experience a higher quality of life (Stang, Carter, Lane, & Pierson, 2009).

Furthermore, researchers have found that high school students with disabilities are apprehensive about asking for accommodations in the general education classroom because they have not been taught how to clearly explain their disability to their teachers (Hatch, Shelton, & Monk, 2009). Students with LD must understand their needs and learning styles and be able to describe them when asking for accommodations (NCLD, 2015). Students with LD can have a direct impact on their learning by self-advocating for

accommodations (Hatch et al., 2009). Therefore, it is important that students with LD learn self-advocacy skills and request their accommodations in the general education classroom.

Self-Advocacy

Self-advocacy is defined as the ability to speak on one's own behalf and explain one's disability, personal needs, and interests in a clear and concise manner (Kallio & Owens, 2004; Kotzer & Margalit, 2007). In order for students with LD to be effective self-advocates in the general education classroom and beyond, they must: (a) have an accurate understanding of their disability (Cawthon & Cole, 2010; Lightner, Kipps-Vaughan, Schulte, & Trice, 2012; White, Summers, Zhang, & Renault, 2014); (b) know their rights under the law (Cawthon & Cole, 2010; Lightner et al., 2012; Lombardi, Murray, & Gerdes, 2011; White et al., 2014); (c) know their personal strengths, areas of need, and abilities (Cawthon & Cole, 2010; Lightner et al., 2012; White et al., 2014); (d) be aware of the services or accommodations that they need (Cawthon & Cole, 2010; Lightner et al., 2012; Milsom & Hartley, 2005; White et al., 2014); (e) understand the importance of standing up for what they need in relation to their disability (Cawthon & Cole, 2010; Lightner et al., 2012; Test, Aspel, & Everson, 2006; White et al., 2014); and (f) communicate effectively the services or products needed (Cawthon & Cole, 2010; Lightner et al., 2012; White et al., 2014).

Self-advocacy is empowering because it builds self-confidence in students' ability to learn, creates a sense of ownership over their learning, and enables them to find solutions to challenges with which they are presented (Goodley, 2005). Instead of feeling

powerless and dependent on others, they are prepared to take on life's challenges. Self-advocacy is a vital skill for students with LD because those who know how to self-advocate can state and negotiate their individualized needs across settings, including educational, employment, vocational, medical, and social (Stuntzner & Hartley, 2015). For example, students with LD who can effectively self-advocate can explain to their friends why they need extra time on class assignments. In addition, an employee with LD who understands that note taking is a challenge can explain to his or her employer why voice recognition software would assist with note taking during staff meetings.

Self-Determination

Self-advocacy is a component of self-determination. Self-determination is the ability of individuals to exert control over their lives through informed choices and decision making (Berry, Ward, & Caplan, 2012). According to Wehmeyer (2014) individuals are self-determined if they (a) act autonomously, (b) self-regulate their behaviors, (c) initiate and respond to events in an empowered manner, and (d) act consciously with intent. Students who are self-determined and can self-advocate (Trainor, 2002) are more successful in life because they are prepared to face challenges (Test, Fowler, Wood, Brewer, & Eddy, 2005), perform better academically because they are aware of how they learn, are skilled in negotiating and requesting accommodations (Adams & Proctor, 2010; Hatch et al., 2009; Murray, Lombardi, & Kosty, 2014), and participate in class more frequently (Stang et al., 2009).

In order for students with LD to be successful in postsecondary education settings, they must thoroughly understand the nature of their disability, and be explicitly

taught how to self-advocate by requesting their accommodations (Prater, Redman, Anderson, & Gibb, 2014), able to articulate their needs to their teachers, and given the opportunity to practice self-advocacy skills in real-world settings (Test et al., 2005). Pierson, Carter, Lane, and Glaeser (2008) suggested that when students with disabilities have the ability to make good choices, work toward goals they have selected, work through problems, understand and have the ability to communicate their strengths and areas of need, and seek accommodations, they will achieve more and have greater success in school. However, research has suggested that many students with disabilities finish high school without self-advocacy skills (Test et al., 2005; Walker & Test, 2011).

Students with Learning Disabilities Must Understand Their Disability

Before students with LD are explicitly taught how to self-advocate, they must have a good understanding of the nature of their LD, including their strengths and areas of need. Many students with LD leave high school with no knowledge of their disability or what accommodations are necessary for them to be successful (Test et al., 2005). Without this understanding, students with LD will be unable to set realistic goals for themselves or articulate their needs to others (Milsom, Akos, & Thompson, 2004). When students understand their strengths and areas of need, they also need to be made aware of the accommodations that are available to them and outlined in their IEP. In addition, students with LD who do not have a good understanding of the nature of their disability may develop a low self-concept and fall into a pattern of “learned helplessness” (Brown & Leary, 2013; Elbaum & Vaughn, 2003; Valas, 2001; Westwood, 2013).

Learned helplessness is a common problem among students with LD (Brown & Leary, 2013; Valas, 2001; Westwood, 2013). Learned helplessness can be defined as a condition in which a person suffers from a sense of powerlessness, due to persistent failure or traumatic events (Nolen-Hoeksema, Girus, & Seligman, 1986). Researchers who examined learned helplessness behavior in school settings found that students with LD exhibited high levels of learned helplessness (Brown & Leary, 2013; Valas, 2001; Westwood, 2013). It is not surprising that many students with LD develop learned helplessness, given the likelihood that they have experienced countless failures in school and have little control in planning their education (Brown & Leary, 2013; Valas, 2001; Westwood, 2013). Learned helplessness can often lead students with LD to have lower perceptions of their abilities than their nondisabled peers (Brown & Leary, 2013; Valas, 2001; Westwood, 2013).

In a longitudinal study conducted by Higgins, Raskind, Goldberg, and Herman (2002), several successful attributes were identified as having influence on the success of students with LD. One such attribute was self-awareness. Students with LD are more likely to be successful when they have a clear understanding of their disability and the strengths and areas of need related to their disability. Higgins et al. also found that successful people with disabilities are not defined by their disability. These individuals acknowledge they have a disability and develop strategies to overcome those areas of need. As students with LD begin to understand their areas of need, they must be explicitly taught what specific accommodations will help combat their particular challenges (Campbell-Whatley, 2008; Skinner & Lindstrom, 2003; Test et al., 2005).

Self-Advocacy Skills Must be Taught

Test et al. (2005) suggested that for students with LD to self-advocate in the general education classroom, self-advocacy instruction needs to occur and the students need to practice the skills in the same setting. Self-advocacy should be explicitly taught with the same persistence as other subjects that students are required to learn while in school (Campbell-Whatley, 2008). However, only half of high schools implement curricula to teach self-advocacy skills to students with disabilities (Kochhar-Bryant & Izzo, 2006). In addition, Stang et al. (2009) found that although special and general education teachers acknowledged the importance of self-awareness and self-advocacy, these same teachers reported that these skills were the least frequently taught.

Self-Advocacy Skills Must Be Practiced

In addition to practicing self-advocacy skills in the classroom, students with LD should practice self-advocacy skills in all aspects of their education. Roberts, Ju, and Zhang (2016) suggested that skill practice increases the level of student knowledge and skill proficiency. Moreover, following an intervention with skill practice increases the amount of exposure to self-advocacy, thereby leading to greater effects on student learning (Roberts et al., 2016). For example, researchers have recommended that students with disabilities apply their self-advocacy skills within the context of their individualized education program (IEP) meetings, in which a multidisciplinary team discusses the student's educational program and any changes to classification or programming (Field & Hoffman, 2007; Kotzer & Margalit, 2007; Van Reusen & Bos, 1994). IDEIA (2004) provides support for students with disabilities to develop their self-advocacy skills by

requiring that they be given the opportunity to attend and participate in meetings to develop their IEP. By participating in the development of their IEP, students learn that the school plans to support them and consider the reasons behind the recommendations.

Downing et al. (2007) suggested that as early as elementary school, students should be involved in the IEP process so that they can become aware of their IEP goals and work toward achieving them. According to Downing et al., many students who receive special education support services are unaware of what their IEP goals are, do not have a clear understanding of the nature of their disability, do not know their strengths and areas of need, and do not know which strategies work best for them. Consequently, many students are completely uninvolved and have no interest in developing their IEP goals or learning self-advocacy skills.

Downing et al. (2007) found that if self-advocacy skills are embedded and mandated in the school curriculum beginning in elementary school and continuing through high school, students become interested in developing their self-advocacy skills because those skills become realistic and personal. Downing et al. suggested that a student with an IEP should be able to describe the special education services that he or she receives, the content of the IEP, and characteristics associated with his or her disability. In addition, the student should be able to recognize situations that might be challenging due to his or her disability, communicate effectively about the type of support he or she feels would be necessary in a situation where the disability presents challenges, and be able to access appropriate support and resources to address challenges presented by the disability.

The IEP meetings also give students an opportunity to discuss their strengths, interests, talents, needs, and goals, and to include these factors in their IEP. According to IDEIA (2004), the goal is for parents and teachers to work together on behalf of the student to ensure that the student's needs are met. However, many students with LD are left out of the IEP process, are not given the opportunity to develop their self-advocacy through development of the IEP and participation in IEP meetings, and are not knowledgeable about their rights as a student with LD or about the services and accommodations they are eligible to receive. Furthermore, many students with IEPs do not need to disclose their disability to their teachers or staff members because all information is discussed at the students' IEP meeting. After discussing all of the pertinent information with the IEP team members, the IEP is distributed through the school's information system to all of the student's teachers. As a result, the student is not held accountable for disclosing his or her disability or accommodations because the school's data system has already supplied this information to the relevant teachers.

Barriers to Self-Advocacy in High School

There are five major barriers that may prevent students with LD from developing self-advocacy skills while in high school. The first major barrier is the student's ability to communicate and disclose his or her disability (Stuntzner & Hartley, 2015). Communicating one's disability can be intimidating for students with LD. For students with apparent disabilities, such as deafness, visual impairment, and mobility issues, disclosure is more straightforward than for those with hidden disabilities like LD. Most people understand deafness, visual impairments, and mobility issues, and they can

comprehend the need for American Sign Language, Braille, a wheelchair, or a cane. However, LD cannot be seen, and students with LD may not want to disclose their disability to others because they do not want to be perceived as unintelligent or slow (Stuntzner & Hartley, 2015).

The second major barrier for students with LD is the fear that exposing their LD may lead to negative reactions from others (Stuntzner & Hartley, 2015; Waller, 2004). Negative reactions can feel personally invalidating, disempowering, and frightening, especially when they are associated with rejection (Beart, Hardy, & Buchan, 2004; Stuntzner & Hartley, 2015). The third major barrier is that students with LD lack self-advocacy skills and are embarrassed to ask questions in class or seek assistance when they do not understand something (Stuntzner & Hartley, 2015) because they do not want to be perceived by their peers as not being on the same level academically. As a result, many students with LD silently suffer in the general education classroom and fail their classes. Hadley (2006) viewed communication and disclosure of students' LD to teachers and staff members as essential if students with LD are to receive services in high school. McCarthy (2007) explained that self-advocacy and the ability to communicate effectively are crucial to learning and are lifelong skills needed by all students, with or without disabilities, so that their needs can be met.

The fourth major barrier that may prevent students with LD from developing self-advocacy skills are well-intentioned family members and professionals (Stuntzner & Hartley, 2015). Parents, teachers, and school staff working with students with LD may overcompensate for the students' learning deficits by doing too much for them, thereby

inadvertently depriving these students of the opportunity to develop their self-advocacy skills (Gil, 2007; McCarthy, 2007; Stuntzner & Hartley, 2015; Test et al., 2005).

Similarly, parents and other adults may place too much emphasis on the outcome of self-advocacy rather than defining and better supporting social and emotional needs during the transition to becoming self-advocates. As a result, students with LD do not learn how to self-advocate, ask for what they need, provide information and support to back up requests, or handle situations that turn out differently than hoped for (McCarthy, 2007; Stuntzner & Hartley, 2015).

Finally, learning to self-advocate can be overwhelming for students with LD (Stuntzner & Hartley, 2015). Learning to self-advocate takes time, and students approach this process with different levels of personal insight and understanding of their disabilities and needs. Furthermore, some students with LD may not perceive themselves as having a disability, and therefore may not believe that they need to learn how to self-advocate. As a result, they may pass up opportunities to acquire self-advocacy skills until a major event requires it (Stuntzner & Hartley, 2015). Students with LD need to overcome the barriers that prevent them from developing self-advocacy skills in high school because the more skilled they become, the easier it will be for them to self-advocate in postsecondary settings. In addition to the complexity of having LD, the lack of well-developed self-advocacy skills may have a negative impact on their transition from high school to postsecondary settings where they will be expected to self-advocate.

Background of the Problem

The nature of having a specific learning disability means that students with LD face more complex challenges than their nondisabled peers as they transition from high school to postsecondary settings (Connor, 2012; DaDeppo, 2009). Many researchers have identified seven major challenges that students with LD face as they transition from high school to postsecondary settings (Broitman & Davis, 2013; Brown & Leary, 2013; Connor, 2012; DaDeppo, 2009; Denhart, 2008; DuPaul, Pinho, Pollack, Gormley, & Laracy, 2017; Hadley, 2006, 2009; Hardman, Egan, & Drew, 2016; Hong, 2015; Sparks & Lovett, 2009; Westwood, 2013). The seven challenges are: (a) changes in service delivery, (b) time spent on instruction, (c) adapting to the legal framework that governs postsecondary settings, (d) timing of disability disclosure, (e) learned helplessness, (f) social integration, and (g) stigmatization.

The first major challenge that students with LD face as they transition to postsecondary settings is the change in service delivery. In high school, students with LD are entitled to services under IDEIA. According to IDEIA, students with LD have an IEP which outlines goals, objectives, and services specifically related to the needs of the student. There are requirements under IDEIA regarding identification, timelines, and implementation of services; modifications and accommodations; and the participation of the student, teachers, and parents (DaDeppo, 2009; DuPaul et al., 2017). As students transition from high school to postsecondary settings, the responsibility for their educational program shifts from school staff and parents to the students (DaDeppo,

2009). It becomes their responsibility to self-advocate in order to ensure that their needs are met.

The second major challenge that students with LD face as they transition from high school to postsecondary settings is the change in the time spent on instruction in the classroom (DaDeppo, 2009; DuPaul et al., 2017). In high schools, instruction typically takes up 25 to 30 hr per week, whereas in postsecondary courses, instruction is usually 12 to 15 hr per week. Just as the 25 to 30 hr per week of instruction in high school is spread across different courses, the 12 to 15 hr per week in postsecondary settings is distributed across four to five courses. The fewer hours of class time per postsecondary course requires students to spend more time studying independently (DaDeppo, 2009). At the postsecondary level, students are expected to independently: (a) balance personal freedom with the need to set personal goals; (b) work on assignments due in courses throughout the semester; (c) obtain information from various sources, including class notes, texts, and library reference materials; and (d) function autonomously (Broitman & Davis, 2013).

The third major challenge that students with LD face as they transition from high school to postsecondary settings is adapting to and understanding the legal framework that governs postsecondary settings (DaDeppo, 2009; Hardman et al., 2016). The legal framework of rights and responsibilities of postsecondary schools is different from the framework governing secondary schools. When students leave high school, their educational needs are no longer covered under the IDEIA framework, but rather under

the auspices of two civil rights laws. Section 504 of the Rehabilitation Act (1973) states that

no qualified individual with a disability in the United States shall be excluded from, denied the benefits of, or be subjected to discrimination under any program or activity that either receives federal financial assistance or is conducted by any Executive agency or the United States Postal Service.

The Americans with Disabilities Act (ADA, 1990) prohibits discrimination on the basis of disability in employment, state and local government, public accommodations, commercial facilities, transportation, and telecommunications.

While high school students with LD are entitled to specific services and accommodations, postsecondary students with LD are eligible for “reasonable accommodations” according to the ADA. In other words, the system changes for students from one of entitlement to one of eligibility (DaDeppo, 2009). For example, under IDEIA, a high school student with LD is entitled to an IEP which outlines goals, objectives, and services specifically related to the student’s education. The school system is mandated to provide services deemed necessary by the IEP team to assist the student to be successful in the educational environment. The team develops goals and objectives as well as modifications to help the student achieve these goals (DaDeppo, 2009; Hardman et al., 2016). Under Section 504 of the Rehabilitation Act of 1973 and the ADA, a student with LD in postsecondary settings is eligible for appropriate academic adjustments that allow the student access to educational programs.

When a student with LD transitions to the postsecondary setting, he or she no longer has the support of the school staff from high school. Rather than depending on the school staff to ensure appropriate services and accommodations, a student with LD in the postsecondary setting who wishes to receive support services and accommodations must first register with the designated office on campus. This is typically the disability support services office. The student must self-identify as a student with a disability and present documentation of the disability, obtained at his or her expense. The disability support service staff then review the documentation and determine the student's eligibility for accommodations. At the student's request, the disability support service staff prepares letters notifying instructors of the approved accommodations. It is the student's responsibility to present the letters to his or her instructors and advocate for the appropriate accommodations. This shift in the process of acquiring accommodations requires students with LD in postsecondary settings to be self-aware, understand their rights and responsibilities, and possess self-advocacy skills in order to access the services and accommodations available to them (DaDeppo, 2009; Hardman et al., 2016). Such self-advocacy moves students from a pattern of passive dependent behavior to a more active and responsible role (Hadley, 2009).

In addition, the dissemination of information regarding a student's disability is not given freely in postsecondary institutions without written permission from the student due to the federal privacy law known as the Family Educational Rights and Privacy Act (FERPA), which protects the privacy of student education records. The law applies to all schools that receive funds under an applicable program of the United States Department

of Education (U.S. Department of Education, 2014). As a result of this privacy law, students themselves decide if they want to disclose their disability to professors and disability staff members so that they can receive accommodations (Hadley, 2009). Therefore, students with LD need to have a sense and understanding of their own disability and needs so that they can effectively communicate those needs to the disability support service staff in order to receive appropriate accommodations.

The fourth major challenge that students with LD face as they transition from high school to postsecondary settings is the timing of their disability disclosure (Connor, 2012; Hong, 2015). Timing refers to the moment when the student self-identifies as having a disability. Disclosure is broadly understood as the intent to reveal personal information. Students with LD may feel more anxious than their peers without disabilities when interacting with instructors because they are unsure of how that instructor will respond to a request for an accommodation (Hong, 2015). Students often make the mistake of not disclosing their disability to their instructor early in the semester, or they wait and disclose their disability after a problem has occurred (Connor, 2012; Hong, 2015).

The content and timing of disability disclosure in postsecondary settings are important and have implications on outcomes (e.g., how the student is perceived and how the request is handled). For example, consider a situation in which a student with LD takes an exam without appropriate accommodations and receives a failing grade. The student then approaches the instructor and discloses his or her disability and provides the appropriate letter from the disability support services office documenting the need for the

accommodation, thus alerting the instructor for the first time that the student could have accommodations for the exam. In this situation, disclosure of a disability and corresponding accommodations provided are too late. On the other hand, if the student approached the instructor at the beginning of the semester, disclosed that he or she has a learning disability, and provided documentation of successful accommodations used in the past, then the accommodations can be arranged in an organized and timely manner (Hong, 2015).

The fifth major challenge that students with LD face as they transition from high school to postsecondary settings is learned helplessness (Brown & Leary, 2013; Valas, 2001; Westwood, 2013). Valas (2001) found that students with LD believed their failures were attributed to internal causes such as lack of ability and that their successes were attributed to external causes such as luck or ease of task. Students with LD expressed lower expectations for future success than their typically developing peers (Brown & Leary, 2013; Valas, 2001; Westwood, 2013). Feelings of helplessness, failure, and expectations of future failure can have detrimental effects on students' academic and social functioning. Students with LD are likely to engage in learned helplessness behaviors because of a history of failure and frustration (Brown & Leary, 2013; Valas, 2001; Westwood, 2013). Learned helpless behavior can lead students with LD to believe that they are failing due to of a lack of ability, which can have serious consequences for students who are leaving high school because they may conclude that they are incapable of improving their performance (Brown & Leary, 2013; Valas, 2001; Westwood, 2013). This acknowledgement may keep students with LD from trying to succeed, which could

result in increased helplessness, continued failure, and loss of self-esteem (Brown & Leary, 2013; Valas, 2001; Westwood, 2013).

The responsibility for obtaining accommodations shifts to the student with LD when he or she transitions from high school to postsecondary settings, a significant deviation from the process of obtaining accommodations during the high school years. For example, prior to graduating from high school, the accommodations for students with LD were arranged by school staff members, such as extended time on tests and assignments, preferential seating, and read-on-request accommodations. Researchers reported that reliance on the school system places students with LD at even greater risk for exhibiting learned helplessness behavior with respect to their postsecondary educational needs (Brown & Leary, 2013; Valas, 2001; Westwood, 2013), because in postsecondary settings, students with LD are responsible for self-advocating for their accommodations.

The sixth major challenge that students with LD face as they transition from high school to postsecondary settings is social integration. Students with LD often struggle to find support outside of their family unit, from which they are often separated in postsecondary settings (DaDeppo, 2009; Sparks & Lovett, 2009). Students with LD must be able to socially integrate with peer groups, faculty, and administrators, and in extracurricular activities. The extent to which students perceive others in the campus community as caring about them personally and being interested in them as individuals determines their levels of social integration (DaDeppo, 2009; Sparks & Lovett, 2009). Accordingly, students' experiences with the systems of the postsecondary setting, as well

as their interactions and experiences with peers and faculty, determine the extent to which students fit within the postsecondary setting and the degree to which they will socially and academically integrate into this new environment (DaDeppo, 2009; Sparks & Lovett, 2009). The greater the student's academic and social integration, the more likely he or she will persevere in postsecondary education settings (DaDeppo, 2009; Sparks & Lovett, 2009).

Finally, the seventh major challenge that students with LD face as they transition from high school to postsecondary settings is stigmatization (Field, Sarver, & Shaw, 2003; Lisle & Wade, 2014; Stodden & Zucker, 2004). Once in postsecondary settings, students with LD may feel alienated from peers or discriminated against by professors as a result of their self-identification as students with LD, or after they request accommodations in the classroom (Field et al., 2003; Lisle & Wade, 2014; Stodden & Zucker, 2004). A number of researchers examined the stigmatization of students with LD by professors and peers in postsecondary settings (Field et al., 2003; Lisle & Wade, 2013; Stodden & Zucker, 2004). One theme that emerged from the research was that students with LD felt that they would be perceived as cheaters or as avoiding their class assignments if they used their accommodations (Field et al., 2003; Lisle & Wade, 2013; Lock & Layton, 2001; Stodden & Zucker, 2004). These accommodations, such as extended time on a class assignment or taking a test alone in a quiet room, aside from being legally mandated, do not change in any significant way what the assignment or test measures. However, the fear of being labeled "a cheater" can lead students with LD to

not use their accommodations, thus resulting in enhanced anxiety and possible course failure (Lock & Layton, 2001).

Furthermore, students with LD in postsecondary settings have often reported feeling fearful of being perceived as “stupid,” “not intelligent,” “not quite on the ball,” and “weird” (Denhart, 2008, p. 491). Students have even reported being told by faculty members that they should not take certain classes if they have LD (Denhart, 2008). Although students with disabilities work hard, often harder than their non-learning-disabled peers, they have stated that they are not seen as “ideal” college students once they self-identify because of the perception that they are not intelligent (Denhart, 2008). As such, students with LD may try to conceal their disability (Denhart, 2008), thus not receiving legally mandated accommodations that are designed to grant them access to educational programs. Students with LD may then feel overwhelmed by the demands of postsecondary education without the use of accommodations or services, which may have a detrimental effect on their perseverance in postsecondary settings (Denhart, 2008). These findings suggest the importance of students with LD self-identifying at the postsecondary level and obtaining accommodations, as well as the need for a strong social support group (Denhart, 2008).

Significance of the Problem

Students with LD will continue to need accommodations in postsecondary education settings, employment, and throughout their lives (NCLD, 2015). Therefore, in order for students with LD to be successful, they must know what accommodations work best for them, and know how to ask for the accommodations they need. For students with

LD, the need to develop self-advocacy skills is critical to future success (NCLD, 2015). In addition, researchers believe that self-advocacy is a skill that can and should be taught while in high school (Prater et al., 2014; Roberts et al., 2016). Self-advocacy instruction is critical in preparing students to transition from high school to postsecondary education settings (Roberts et al., 2016). Including self-advocacy instruction in daily lesson plans can be beneficial to all students, but particularly students with LD (Prater et al., 2014). Students become self-advocates when they: (a) can demonstrate an understanding of their disability, (b) are aware of their legal rights and responsibilities, and (c) can competently communicate their rights and needs to others (Gaumer Erickson, Noonan, Brussow, & Gilpin, 2014). Therefore, it is essential that students with LD are taught self-advocacy skills while in high school so that they are empowered to speak on their own behalf and take responsibility for their educational programming when they transition to postsecondary education settings.

Moreover, regardless of the career choice of students with LD, the demands of the future employment position will not waive because of their disability. Employment accommodations are designed to equalize an employee's ability to perform the essential functions of employment. Accommodations are not intended to justify a poor job match or compensate for the lack of knowledge, skills, or abilities necessary to succeed (Timmons, Wills, Kemp, Basha, & Mooney, 2010). Employment accommodations are based on the use and further development of the existing knowledge, skills, and abilities of an employee in a particular work setting (Timmons et al., 2010). At times, methods or procedures used in employment may need to be modified or implemented to enhance

these abilities. For example, an employee with LD who has dyslexia and deficits in reading may benefit from putting text into speech using a personal computer. Similarly, an employee with LD who has deficits in visual processing is likely to learn better through auditory information and hands-on experience. Extra time to review visual information (pictures, videos, writing on the whiteboard, etc.) may be beneficial (Timmons et al., 2010).

If an individual with LD determines that it would be advantageous to disclose his or her disability to an employer, it is important that he or she understands the legal and practical issues involved (Timmons et al., 2010). According to the ADA and many state statutes, employers are not allowed to discriminate against individuals with disabilities, but proving that discrimination occurred is often difficult. Therefore, the timing of disclosure should be carefully considered. An individual may decide to disclose disability-related information: (a) during an employment interview, (b) at the time of acceptance of an employment offer, or (c) at any time after employment has begun. Understanding the scope and limitations of the ADA and related state regulations is the responsibility of the individual as well as the employer (Timmons et al., 2010). Individuals who disclose disability information must be able to answer questions as they arise. Therefore, self-awareness plays an important role in work-related disclosure. Individuals with LD should have a clear understanding of their disability and be able to describe its impact clearly, using common language. Disclosure should be made only to those with a legitimate interest in the information, such as a supervisor or human resources manager (Timmons et al., 2010).

Research Questions

The purpose of this study was to examine the effects of a self-advocacy intervention on the performance of high school students with LD when requesting academic accommodations in a role-play situation. Following approval from the George Mason University Institutional Review Board (Appendix A), the following questions were asked:

1. Is there a functional relation between a self-advocacy intervention and the performance of high school students with LD requesting academic accommodations in a role-play situation?
2. Do high school students with LD generalize the self-advocacy skills learned in a role-play situation to interactions with their teachers (generalization)?
3. Do high school students with LD generalize the self-advocacy skills learned in a role-play situation to interactions with the Special Education Coordinator (generalization)?
4. Do high school students with LD maintain the self-advocacy skills two weeks after mastering the skills in a role-play situation (maintenance)?

Definition of Terms

In this section, the terms frequently used in this study are defined and presented in three categories. First, definitions of terms related to self-advocacy are presented. Next, definitions of terms related to special education are presented. Finally, the definitions of terms related to research are presented.

Definitions of terms related to self-advocacy. For the purpose of this study, *self-advocacy* refers to the ability to speak on one's behalf and explain one's disability, personal needs, and interests in a clear and concise manner (Kallio & Owens, 2004; Kotzer & Margalit, 2007). The independent variable in this study was the self-advocacy instruction modified from the *Self-Advocacy and Conflict Resolution Training (SACR): Strategies for the Classroom Accommodation Request* intervention (Rumrill, Palmer, Roessler, & Brown, 1999). *Self-determination* is the ability of individuals to exert control over their lives through informed choices and decision making (Berry et al., 2012).

Definitions of terms related to special education. *Special education* refers to a range of educational and social services provided by the public school system and other educational institutions, at no cost to the parent, to meet the unique needs of children with disabilities (IDEIA, 2004). If it is determined, through referral and an evaluation process, that a child is eligible for special education services, then an individualized education program (IEP) is developed. The *IEP* is a written plan for each child with a disability with specifically designed interventions, services, and supports to be provided to the student to ensure access to the general education curriculum provided to nondisabled peers (Overton, 2006). In order for a student to receive special education support services, the school district must first evaluate the student and determine if there is a qualifying disability that affects his or her ability to learn.

For the purpose of this study, the targeted disability category is *specific learning disability*. A specific learning disability is defined by IDEIA as:

A disorder in one or more of the basic psychological processes involved in understanding or using spoken or written language, that may manifest itself in an imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations, including conditions such as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia (IDEIA, 2004).

The Individuals with Disabilities Education Improvement Act (IDEIA) of 2004 (formerly P.L. 94-142 or the Education for all Handicapped Children Act of 1975) requires public schools to make available to all eligible children with disabilities, at no cost, appropriate public education in the least restrictive environment appropriate to their individual needs. *Section 504 of the Rehabilitation Act of 1973* states that

no qualified individual with a disability in the United States shall be excluded from, denied the benefits of, or be subjected to discrimination under any program or activity that either receives federal financial assistance or is conducted by any Executive agency or the United States Postal Service.

The Americans with Disabilities Act (ADA) of 1990 prohibits discrimination on the basis of disability in employment, state and local government, public accommodations, commercial facilities, transportation, and telecommunications. It also applies to the United States Congress.

The Family Educational Rights and Privacy Act (FERPA) is a federal law that protects the privacy of student records by requiring written permission from the parent or eligible student (18 years old or attends a school beyond the high school level) in order to release any information from a student's education record. The law applies to all schools

that receive funds under an applicable program of the United States Department of Education (U.S. Department of Education, 2014). *Accommodations* are “changes to the delivery of instruction, method of student performance, or method of assessment that do not significantly change the content or conceptual difficulty level of the curriculum” (Miller, 2009, p. 458). Accommodations make it possible for students with LD to demonstrate what they know without being hindered by their disability (Horowitz, Rawe, & Whittaker, 2017). *Learned helplessness* is defined as a condition in which a person suffers from a sense of powerlessness, due to persistent failure or traumatic events (Nolen-Hoeksema et al., 1986).

Definitions of terms related to research. Research that implements a *single-subject research design* (SSRD) focuses on individual study participants, rather than groups, and is used to study the behavior change that an individual exhibits as a result of an intervention or treatment (Fraenkel, Wallen, & Hyun, 2014). An SSRD may involve one participant but usually includes multiple participants (e.g., three to eight) in a single study. Each participant serves as his or her own control, and performance prior to intervention is compared to performance during and after intervention.

Multiple baseline design across participants is an SSRD that observes the participants’ behavior measured over time. This design allows the researcher to determine if there is a functional relation between the dependent and independent variables for each participant (Horner et al., 2005). Steps include defining the dependent and independent variables and then collecting baseline data for each participant. *Changing criterion* is an SSRD that is used to evaluate instructional or therapeutic programs that require gradual,

stepwise change in behavior (Gast, 2010). This design requires initial baseline observations followed by the implementation of a treatment program in each of a series of treatment subphases.

Combined research design refers to two or more SSRDs implemented to answer more than one research question in a single study: address the innate limitations of a research design; and respond to covariation if behaviors, participants, or conditions are not independent as believed prior to the beginning of the study (Gast, 2010). *Functional relation* refers to the cause-effect relation between independent and dependent variables (Gast, 2010), wherein the influence of the independent variable on the target behavior during the intervention is inferred by the researcher.

The next chapter includes a detailed review of the research related to self-advocacy and self-determination interventions for secondary school students with disabilities. Following Chapter 2, the methodology used in this study is described in Chapter 3. Chapter 4 includes findings, followed by a discussion of the study in Chapter 5.

Chapter Two: Literature Review

In this chapter, a review of the research related to self-advocacy and self-determination interventions for secondary school students with disabilities is provided. First, a historical review of research between 1977 and 1993 on self-advocacy and self-determination interventions for secondary school students with disabilities is discussed. Next, the literature review parameters used to find research related to self-advocacy and self-determination interventions for secondary school students with disabilities are identified. Third, based on research studies identified per the search parameters, the independent variables, research design, participant characteristics, settings, length and duration of the intervention sessions, and dependent variables are described. Finally, results of a pilot study and a review of single-subject research methodology lead to the development and justification of the study as outlined in Chapter 3.

Historical Perspective of Self-Advocacy and Self-Determination Interventions

In the past, researchers recommended a variety of interventions promoting self-advocacy and self-determination skills for students with disabilities (Carnine, Silbert, & Kameenui, 1990; Gillespie & Turnbull, 1983; Goldstein, Strickland, Turnbull, & Curry, 1980; Johnson & Rusch, 1993; Martin, Marshall, & Maxson, 1993; O'Brien & Lovett, 1993; Smith, 1990; Winslow, 1977). Four of the most commonly suggested interventions were: (a) student involvement in individualized education program

(IEP) planning (Gillespie & Turnbull, 1983; Goldstein et al., 1980; Martin et al., 1993; Smith, 1990; Winslow, 1977); (b) transition planning (Johnson & Rusch, 1993); (c) person-centered planning practices (O'Brien & Lovett, 1993); and (d) direct teaching of self-advocacy and self-determination skills (Carnine et al., 1990).

Individualized education program (IEP) planning. One of the most commonly suggested interventions for promoting self-advocacy and self-determination for students with disabilities was student involvement in IEP planning. According to Public Law 94-142 (The Education for All Handicapped Children Act), passed in 1975, all public schools accepting federal funds were required to provide equal access to education for children with disabilities. In addition, public schools were required to evaluate children with disabilities and create an educational plan with parental input that would emulate as closely as possible the educational experiences of children without disabilities. The Education for All Handicapped Children Act (1975) also contained provisions that students with disabilities should be placed in the least restrictive environment that allowed the maximum possible opportunity to interact with nondisabled students.

Moreover, the Education for All Handicapped Children Act (1975) stated that “whenever appropriate,” the student must participate in meetings to develop the IEP. However, Gillespie and Turnbull (1983) contended that the words “whenever appropriate” were seldom defined by policy makers. Winslow (1977) suggested that the student’s age, severity of the disability, and the ability to provide input in the development of the IEP and participate in the IEP meeting should be considered. Gillespie and Turnbull further recommended that the decision to involve the student in

the IEP process should be based on student interest, ability to communicate interests and preferences, and comfort in a formal setting with school officials, rather than on labels or disability classification.

Transition planning. In addition to student involvement in IEP planning, the second most commonly suggested intervention for promoting self-advocacy and self-determination was transition planning. According to Public Law 101-476, The Individuals with Disabilities Education Act (IDEA, 1990), students with a disability were provided with free appropriate public education (FAPE) tailored to their individual needs. The goal of IDEA was to provide children with disabilities the same opportunity for education as their nondisabled peers. IDEA required that a statement of needed transition services be included in the IEP of all students with disabilities 16 years old or older. IDEA defined transition services as a coordinated set of activities that promoted movement from school to postschool environments that must be based upon the student's needs, preferences, and interests. Postschool outcomes could include postsecondary education, vocational training, integrated employment (including supported employment), and independent living. In addition, to ensure that student needs, preferences, and interests are considered, IDEA required that students 16 years old or older be invited to participate in their IEP meeting.

According to Smith (1990) and Martin et al. (1993), the IEP is the cornerstone of special education policy and provides administrators with proof of compliance, teachers with formalized instructional goals and objectives, parents with a voice in decisions, and students with an appropriate education. Typically, teachers, support staff, and parents

develop and implement the IEP. Before the passage of IDEA (1990), secondary school students were not included in the one meeting designed to plan events in their lives.

Goldstein et al. (1980) studied the dynamics of IEP meetings and reported that the special education teacher was the dominant voice who directed most of the discussion toward the parents. The authors reported that none of the students in this study attended the IEP meetings.

Van Reusen and Bos (1990) reported that student involvement in IEP meetings was nonexistent or passive. The authors suggested that if special educators continued to plan and implement instructional activities without involving or considering the students' perception and priorities, they were minimizing the development of students' self-advocacy and self-determination skills. To ensure a successful transition from school to postschool work or education, Martin et al. (1993) suggested that the IEP process must include student involvement, as self-management of the IEP process provides opportunities for student planning, self-advocacy, and self-determination skill development.

Other researchers also acknowledged the importance of student involvement in the transition planning process and decision making. Schunk (1985) suggested that students who chose their school activities were more motivated to perform those tasks. Similarly, Swann and Pittman (1977) and Koestner, Ryan, Bernieri, and Holt (1984) suggested that opportunities to express preferences led to enhanced educational outcomes. Researchers also offered that effective practices in transition emphasized student participation in transition planning (Ianacone & Stodden, 1987; Johnson &

Rusch, 1993) and most introductory texts on transition emphasized student involvement as a key element of transition planning (Wehman, 1992).

Person-centered planning. The purpose of person-centered planning was to develop collaborative support focused on community presence, community participation, positive relationships, respect, and competence (O'Brien & Lovett, 1993; Pearpoint, O'Brien, & Forest, 1993; Smull & Harrison, 1992; Vandercook, York, & Forest, 1989). Person-centered planning, which emerged in 1985, reflected the broader ideological framework of normalization and inclusion (Smull & Harrison, 1992; Vandercook et al., 1989). Moreover, person-centered planning covered a wide range of procedures and guidelines focused on the creation of fundamental changes in the lives of people with intellectual and developmental disabilities (O'Brien & Lovett, 1993; Pearpoint et al., 1993). Some of the most common forms of person-centered planning were the McGill Action Planning System (Vandercook et al., 1989), Essential Lifestyle Planning (Smull & Harrison, 1992), Life-Lifestyle Planning (O'Brien & Lovett, 1993), and Planning Alternative Tomorrows with Hope (Pearpoint et al., 1993).

Direct teaching. Finally, the fourth most commonly suggested intervention for promoting self-advocacy and self-determination was direct teaching (Carnine et al., 1990; Deshler & Schumaker, 1986; Ellis, Lenz, & Sabornie, 1987). Critical features of this instruction were corrective feedback, multiple opportunities for practice, modeling, and specific instruction for generalization (Carnine et al., 1990).

Historically, students with disabilities were not active participants or even invited to their IEP or transition planning meetings. Researchers and policy makers

agreed that active participation in the IEP and transition planning meetings enhanced self-advocacy and self-determination skills for students with disabilities. Effective interventions included IEP and transition planning, person-centered planning practices, and directly teaching self-advocacy and self-determination skills, as described above. Next, the literature review parameters used to find current research related to self-advocacy and self-determination interventions for secondary school students with disabilities are identified.

Literature Review Parameters

The following electronic databases were searched: Academic Search Complete, Education Full Text (H. W. Wilson), Education Research Complete, ERIC, ProQuest Education Journals, ProQuest Research Library, Social Sciences Full Text (H. W. Wilson), and the Social Science Citation Index. In addition, various combinations of the following descriptors were used when searching the databases: self-advocacy, self-determination, transition, special education, students with disabilities, interventions, secondary schools, high schools, and middle schools.

A descendent search of key authors such as Wehmeyer, Palmer, Williams-Diehm, Test, Shogren, Little, Lee, Davies, and Stock was also conducted. These researchers were identified as key authors based on the frequency of research published and the number of times cited in peer-reviewed journals. In addition, a hand search of recent issues of *Career Development for Exceptional Individuals*, *Exceptional Children*, *Remedial and Special Education*, and *The Journal of Special Education* was conducted to ensure that recently published articles up until December 2013 that had yet to be indexed were

included. Finally, an ancestry search of the reference lists of all articles was conducted for additional related articles based on key terms in the titles and key authors. Any article pulled from a reference list was then reviewed based on the search criteria. Only research studies published in peer-reviewed journals were reviewed. Therefore, unpublished dissertations and thesis studies were not reviewed. Only studies written in English and published between 1994 and 2013 were reviewed. The criteria for inclusion of studies were:

- Intervention studies on self-determination and self-advocacy.
- All research designs were included.
- Study participants were in secondary grades (7-12).
- High incidence and mild to moderate disability categories were included.
- Study participants had an individualized education program (IEP).
- The intervention settings were public junior high or middle schools, secondary schools, or high schools.
- The literature review timeframe allowed a thorough review of the published literature.

The complete list of the 28 studies that met the literature search criteria can be found in Appendix B. For review in this chapter, the studies are presented based on the frequency of the intervention cited, with the most frequent intervention described first. Next, other interventions in studies that were only cited once during the search period are discussed, and finally, studies that included multiple interventions are presented.

Synthesis of Studies Reviewed

Independent variable used. Of the 28 studies reviewed, 21% ($n = 6$) used the Whose Future is it Anyway? (WFA) intervention to prepare students to participate in their IEP meeting and enhance their self-determination skills. The instruction of the WFA curriculum provided opportunities for students with LD to acquire problem-solving, goal-setting, decision-making, and small-group communication skills, and explore issues of self-awareness. Eighteen percent of the studies ($n = 5$) also used the Self-Directed IEP intervention to teach students to become active participants in the IEP process and to lead their IEP meeting. Fourteen percent of the studies ($n = 4$) used The Self-Advocacy Strategy I PLAN, a motivation and self-determination intervention designed to prepare students to participate in education or transition planning conferences. Fourteen percent of the studies ($n = 4$) also used the Self-Determined Learning Model of Instruction (SDLMI). The SDLMI is an instructional strategy designed to teach students with and without disabilities to engage in self-regulated and self-directed learning by teaching students how to set goals, plan courses of action to achieve these goals, self-evaluate their progress, and adjust or modify their goals or plans as needed. Seven percent of the studies ($n = 2$) used the Take Charge for the Future intervention used to promote student involvement in transition planning, and 46% of the studies ($n = 13$) utilized other interventions. Figure 1 provides a graphical representation of the interventions used in the 28 studies reviewed.

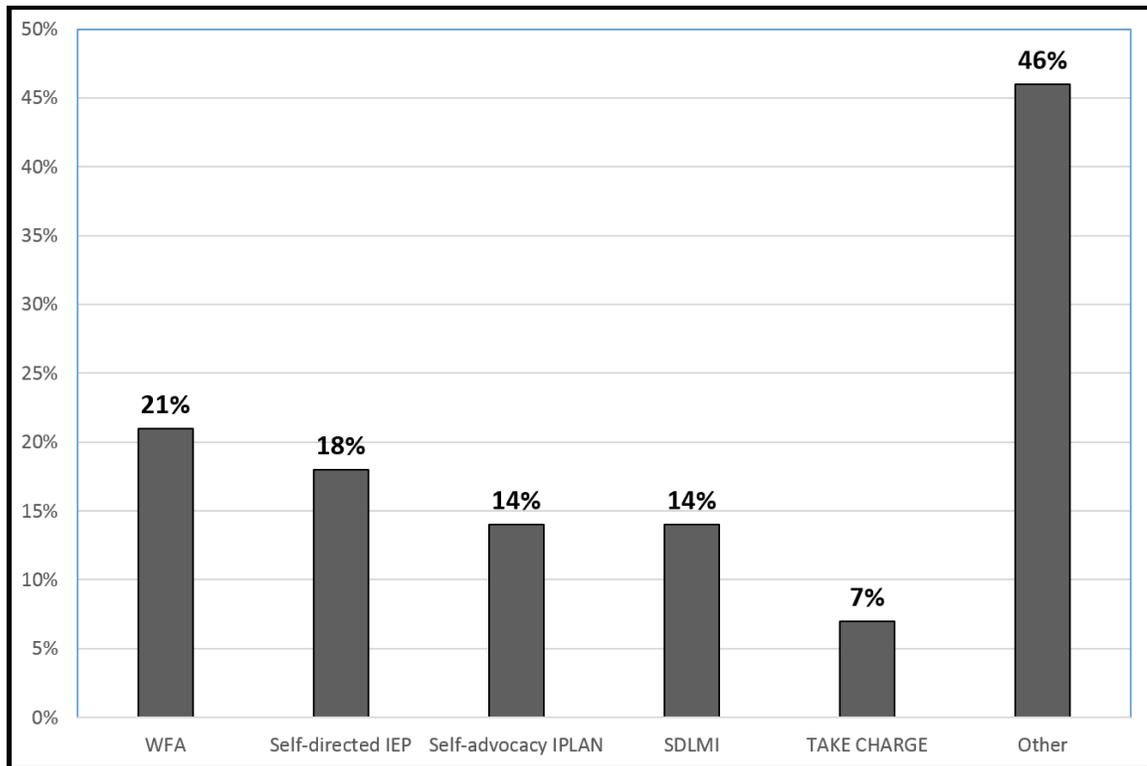


Figure 1. Interventions used in the 28 studies reviewed.

Synthesis of Interventions

Whose future is it anyway? The Whose Future is it Anyway? (WFA) intervention is a student-directed transition planning curriculum designed to support students as they learn to be more involved in the IEP process (Lee et al., 2010a). The curriculum is comprised of 6 sections and 36 lessons. The instruction of the WFA intervention introduces students to the concept of transition and transition planning and enables them to self-direct learning related to (a) having self- and disability awareness, (b) decision making about transition-related outcomes, (c) identifying and securing community resources to support transition services, (d) writing and evaluating goals and objectives,

(e) communicating effectively in small groups, and (f) developing teams to become an effective team member, leader, or self-advocate. After receiving the WFA instruction, students can learn to be meaningfully involved in their transition planning process and their IEP meeting (Lee et al., 2010a).

Six studies were reviewed that used the WFA intervention (Lee et al., 2010a; Lee et al., 2010b; Wehmeyer & Lawrence, 1995; Wehmeyer, Palmer, Lee, Williams-Diehm, & Shogren, 2011; Wehmeyer, Palmer, Shogren, Williams-Diehm, & Soukup, 2010; Wehmeyer, Palmer, Williams-Diehm, et al., 2011). Of these, three took place in a high school setting (Wehmeyer & Lawrence, 1995; Wehmeyer et al., 2010; Wehmeyer, Palmer, Williams-Diehm, et al., 2011), two were conducted in a junior high school or middle school setting (Lee et al., 2010a; Lee et al., 2010b), and one was conducted in a secondary school (Wehmeyer, Palmer, Lee, et al., 2011). The age range of the participants across all 6 studies was 13 to 20 years old. Five of the six studies reviewed focused on students in multiple disability categories (Lee et al., 2010a; Lee et al., 2010b; Wehmeyer & Lawrence, 1995; Wehmeyer, Palmer, Lee, et al., 2011; Wehmeyer, Palmer, Williams-Diehm, et al. 2011) and one study focused on students with LD and intellectual disability (ID) (Wehmeyer et al., 2010). Three of the six studies reported the frequency and duration of the intervention which ranged from 10 to 36 sessions for 1 to 10 weeks. The frequency and duration of the intervention could not be determined or was not specified in three studies (Wehmeyer & Lawrence, 1995; Wehmeyer et al., 2010; Wehmeyer, Palmer, Williams-Diehm, et al., 2011). Two studies used a pre-post research design (Lee et al., 2010a; Wehmeyer & Lawrence, 1995), two studies used a group

research design (Lee et al., 2010a; Lee et al., 2010b), and two studies use a longitudinal research design (Wehmeyer et al., 2010; Wehmeyer, Palmer, Lee, et al., 2011). All six studies measured a variety of dependent variables. The dependent variables were self-determination, transition plan knowledge, self-efficacy, and outcome expectancy for educational planning. The dependent variables were measured by the Arc's Self-Determination Scale, the Air Self-Determination Scale, the Whose Future Knowledge Scale, and the Self-Efficacy and Outcome Expectancy Planning Scale.

Wehmeyer, Palmer, Lee, et al. (2011) and Wehmeyer, Palmer, Williams-Diehm, et al. (2011) predicted a causal positive relationship between student involvement in transition planning and enhanced self-determination skills. In addition, Lee et al. (2010a) and Wehmeyer et al. (2010) reported that students who received the WFA intervention combined with technology-based reading support benefitted more than their peers who did not receive the reading support in self-determination, self-regulation, and transition planning knowledge. Lee et al. (2010b) reported that instructional, knowledge, and dispositional or belief factors predicted students' self-determination over personal predictor variables such as age, gender, and IQ level. The results also indicated that students' transition knowledge and skills predicted students' postintervention Self-Determination Scale (SDS) score. Moreover, students with higher self-determination scores as assessed by SDS were more likely to have higher transition planning knowledge test scores.

Wehmeyer and Lawrence (1995) and Lee et al. (2010a) reported significant changes in students' scores on self-efficacy and outcome expectancy for educational

planning, indicating that students believed they possessed the skills necessary to participate in their planning meeting and felt that if they exhibited these actions, preferred outcomes related to their involvement in the meeting would occur. Lee et al. (2010b) reported that self-efficacy and outcome expectancy were the best predictors of students' self-determination. Self-efficacy was the only predictor variable that significantly predicted high self-determination scores on both self-determination measures.

The self-directed IEP. The Self-Directed IEP is a multimedia curriculum designed to teach students the skills needed to become active participants and leaders of their IEP meetings (Martin, Marshall, Maxson, & Jerman, 1996). The Self-Directed IEP contains 11 sequential lessons that can be taught in six to ten 45-min sessions in various settings. The lessons are presented in a model, lead, and test approach. The Self-Directed IEP steps are: (a) begin meeting by stating the purpose, (b) introduce everyone, (c) review past goals and performance, (d) ask for others' feedback, (e) state school and transition goals, (f) ask questions if you do not understand, (g) deal with differences in opinion, (h) state what supports you will need, (i) summarize your goals, (j) close meeting by thanking everyone, and (k) work on IEP goals all year (Martin et al., 1996).

Five studies that used the Self-Directed IEP were reviewed (Allen, Smith, Test, Flowers, & Wood, 2001; Arndt, Konrad, & Test, 2006; Martin et al., 2006; Wehmeyer et al., 2010; Wehmeyer, Palmer, Williams-Diehm, et al., 2011). Of the five studies reviewed, four took place in a high school setting (Allen et al., 2001; Arndt et al., 2006; Wehmeyer et al., 2010; Wehmeyer, Palmer, Williams-Diehm, et al., 2011) and one took place in a secondary school (Martin et al., 2006). The age range of the participants across

all 5 studies was 13 to 20 years old. Three of the five studies focused on students in multiple disability categories (Arndt et al., 2006; Martin et al., 2006; Wehmeyer, Palmer, Williams-Diehm, et al., 2011), one study focused on students with LD and ID (Wehmeyer et al., 2010), and one study focused on students with ID (Allen et al., 2001). Two of the five studies reported the frequency and duration of the intervention, which ranged from 2 to 10 sessions for 30 to 45 min for 12 weeks (Allen et al., 2001; Arndt et al., 2006). The frequency and duration of the intervention could not be determined or specified in the other three studies (Martin et al., 2006; Wehmeyer et al., 2010; Wehmeyer, Palmer, Williams-Diehm, et al., 2011). Two studies used a single-subject research design (Allen et al., 2001; Arndt et al., 2006), two used a control group design (Martin et al., 2006; Wehmeyer, Palmer, Williams-Diehm, et al., 2011), and one used a longitudinal research design (Wehmeyer et al., 2010). All five studies measured a variety of dependent variables, such as IEP participation, self-determination, and transition empowerment. The dependent variables were measured by a checklist adapted from the Choicemaker curriculum, Self-Determination Assessment, post-IEP meeting survey, the Arc's Self-Determination Scale, and the Transition Empowerment Scale.

Allen et al. (2001) and Arndt et al. (2006) reported a functional relation between the Self-Directed IEP and increases in student participation in mock IEP meetings. Arndt et al. also reported increased student IEP participation, as measured by comparing real IEP meetings before and after intervention, indicating that students were able to generalize skill acquisition to their postintervention real IEP meetings. In addition, Allen et al. reported a statistically significant increase from the real IEP meeting held prior to

the intervention and the real IEP meeting held postintervention for all skills and the total score. The magnitude of difference between the pre- and postreal IEP scores, as measured by an effect size, was large (ranging from 4.93 to 39.00) for all skills and the total score. Moreover, Martin et al. (2006) reported that the Self-Directed IEP intervention group started and led significantly more IEP meetings, increased time talked during the IEP meetings, engaged in more IEP meeting leadership steps, and reported higher positive perceptions of the IEP meetings than the control group. However, the length of the IEP meetings did not significantly differ between the intervention and the control groups.

The self-advocacy strategy. The Self-Advocacy Strategy (SAS) is a motivation and self-determination intervention designed to prepare students to participate in education or transition planning conferences (Van Reusen, Bos, & Schumaker, 1994). The strategy consists of five steps taught over a series of seven acquisition and generalization stages, using the mnemonic “I PLAN” to help cue students to remember the steps. I PLAN represents:

- I** – Inventory completed by students listing their strengths, weaknesses, learning needs, goals, and choices to prepare them for their upcoming IEP conference.
- P** – Provide your inventory involves identifying appropriate time for individuals to share information during the conference, speaking clearly and completely, and referring to the inventory as needed.
- L** – Listen & Respond addresses active listening and responding to statements made by others in a positive manner.

A –Ask questions focuses on asking appropriate questions to gather needed information.

N –Name your goals emphasizes communicating goals and ideas regarding actions to be taken (Van Reusen et al., 1994).

Four studies were reviewed that used the SAS intervention (Hammer, 2004; Test & Neale, 2004; Wehmeyer et al., 2010; Wehmeyer, Palmer, Williams-Diehm, et al., 2011). Two of the studies took place in a junior high or middle school setting (Hammer, 2004; Test & Neale, 2004) and two took place in a high school setting (Wehmeyer et al., 2010; Wehmeyer, Palmer, Williams-Diehm, et al., 2011). The age range of the participants across all 4 studies was 12 to 20 years old. Three of the studies focused on students with high incidence disabilities (Hammer, 2004; Wehmeyer et al., 2010; Wehmeyer, Palmer, Williams-Diehm, et al., 2011) and one focused on students in multiple disability categories (Test & Neale, 2004). Two of the four studies reported the frequency and duration of the intervention, ranging from 7 to 10 sessions for 20 to 45 min each for 2 weeks (Hammer, 2004; Test & Neale, 2004). The frequency and duration of the intervention could not be determined or was not reported in the other two studies (Wehmeyer et al., 2010; Wehmeyer, Palmer, Williams-Diehm, et al., 2011). Two studies used a single-subject research design (Hammer, 2004; Test & Neale, 2004), one study used a control group design (Wehmeyer et al., 2010), and one study used a longitudinal research design (Wehmeyer, Palmer, Williams-Diehm, et al., 2011). All four measured a variety of dependent variables, such as self-determination, transition empowerment, and the quality of student contributions in their IEP meetings. The dependent variables were

measured by the Arc's Self-Determination Scale, the Air Self-Determination Scale, and the Transition Empowerment Scale.

Test and Neale (2004) reported improved student contributions during the IEP meeting following the introduction of the SAS. A second dependent variable was the student's score on the ARC's Self-Determination Scale (ARC): Adolescent Version (Wehmeyer & Kelchner, 1995). All students made gains from the pretest to posttest on the ARC. Due to the small sample size, a nonparametric test was used to determine if the total score from pretest to posttest was statistically significant. The results showed that the posttest scores were not significantly higher than the pretest scores (Wilcoxon $Z = -1.83, p = .068$). However, the range for the pretest scores was from 5.0 to 57.0 and the range for the posttest scores was from 50.0 to 75.0. The results from this study demonstrate a functional relation between the SAS and the quality of students' contributions to their IEP meetings.

Hammer (2004) reported that the SAS paired with computer-assisted instruction and simulation increased student participation in IEP meetings. The results of the study indicated that the total number of relevant responses and the number of positive relevant responses immediately increased above baseline levels while the number of irrelevant and negative relevant responses remained low. The participants were more involved in writing goals and participating in their IEP meetings, and were also able to verbalize statements about their strengths and areas for improvement. The SAS appeared to be effective, supporting the findings of Test and Neale (2004).

The self-determined learning model of instruction. The Self-Determined Learning Model of Instruction (SDLMI) is an instructional strategy designed to teach students with and without disabilities to engage in self-regulated and self-directed learning by instructing them on how to set goals, plan courses of action to achieve these goals, self-evaluate their progress, and adjust or modify their goals or plans as needed (Wehmeyer, Palmer, Agran, Mithaug, & Martin, 2000). The SDLMI is a model of instruction based on the principles of self-determined behavior, such as goal setting, problem solving, and decision making that enables teachers to teach students to use self-regulated problem-solving strategies to achieve self-selected goals (Shogren, Palmer, Wehmeyer, Williams-Diehm, & Little, 2012).

The SDLMI involves curriculum modifications such as adaptation, augmentation, and alterations to promote access to the general curriculum for students with disabilities. Each phase of the model consists of four questions that direct students through a problem-solving sequence that differs from phase to phase, but stand for identical steps in the model such as: (a) identify the problem, (b) identify potential solutions to the problem, (c) identify barriers to solving the problem, and (d) identify consequences of each solution. Each instructional phase provides educational support that teachers can use in teaching students to self-direct their learning (Wehmeyer et al., 2000).

Four studies were reviewed that use the SDLMI intervention (Lee, Wehmeyer, Palmer, Soukup, & Little, 2008; Shogren et al., 2012; Wehmeyer et al., 2010; Wehmeyer et al., 2012). All four studies took place in a high school setting (Grades 9-12). The age range of the participants across all 4 studies was 13 to 21 years old. Of the four studies

reviewed, three studies focused on students with LD and ID (Shogren et al., 2012; Wehmeyer et al., 2010; Wehmeyer et al., 2012) and one focused on students in multiple disability categories (Lee et al., 2008). Three of the studies reported the duration of the studies that ranged from nine weeks to two years, but the frequency was not reported (Lee et al., 2008; Shogren et al., 2012; Wehmeyer et al., 2012). The frequency and duration of the intervention was not reported or could not be determined in one study (Wehmeyer et al., 2010). Two studies used a waitlist control group design (Shogren et al., 2012; Wehmeyer et al., 2012), one study used a pre-post control group design (Lee et al., 2008), and one study used a longitudinal research design (Wehmeyer et al., 2010). All four studies measured a variety of dependent variables, such as self-determination, access to the general education curriculum, and attainment of educational goals. The dependent variables were measured using the Arc's Self-Determination Scale, the Air Self-Determination Scale, Access Cissar, and the Goal Attainment Scale (GAS).

Lee et al. (2008) and Shogren et al. (2012) reported promising evidence of a relationship between the impact of the SDLMI intervention and access to the general education curriculum for students with disabilities. Lee et al. reported that students in the experimental group attained their goals at a better than expected level after the SDLMI intervention. Shogren et al. reported that the SDLMI intervention had a significant impact on the goal attainment of students with ID and LD, although the impact differed significantly. Students with LD in the treatment group showed significantly higher attainment of academic goals at the end of the intervention year, but no differences in their attainment of transition-related goals. The opposite pattern was seen for students

with ID. The results suggested that implementing the SDLMI led to significant changes in goal attainment and access to the general education curriculum of students with ID and LD, although the intervention had different impacts on these two groups. Moreover, the findings suggest that students with disabilities can achieve educational goals linked to the general education curriculum through self-determination instruction and student-directed learning.

Wehmeyer et al. (2012) reported that the intervention group showed significant improvement on both the SDS and the AIR from baseline to the final measurement point (end of Year 2). The intervention group improved from .00 to .30 units on the AIR ($d < .31$) and from .00 to .24 units on the SDS ($d < .24$). On the other hand, the control group showed only slight increases in self-determination. The control group improved from .16 to .17 units on the AIR ($d < .01$) and from -.01 to .03 units ($d < .05$) on the SDS. The control group decreased in self-determination scores between the first and second measurements, but subsequently increased between the second and third measurements. This pattern suggests that after receiving the intervention at the beginning of Year 2, the students' negative developmental trajectory for self-determination reversed direction as a result of the intervention.

Take charge for the future. The Take Charge for the Future intervention is a multicomponent model used to promote student involvement in transition planning (Powers et al., 2001). It includes student-directed participation in transition planning activities in school, community, and home settings. Participants learn that they are responsible for promoting their transition success and are exposed to specific strategies to

identify, communicate, and achieve their transition goals, and receive the information and support necessary to ensure their success (Powers et al., 2001). Students complete a self-help focused curriculum and receive coaching and support to identify their transition goals, participate in their transition planning meetings, formulate systematic plans for goal attainment, and perform activities to achieve their goals. Information and support are simultaneously provided to school staff and families to expand their capacities to assist youth. Peer support and mentorship opportunities are organized to bolster youth transition knowledge, confidence, and support networks (Powers et al., 2001).

Two studies were reviewed that used the Take Charge intervention (Powers et al., 2012; Powers et al., 2001). Both studies took place in a high school setting (Grades 9-12). The age range of the participants was 14 to 17 years old. Both studies focused on students in multiple disability categories. One study reported the frequency and duration of the intervention as 31.3 sessions over a 4-month period. The other study reported the duration and frequency of the intervention as 50.36 hr over a 12-month period. One study used a waitlist control group design and the other study used a longitudinal research design. Both studies measured a variety of dependent variables. The dependent variables measured were the overall level of participants' involvement in transition planning, overall youth empowerment, self-determination, high school completion, employment status, and living status. The dependent variables were measured by the ARC's Self-Determination Scale, the Educational Planning Assessment (EPA), the Transition Awareness Survey, an observational coding system, the Quality of Life Questionnaire

(QofLQ), the Transition Planning Assessment, and the Outcome Survey (Powers et al., 2012; Powers et al., 2001).

Powers et al. (2001) reported that participants in the treatment group demonstrated significant increases in their involvement in transition planning activities, empowerment, transition awareness, and level of participation in transition planning meetings compared with participants in the wait-list or control groups. The low level of initiation and high level of nonparticipation by participants in the wait-list group coupled with the high level of initiation by other participants is concerning. The findings confirm that without systematic intervention to promote student involvement, many of them sit passively in their transition planning meetings while others control the discourse (Powers et al., 2001).

Powers et al. (2012) reported there was not a significant difference in self-determination between postintervention and follow-up by group ($p = .279$, $ES = 0.43$), but the groups did differ on the average of postintervention and follow-up compared to baseline, $t(116) = 2.10$; $p = .0378$, $ES = .66$. The intervention group scored significantly higher than the comparison group at both postintervention, $p = .0069$, $ES = 1.10$, and follow-up, $p = .0069$, $ES = 1.09$. For quality of life, there was no difference between the groups comparing postintervention to follow-up, $p = 0.7040$, $ES = -0.14$, but the average of postintervention and follow-up versus baseline did not differ significantly by group, $t(116) = 2.55$; $p = .0120$, $ES = 0.81$. The groups did not differ at baseline, $p = 0.3580$, $ES = 0.32$, but did differ at postintervention, $p = 0.0029$, $ES = 0.61$, and follow-up, $p = 0.0008$, $ES = 0.77$. The intervention group reported having a significantly higher quality

of life than the comparison group. In transition planning, there were no significant omnibus differences between the groups over time. The groups did not significantly differ from each other at baseline, $p = 0.4168$, $ES = 0.25$; however, the differences at postintervention, $p = 0.054$, $ES = 0.60$, and follow-up, $p = .0379$, $ES = 0.65$, indicated that the treatment group accessed more transition services than the comparison group at these time points (Powers et al., 2012).

At postintervention, 38% of the intervention group and 26% of the comparison group had completed high school either through graduation or by obtaining their GED (Powers et al., 2012). Approximately one year later, this figure increased to 72% for the intervention group and 50% for the comparison group (Powers et al., 2012). Fourteen percent of the intervention group and 19% of the comparison group reported working in paid jobs at baseline (Powers et al., 2012). At postintervention, this figure more than doubled for the intervention group, with 34% indicating they had a paid job. In contrast, the rate of paid employment went down slightly for the comparison group to 16%. At follow up, 28% of youth in the comparison group and 45% in the intervention group were working in paid jobs (Powers et al., 2012). At the beginning of the study, all participants were in foster care. At postintervention, the majority of participants were still in foster care (63%). At follow-up, the majority of youth (57%) had exited care and the rate was similar across intervention and comparison groups. The results of this study revealed moderate to large effect sizes at postintervention and one year follow-up for the differences between groups in self-determination, quality of life, and utilization of community transition services (Powers et al., 2012). Youth in the intervention group also

completed high school, were employed, and carried out independent living activities at notably higher rates than the comparison group (Powers et al., 2012).

Other interventions. Durlak, Rose, and Bursuck (1994) reported the effects of *direct instruction* and *learning strategy* on the self-determination skills of eight high school students with learning disabilities. Critical components of this model of instruction include corrective feedback, multiple opportunities for practice, modeling, and specific instruction for generalization (Deshler & Schumaker, 1986; Durlak et al., 1994; Ellis et al., 1987). The participants received training in groups of 4 twice weekly for 30 min. A multiple-baseline design across behaviors was used to evaluate self-determination and self-awareness skills. The results of the study indicated that all eight students acquired self-determination skills as a result of the direct instruction provided. On average, the students responded correctly to 42% of the steps during baseline. After the intervention, students responded correctly on 82% of the steps. The average number of trials to criterion (90%) for each task was 2.23 trials per task ($R = 2$ to 5). The results suggest that students with LD can acquire, maintain, and generalize skills that focus on the self-determination skills of self-advocacy and self-awareness.

Van Reusen and Bos (1994) reported on the effects of the IEP Participation Strategy (IPARS) on 21 high school students with LD. The IEP Participation Strategy (IPARS) includes five steps to promote active student IEP participation: (a) **I**nventory your learning strengths, weaknesses to be improved, goals and interests, and choices for classroom learning; (b) **P**rovide your inventory information during the conferences; (c) **A**sk questions; (d) **R**espond to questions; and (e) **S**ummarize the IEP goals.

A control group design was used in this study. The treatment group received instruction in the use of the IEP participation strategy (IPARS) for three 50-min sessions for three consecutive days. The control group participated in an informational discussion on the purpose and procedures of an IEP conference. The dependent variables were the quantity of student goals, the quantity and quality of student verbal contributions in the IEP meeting, evaluations of student performance during the IEP meeting, and conference length. The dependent variables were measured by the goal inventory sheets, student participation evaluations, and conference length in minutes (Van Reusen & Bos, 1994).

Van Reusen and Bos (1994) reported that the inventory goal sheets served as a measure of the students' ability to identify goals prior to the IEP meeting. Results of a one-way ANOVA for student goals indicated significant differences between the two groups, $F(1, 18) = 7.94, p = .01$. The treatment group students averaged almost five goals ($M = 4.91, SD = 1.9$) and the control group students averaged almost three goals ($M = 2.89, SD = 1.2$). Student verbal contributions were scored so that the contributions regarding various types of information could be ascertained. One-way ANOVAs were used for each analysis. Results of the ANOVAs indicate significant differences between the two groups for the informational categories of "identifies learning strengths," $F(1, 19) = 13.04, p = .002$, "identifies learning weaknesses," $F(1, 19) = 4.99, p = .038$, and "identifies goals," $F(1, 19) = 5.31, p = .033$. When student contributions made during the rest of the conference were aggregated, no difference was evident between the two groups, $F(1, 19) = .12$, with the aggregate mean for the treatment group being 34.1 ($SD = 26.9$) and the control group mean being 30.2 ($SD = 26.1$).

Participants in the IEP conference rated the students on their performance during the IEP conference using the Student Participation Rating Scale. Results of the analyses indicated no differences between the two intervention groups (Van Reusen & Bos, 1994). The length of the conference is critical to the application of this IEP participation strategy. Results of a one-way ANOVA indicated no significant difference between the two groups, $F(1, 19) = .55$. The mean conference length was 23.64 min ($SD = 10.47$) for the treatment group and 26.80 min ($SD = 8.88$) for the control group. The results of this study indicate that when high school students with LD were taught an IEP participation strategy, they provided more goals and information during their conferences than students who did not learn the strategy (Van Reusen & Bos, 1994).

Abery, Rudrud, Arndt, Schauben, and Eggebeen (1995) reported on the efficacy of a Classroom-Based Competency Building Program (CBCBP) curriculum and the Family Education and Support (FES) component of the program on the self-determination skills of 18 high school students with intellectual disability (ID). The instruction of the CBCBP curriculum provides youth with disabilities the opportunity to learn, practice, and refine the skills, knowledge, and attitudes identified as necessary for self-determination. The curriculum consists of 10 modules that focus on the following skills: self-awareness, self-esteem, perceptions of personal control, personal values, goal setting, assertive communication, choice making, self-regulation, problem solving, and self-advocacy. The FES curriculum contains eight modules covering a variety of topics related to self-determination, including planning one's personal future, conducting family meetings, balancing self-determination and family values, promoting choice making,

supporting problem solving, realizing one's vision, encouraging personal advocacy, and developing linkages between home and community (Abery et al., 1995).

A pre-post group research design was used to examine the efficacy of the CBCBP and FES instruction on self-determination (Abery et al., 1995). The CBCBP sessions were implemented over a 7-month period in 24 weekly sessions approximately 90 min in length. The FES component of the curriculum was implemented individually with families concurrently with the CBCBP sessions. Each module took between one and four sessions to present, with each session lasting approximately 2 hr. The dependent variable was the students' self-determination skills measured by the Self-Determination Skills Evaluation Scale (SDSES) and the Opportunity and Exercise of Self-Determination Scale (OESDS).

Abery et al. (1995) reported the results of a matched-pairs *t* test on parents' pre- and posttest total SDSES scores. Parents reported significant improvement in their children's self-determination skills following implementation of the CBCBP, $t(17) = 3.17, p = .006$. Follow-up tests demonstrated significant perceived improvement in each of the subscales of the SDSES: choice making, $t(17) = 3.09, p = .007$; problem solving, $t(17) = 2.22, p = .040$; self-regulation, $t(17) = 3.30, p = .004$; and assertiveness self-advocacy, $t(17) = 2.91, p = .010$. Thus, the CBCBP intervention seemed to have facilitated the development of all the targeted skills. Abery et al. further reported the evaluation of the FES component of the intervention through analysis of parents' responses to the OESDS. A matched-pairs *t* test showed significant increases pre- to postintervention in the degree to which students were provided with opportunities for

personal control within the context of family life, $t(16) = 3.80, p = .002$. The results of this study provide preliminary support for the efficacy of providing instruction to students with mild cognitive disabilities in an effort to enhance the extent to which they are able to function as self-determined individuals and exercise control over their lives. Overall, the participants demonstrated enhanced choice making, problem solving, self-regulation, and self-advocacy (Abery et al., 1995).

Cross, Cooke, Wood, and Test (1999) reported on the effects of two interventions, the McGill Action Planning System (MAPS) and the Choosing Employment Goals strand of the Choicemaker curriculum (Choicemaker), on increasing the self-determination skills of 10 high school students with mild to moderate intellectual disabilities. These modified programs were designed to foster self-determination and student involvement in the transition discussion in the IEP meeting. After pretesting, the participants were assigned to one of two instructional groups, MAPS or Choicemaker. The instruction in MAPS lessons required a total of 830 min across 18 class sessions while Choicemaker lessons totaled 770 min across 16 class sessions. A multiple-baseline design across five goal areas (employment, education, residential choices, recreation, and leisure) was used to gauge changes in the clarity and specificity of student responses to interview questions regarding goals addressed by the five instructional units (Cross et al., 1999).

The results of the study indicated no differences between the students who participated in MAPS instruction versus Choicemaker instruction in terms of scores on the Arc's Self-Determination Scale (the student self-rating scale) and the Choicemaker Self-Determination Assessment (the teacher rating scale), oral responses to interview

questions regarding transition goals, and expressing preferences at IEP meetings (Cross et al., 1999). Both interventions resulted in significant changes in the pre-post test scores on student self-ratings measured by the Arc's Self-Determination total score and autonomy subscale as well as the teacher ratings on the Choicemaker Self-Determination Assessment subscales of choosing goals, expressing goals, and taking action. The findings suggest that while both interventions resulted in significant changes in students' self-rating of their own self-determination skills and their teachers' rating of both students' self-determination skills and the opportunity to demonstrate self-determination skills at school, students displayed only a limited ability to use their new self-determination skills during both the interview and their IEP meeting (Cross et al., 1999).

German, Martin, Marshall, and Sale (2000) reported the effects of the Take Action intervention on six high school students with mild to moderate intellectual disability. The intervention is a systematic model-lead test approach that teaches students a process to attain their daily goals. A videotape provides the model and detailed lesson plans describe the activities, student worksheets, and student competency checks. The participants received instruction in four 90-min sessions over 12 weeks. A multiple-baseline design across participants was used to determine the effectiveness of the intervention. The results of the study suggest that the Take Action intervention improved the students' daily goal-attainment performance (German et al., 2000).

Zhang (2001) reported the effects of the Next S.T.E.P. curriculum on the self-determination skills of 71 ninth-grade students, ages 14 to 19 years old, with learning disabilities. The curriculum is designed to teach adolescents with and without disabilities

the skills they need to participate successfully in a self-directed transition planning meeting. The curriculum consisted of lessons focusing on the following skills: (a) self-evaluation of important skills needed for the transition; (b) choosing goals and activities in four important transition areas, including personal life, education and training, jobs, and independent living; (c) taking charge of their personal transition planning meeting; and (d) following through on choices and keeping track of progress. A pre-post research design with an untreated control group was used to examine the effects of the self-determination instruction. The treatment group received 50 min of instruction for 19 sessions on the Next S.T.E.P. self-determination curriculum, while the control group was not instructed in any self-determination curriculum. The dependent variable was the total self-determination score obtained from the Arc's Self-Determination Scale (Zhang, 2001).

Zhang (2001) reported that the treatment group, compared to the control group, improved significantly in the posttest while the control group did not. The average pretest score for the control group was 95.2. This score was higher than the average pretest score for the treatment group, which was 89.1. In the posttest, the treatment group achieved an average score of 98.1. This score was 2.8 points higher than the average score for the control group, which was 95.3. The posttest adjusted means for the control and the treatment groups were 93.4 and 98.8, respectively. Zhang further reported that the results of an analysis of covariance (ANCOVA) indicated a statistically significant difference between the two groups. The F value for the adjusted between group means was 5.6 ($p < .05$). The null hypothesis was rejected, indicating a statistically significant difference

between the treatment and control groups. The observed power for adjusted between (type of instruction) was .65. Levene's test of equality of error variance yielded an F value of 1.87. Because this value was less than the .05 level of significance, the null hypothesis was not rejected. Therefore, the assumption of homogeneity of variance was met. The results of the ANCOVA can be interpreted to mean that the Next S.T.E.P. instruction significantly improved participants' self-determination skills as measured by the Arc's Self-Determination Scale (Zhang, 2001).

Eisenman and Tascione (2002) reported the responses of 22 high school students with LD to a teacher's intervention intended to promote self-realization, a fundamental component of self-determination. Activities were embedded within the general English curriculum and included: (a) a personal essay about their experiences living with a disability, (b) a proposal outlining steps for a successful transition from one grade to the next or from middle school to high school, (c) an essay of argument regarding whether students with special education needs should be required to pass the state's academic accountability assessments, (d) a brochure to persuade students with special education needs to become self-advocates, and (e) a self-assessment describing what they had learned about their special education needs and how they would use this information in the future. Instructional time, including production of a final student product, lasted two to three weeks for each composition, and included daily 90-min class periods delivered in a special education classroom (Eisenman & Tascione, 2002).

A qualitative inquiry approach was used to explore students' experiences and perspectives (Eisenman & Tascione, 2002). Data were collected through multiple

methods, including semistructured student interviews, brief weekly survey written response probes, student work, and a teacher journal. Themes that emerged included: (a) silence and misconceptions about special education and disability; (b) negative stereotyping; and (c) inquiry about their disability, special education, and accommodations. However, through the intervention, student writings and interviews began to reflect increased knowledge and self-awareness about disabilities, the purpose of special education, accommodations, and transition planning. The results indicate that adult voices at school and home are rarely a part of students' limited conversations about disability and special education. The authors suggested that an important prerequisite to self-determination interventions are frank discussions among parents, teachers, and other educators (Eisenman & Tascione, 2002).

Lancaster, Schumaker, and Deshler (2002) evaluated the effects of using an Interactive Hypermedia Program (IHP) with a Self-Advocacy Strategy on 22 high school students with high incidence disabilities (LD, Behavioral Disorders (BD), and Other Health Impairment (OHI)). The Self-Advocacy CD-ROM (SACD) was designed to help students prepare for and participate in any type of conference situation. The SACD presents the content of The Self-Advocacy Strategy instruction in a nonlinear format; it allows students to navigate individually through the instruction and repeat lesson segments and review content as needed, and does not require much teacher time. A mixed-methods research approach was used simultaneously in this study to evaluate the effects of the IHP-Self-Advocacy Strategy Instruction: (a) a multiple-probe across

students design, (b) a posttest-only comparison-group design, and (c) a pretest-posttest comparison group design (Lancaster et al., 2002).

There were three experimental groups in this study (Lancaster et al., 2002). The live instruction group (LI) received one-on-one instruction from the researcher, who was actively involved in asking and answering questions, modeling the steps and behaviors, role playing with the students, and providing feedback. Instruction took place in five to six 30- to 45-min sessions. The IHP group also completed instruction in five or six 30- to 45-min sessions. The role of the instructor was to introduce students to the SACD, ensure they were using it correctly, check for understanding following completion of each lesson, answer any questions, and role play with the students once they had completed the SACD instruction. The group that received no instruction (NI) met with the researcher individually prior to the IEP conference for 20 min, who described the procedures and sequence of events to take place during the IEP meeting, and asked each student to write down any information he or she wished to share with the other participants. The dependent variable was the student's use of the Self-Advocacy Strategy as measured by an oral test, the SHARE Checklist, the PLAN Checklist, and a Knowledge Test (Lancaster et al., 2002).

Lancaster et al. (2002) demonstrated mixed results for the study. Results of the ANCOVAs indicated a significant difference between the IEP scores (oral test) of the LI students and the comparison students [$F(2, 13) = 16.7, p < .001$] and between the IEP scores of the IH students and the comparison students [$F(2, 13) = 35.97, p < .001$]. Students in the IH group earned an average of 4.94 points out of 5 possible points on the

Share Checklist (99%), while students in the LI group obtained an average of 4.88 points (97%). Students in the comparison earned an average of 4.33 points (86%). A Kruskal-Wallis analysis of variance (ANOVA), a nonparametric statistical test, revealed no significant difference at the .05 level between the three groups on the Share Checklist (formula). All students in the IH and the LI groups received 4 out of 4 possible points on the Plan Checklist (100%) during their IEP conferences (Lancaster et al., 2002).

By comparison, students in the comparison group received an average of 1.7 points (43%). A Kruskal-Wallis ANOVA, a nonparametric statistical test, also revealed that there was a significant difference between the mean scores on the Plan Checklist between the three groups (Lancaster et al., 2002). Mean percentage scores and standard deviations were calculated for the IH and LI groups on the knowledge pretest and posttest. Students in the IH group correctly answered an average of 19% of the items on the pretest with a standard deviation of 2.70, an average of 97% of items on the posttest with a standard deviation of 2.70, and an average of 97% of items on the posttest with a standard deviation of 7.44. Students in the LI group correctly answered an average of 16% of items on the pretest with a standard deviation of 2.39 and an average of 94% of items on the posttest with a standard deviation of .834. To compare the differences between these pretest and posttest scores within each group, *t* tests were performed, indicating that: (a) the posttest scores of students in the IH group were significantly higher than their pretest scores [$t(7) = 12.25, p < .00$] and (b) the posttest scores of the LI group were significantly higher than their pretest scores [$t(7) = 12.50, p < .001$].

To determine whether the mode of instruction had differential effects on the students' Knowledge Test scores, *t* tests were performed, indicating no significant difference between the pretest scores [$t(7) = .39, p = .70$] and between the posttest scores [$t(7) = 1.26, p = .27$] of students in the LI and HI groups (Lancaster et al., 2002). This study demonstrated that an interactive hypermedia program combined with a relatively small amount of teacher interaction (approximately 1 hr) per student is as effective in teaching a complex self-advocacy strategy to students with disabilities as live instruction involving approximately 3 hr of teacher time per student (Lancaster et al., 2002).

Mazzotti, Test, Wood, and Richter (2010) examined the effects of computer assisted instruction (CAI) on students' acquisition of knowledge of postschool options (i.e., employment, education, independent living) on four high school students with mild to moderate intellectual disabilities. The intervention was a researcher-developed PowerPoint presentation that included visual and audio components. The participants received instruction for four 15-min sessions per week. A multiple-baseline design across behaviors replicated across participants was used. The results showed a functional relation between the independent and dependent variable, indicating that CAI was an effective strategy for teaching students about their options for postschool life (Mazzotti et al., 2010).

Wood, Kelley, Test, and Fowler (2010) reported the effects of two interventions, audio-supported text and explicit instruction, on students' knowledge of their rights, responsibilities, and accommodations in postsecondary education in four high school seniors with mild disabilities (ADD, LD, and bipolar disorder). The audio-supported text

intervention included printed copies of the document entitled *Students with Disabilities Preparing for Postsecondary Education: Know Your Rights and Responsibilities* from the U.S. Department of Education, Office for Civil Rights (US DOE, OCR, 2011). Students were able to reference the document as they listened to prerecorded verbatim information during the audio-supported instruction. The explicit instruction intervention included scripted lesson plans on specific definitions and vocabulary from the OCR document, specific examples and nonexamples of the targeted rights and responsibilities, and scripted step-by-step prompts with teacher and student responses to reference when delivering the explicit instruction (Wood et al., 2010).

After pretesting and the initial baseline data collection phase, the participants were randomly assigned to content areas (i.e., accommodations or rights and responsibilities) and conditions (i.e., audio support or explicit instruction). The conditions across students were counterbalanced to compare data across phases. The audio-support sessions ranged between 8 and 10 min per session while the explicit instruction lasted for 10 min per session. The number of sessions per intervention was not described. A simultaneous treatment design with an initial baseline and a final best treatment phase was used to compare the effects of audio support and explicit instruction on students' knowledge of their ADA rights and responsibilities (Wood et al., 2010). In a simultaneous treatment design, the two conditions are presented concurrently; however, the tasks for teaching each condition are discrete. The results of the study indicated a functional relation with explicit instruction producing higher scores compared to student scores during the audio-supported condition for all students (Wood et al., 2010).

Woods, Sylvester, and Martin (2010) reported the effects of the Student-Directed Transition Planning curriculum on the self-determination skills and student participation in transition IEP meeting discussions of 35 secondary school students, ages 14 to 20, in multiple disability categories (LD, EBD, ID, OHI, vision, and TBI). The curriculum is designed to facilitate high school to adult life planning partnerships between students with mild or moderate disabilities, their families, and educators, and includes instruction on transition terms and concepts. A pre-post experimental design with a control group utilizing random student assignment determined differences in knowledge gained among and between groups receiving instruction in the Student Directed Transition Planning lessons and those who did not. The treatment group received 6 hr of instruction for two to three weeks on the Student-Directed Transition Planning lessons and the control group was not instructed with any transition planning curriculum. The dependent variables were transition knowledge and self-efficacy as measured by two researcher-developed transition knowledge tests and a student self-efficacy scale (Woods et al., 2010).

Woods et al. (2010) reported that the relationship between the knowledge pretest and posttest scores did not differ significantly as a function of the independent variable, $F(1, 31) = 0.180, MSE = 10.17, p = .674$. However, the ANCOVA produced significant results: intervention group posttest mean, $M = 41.68, SD = 8.95$; control group posttest, $M = 33.50, SD = 9.42, F(1, 32) = 4.58, MSE = 55.09, p = .04$. Self-efficacy increased significantly for the intervention group, while the control group stayed about the same. The posttest for the intervention group ($M = 20.63, SD = 5.56$) was greater than the pretest ($M = 16.79, SD = 4.38$), $t(18) = -3.16, p = .005$. Woods et al. determined that there

were differences between intervention and control groups in knowledge of transition terms and concepts, and perceptions of self-efficacy in the transition planning process. Study results indicated that students receiving instruction in Student-Directed Transition Planning experienced a statistically significant knowledge gain and a statistically significant increase in perceived self-efficacy in the transition planning process compared to the control group (Woods et al., 2010).

Doren, Lombardi, Clark, and Lindstrom (2013) reported on the effects of the PATHS curriculum on proximal social, cognitive, career, and self-determination outcomes of 111 high school girls (Grades 9-12) in multiple disability categories (LD, autism, ID, OHI, orthopedic impairment, and multiple disabilities) or at risk for school failure. At risk for school failure was defined as facing one or more barriers to learning (e.g., frequent absenteeism, suspension, or drop-out history), family-living (e.g., homelessness, difficult family circumstances, foster care), employment (no prior work or volunteer experience), at-risk behaviors (e.g., previous or current substance abuse problem, prior arrests, or jail time), and health (mental or chronic health issues).

The PATHS intervention is a comprehensive career development curriculum that contains lessons on self-awareness, disability awareness, gender identity, and career and college (Doren et al., 2013). A pre-post control group design was used to evaluate the curriculum. The treatment group received 50 min of instruction daily over an 18-week period and the comparison group received typical transition services available at the high school. The dependent variables in this study were: vocational skills self-efficacy, vocational outcome expectations, social support and relevance of school, social efficacy,

self-realization and autonomy, disability and gender-related knowledge, and self-advocacy. The dependent variables were measured by the Vocational Skills Self-Efficacy Scale (VSSS), Outcome Expectations Scale, Student Engagement Inventory (SEI), the College Self-Efficacy Inventory (CSEI), the Arc's Self-Determination Scale, a researcher-developed Disability and Gender Knowledge Scale, and the College Students with Disabilities Campus Climate (CSDCC) Survey (Doren et al., 2013).

Doren et al. (2013) found that the treatment group showed statistically significant improvement on measures of autonomy ($pr = 0.55$) and disability and gender-related knowledge ($pr = 0.68$), whereas those in the comparison group did not show improvement in these areas. The social support or relevance of school scale showed a medium effect size ($pr = 0.60$). In addition, the treatment group showed significant and large gains in self-determination outcomes related to autonomy and disability and gender-related knowledge. Meaningful gains were noted in perceptions of social support and relevance of school. Significant and large gains were also noted in vocational skills self-efficacy and disability and gender-related knowledge and showed meaningful improvements in self-advocacy, autonomy, and vocational outcome expectations as observed by the magnitude of the effect sizes. However, only a small effect was noted in perceived social support and relevance of school. The findings suggest that the instruction of the PATHS curriculum can improve important indicators of positive career development and adjustment in high-risk adolescent girls (Doren et al., 2013).

Studies with multiple interventions. Two studies examined the effects of multiple self-determination interventions. Wehmeyer et al. (2010) reported the effects of a

longitudinal study that examined the impact of interventions to promote self-determination and postschool outcomes of 371 students with intellectual and learning disabilities. A longitudinal randomized trial placebo control group was used in this study. Students in the control group received instruction from multiple self-determination interventions over the course of the instructional period. These interventions included the Choicemaker curriculum, the Self-Directed IEP, the Self-Advocacy Strategy, Steps to Self-Determination, Whose Future is it Anyway?, and the Self-Directed Learning Model of Instruction (SDLMI). The frequency and duration of the treatment for the control group varied across interventions over a three-year period. The dependent variable was the participants' self-determination as measured by the Arc's Self-Determination Scale (ARC) and the Air Self-Determination Scale (AIR).

Wehmeyer et al. (2010) reported a significant overall increase in AIR-S scores over time, $F(1, 446) = 32.10, p < .0001$, a significant intervention group effect, $F(1, 365) = 8.62, p < .005$, and a significant intervention group by time interaction, $F(1, 446) = 6.70, p = .01$. There were differences between the intervention and the control groups in initial status and the slope, with the intervention group showing significantly more positive increases on the AIR-S over time. When disability and gender were added to the model, no additional significant effects were found. This suggests that the only factor that influenced the latent mean and slope of the AIR-S was assignment to the intervention and control group. Wehmeyer et al. also reported a significant overall increase in the ARC self-determination scores (SDS) over time, $F(1, 448) = 51.73, p < .0001$, but a nonsignificant intervention group effect, $F(1, 368) = 1.05, p = .31$, and group by time

interaction, $F(1, 448) = 0.21, p = .65$. This suggests no initial mean-level differences between the intervention and control groups as well as a consistent pattern of increasing scores on the SDS over time regardless of assignment to intervention or control group. The results of this study suggest that students with disabilities who participated in self-determination interventions over a three-year period showed significantly more positive patterns of growth in their self-determination scores than did students not exposed to self-determination interventions during the same time period. However, the specific pattern of differences varied across the dependent measures used in this study (Wehmeyer et al., 2010).

Wehmeyer, Palmer, Williams-Diehm, et al. (2011) reported on the impact of technology use in transition planning on the self-determination skills of 194 high school students in multiple disability categories. A randomized-trial control group design was used to examine whether or not the use of cognitively accessible technology would improve outcomes related to self-determination for students receiving instruction in transition planning designed to promote student involvement. The treatment group (technology group) received instruction using student involvement in transition planning intervention with technology to support transition planning. The control group (student involvement group) received instruction using student involvement in transition planning intervention. The frequency and duration of the intervention was not reported. The dependent variables were self-determination and youth empowerment. The dependent variables were measured by the the Arc's Self-Determination Scale, the Air Self-

Determination Scale, and the Transition Empowerment Scale (Wehmeyer, Palmer, Williams-Diehm, et al., 2011).

Wehmeyer, Palmer, Williams-Diehm, et al. (2011) reported significant time effect for the Arc's Self-Determination Scale only, $F(1, 193) = 5.04, p < .03$, as well as a significant time by intervention effect for the Arc's Self-Determination Scale, $F(1, 193) = 3.92, p < .05$ and the Air Self-Determination Scale, $F(1, 193) = 6.63, p < .01$. No significant effects were found for the Transition Empowerment Scale. The results from this study provide support for the relationship between student involvement in transition planning and enhanced self-determination and evidence of a causal relationship between efforts to promote such student involvement combined with technology use and enhanced self-determination (Wehmeyer, Palmer, Williams-Diehm, et al., 2011).

Research Design

Based on the 28 studies reviewed, 31% ($n = 9$) used a single-subject research design, 14% ($n = 3$) used a group research design, 10% ($n = 2$) used a pre-post research design with no control group, and 21% ($n = 6$) used a pre-post research design with a control group. Ten percent ($n = 2$) of the studies reviewed used a wait-list control group. Three percent ($n = 1$) used a qualitative research design, 3% ($n = 1$) used a mixed-methods research design, and 7% ($n = 2$) used a longitudinal research design. Figure 2 provides a graphical representation of the research design used in the 28 studies reviewed.

Control group. A summary of the type of control groups and use of randomization is shown in Table 1. Of the 28 studies reviewed, 17 (58%) used a control

group. Of the 58% of the studies that used a control group, 47% used a pre-post research design ($n = 13$). Seventeen percent ($n = 5$) used a waitlist control group design, 11% used a longitudinal research design ($n = 3$), and 23% used a group research design with a control group ($n = 6$). Of the 58% of the control groups, 94% of the studies used a random assignment to create the treatment and control groups. Six percent of the studies ($n = 2$) did not use random assignment, which suggests that participants have the same probability of being placed in the treatment or the control group (McMillian, 2008). The purpose of random assignment is to balance the peripheral characteristics of the participants that may influence the outcome, therefore minimizing the threat to internal validity (Creswell, 2012; McMillian, 2008).

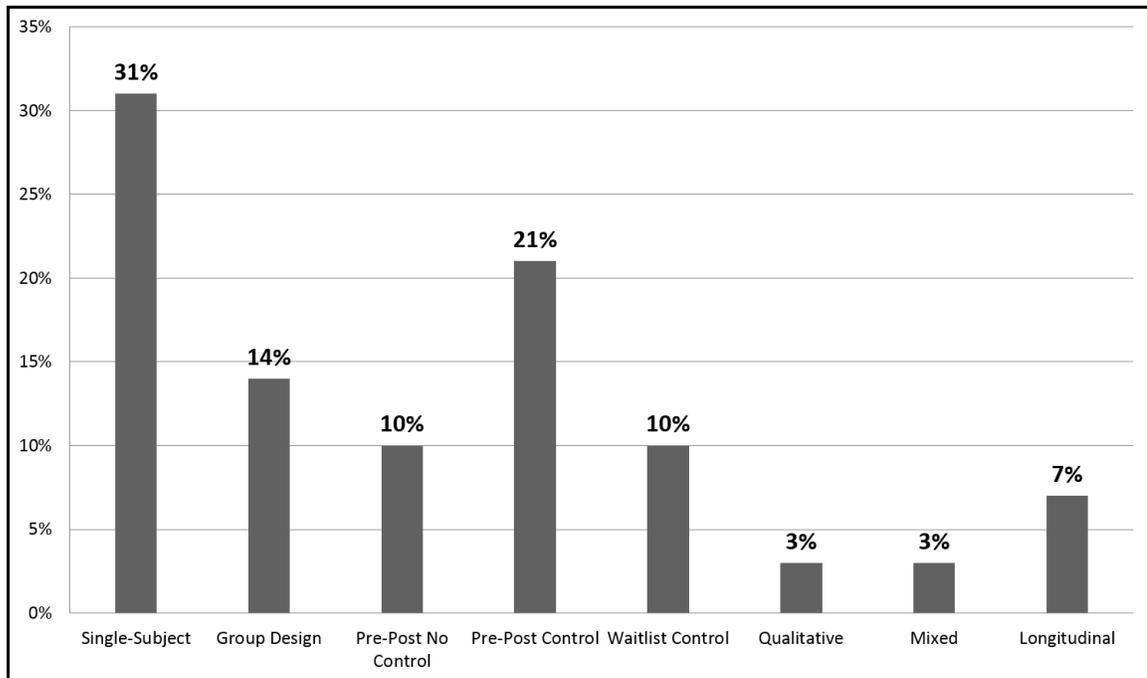


Figure 2. Research designs used in the 28 studies reviewed.

Table 1

Use of Control Groups in the 28 Studies Reviewed

Element	Control Percentage	Randomly Assigned
Control Group	23%	100%
Pre-Post Control	47%	94%
Longitudinal	11%	100%
Waitlist	17%	100%

Participants

In the 28 studies reviewed, 79% ($n = 3,337$) of the participants were between the ages of 14 and 21 years old. Fourteen percent ($n = 3$) of the studies reported that the participants were between the ages of 12 and 13 years old. Three percent ($n = 1$) reported

a mixed age range from 13 to 21 years and 3% ($n = 1$) did not provide an age range for the participants. In the 28 studies reviewed, 53% ($n = 2,239$) of the participants had a learning disability. Twenty-three percent ($n = 971$) of the participants had an intellectual disability. Four percent ($n = 169$) of the participants had emotional and behavioral disability and 4% ($n = 169$) of the participants had other health impairments. Two percent ($n = 84$) of the participants had autism or Asperger's syndrome and 1% ($n = 42$) of the participants had a speech disorder. Eleven percent ($n = 464$) of the participants' disability category was not identified in the 28 studies reviewed. Figure 3 provides a graphical representation of the participants' disability category in the 28 studies reviewed.

Setting

As shown in Figure 4, of the 28 studies reviewed, 14% ($n = 4$) of the studies were conducted in a junior high or middle school (Grades 7-8) environment. Ten percent ($n = 2$) of the studies were conducted in a secondary school (Grades 7-12), while 76% ($n = 21$) of the studies were conducted in a high school (Grades 9-12) environment.

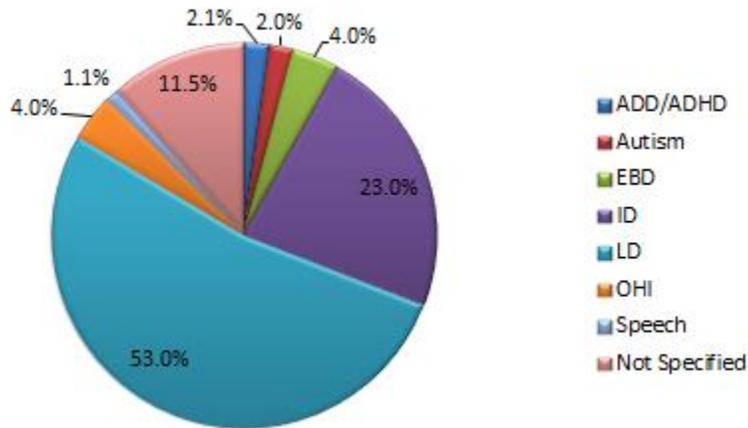


Figure 3. Participant disability categories in the 28 studies reviewed.

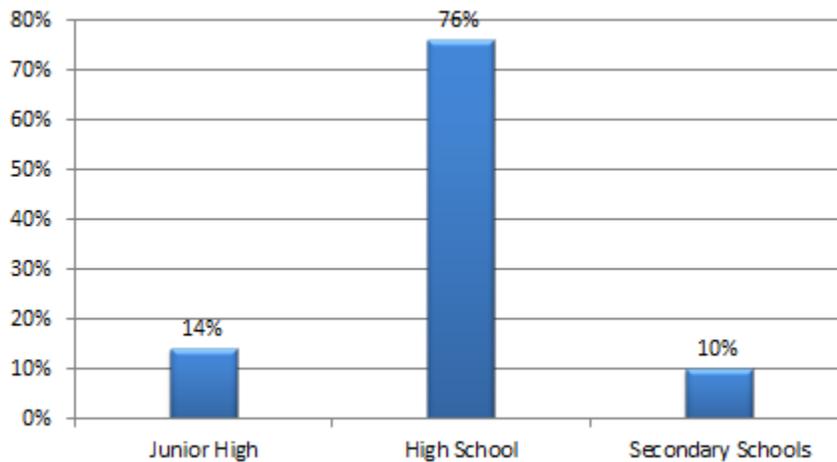


Figure 4. Settings used in the 28 studies reviewed.

Length and Duration of the Intervention Session

Of the 28 studies reviewed, 14% ($n = 4$) conducted the intervention over a period of 6 to 12 weeks. Twenty-eight percent ($n = 8$) of the studies were 5 weeks or less in duration and 24% ($n = 6$) of the studies were 13 or more weeks in duration. Thirty-four percent ($n = 6$) of the studies did not report the duration of the study. Each intervention

was comprised of a specific number of intervention sessions, ranging from less than 5 to 13 or more. Seventeen percent ($n = 4$) of the studies conducted 6 to 12 sessions, 10% ($n = 2$) of the studies conducted less than 5 sessions, and 31% ($n = 8$) of the studies conducted 13 or more sessions. Forty-one percent ($n = 11$) of the studies did not report the number of individual intervention sessions. Lastly, the intervention sessions were not delivered on a weekly basis. Seventeen percent ($n = 4$) of the intervention sessions were delivered three or more times per week and 7% ($n = 2$) were delivered twice per week. Seventy-six percent ($n = 21$) of the studies did not report how often the intervention sessions were held.

Number of intervention minutes. The number of intervention minutes the participants in the studies received was based on the number of sessions multiplied by the number of minutes per session, if the data were reported. For example, the number of intervention minutes for an intervention that was 45 min long, for 10 sessions, would be calculated by multiplying 45 by 10 to equal 450 min. The total number of intervention minutes was qualified by the participant being with the researcher or instructor for the entire intervention sessions, to include coaching sessions, small group or individual instruction, teacher demonstrations, student demonstrations, field-related activities, hands-on activities, and preparation for and participation in IEP and transition planning meetings.

Of the 28 studies reviewed, 31% ($n = 8$) of the studies were 8 to 44 min per intervention session and 24% ($n = 6$) consisted of 45 to 90 min per intervention session. Forty-five percent did not report the number of intervention minutes per session. In

relation to the total number of intervention minutes within the 28 studies reviewed, 28% ($n = 7$) of the studies provided 1 to 719 min of intervention. Fourteen percent of the studies delivered 720 to 999 min and 7% ($n = 2$) of the studies delivered 1,000 min of intervention. Fifty-one percent ($n = 14$) of the studies did not report enough data to determine the number of total intervention minutes.

Dependent Variables

Fifty different measures were used to evaluate the dependent variables within the 28 studies reviewed. Based on the information provided in each study and a compilation of the dependent variables listed in each study, 20 different dependent variables were used throughout the studies reviewed. The five most common dependent variables were self-determination (22%), transition knowledge and involvement (17%), IEP participation (13%), postschool goals (11%), and self-efficacy (8%). Figure 5 provides a graphical representation of the most common dependent variables.

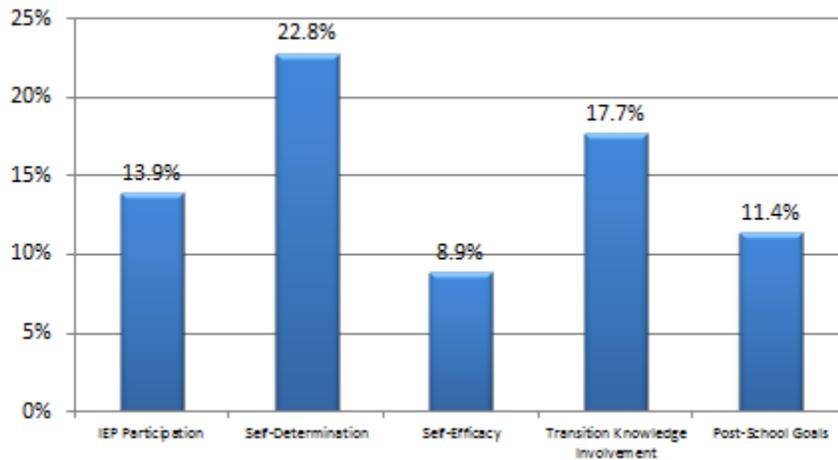


Figure 5. Five most common dependent variables in the 28 studies reviewed.

Self-Advocacy Research

Roessler, Brown, and Rumrill (1998) examined the effects of a self-advocacy training program on three college students with disabilities (VI, LD, and OHI) enrolled full-time at a large four-year state university. The intervention included 7 lessons presenting 17 target behaviors of an academic accommodation request. The 7 lessons included the following target behaviors: (a) Introduction – greeting, name, and reference to the class taken; (b) Disclosure – statement of disability, presented in functional terms; (c) Solution – previous accommodation(s) used, benefit, and statement of desire to use similar accommodations in this class; (d) Resources – explanation of sources for accommodations and what the student will do to implement them; (e) Agreement – a question as to the acceptability of accommodations and arrangements and a statement of affirmation; (f) Summary – restatement of accommodations, what the student will do, and what the professor’s role or responsibility will be; and (g) Closure – general positive

statement and expression of appreciation. The participants received individual 90-min sessions of instruction (1:1), twice each week for four weeks. Instructional strategies included didactic teaching, modeling, role playing, and feedback. A single-subject multiple-baseline design across participants was used in this study. The results indicate that the students acquired, maintained, and generalized the skills taught in the study.

Palmer and Roessler (2000) evaluated the effects of a program in self-advocacy and conflict resolution (SACR) on 50 college students with disabilities (LD and OI made up more than half of the sample). The educational sites were geographically and academically diverse: two universities and two community colleges in the South; one Midwestern university, and one Northeastern university. A group research design with a control group was used to examine the effects of the SACR intervention. Students were randomly assigned to the treatment group ($n = 24$) and the control group ($n = 26$). The dependent variables were the students' self-advocacy and conflict resolution skill acquisition, self-efficacy, knowledge of academic accommodation rights and responsibilities, and social competence as measured by Behavioral Rating of Targeted Skills, Task-Specific Self-Efficacy (SA & CR) scale, and a Rights and Responsibilities: Disability Accommodation Knowledge Survey (RR-DAKS).

The SACR was designed to prepare college students with disabilities to request classroom accommodations. The SACR intervention evaluated in this study addressed both the self-advocacy and conflict resolution skills that students need to implement their rights to accommodation in the educational process. In the SACR training program, students received training about academic barriers and reasonable accommodations. They

were also provided instruction on civil rights laws as well as their responsibilities for requesting accommodations in postsecondary settings. Additional training in social competence skills for self-assertion and self-advocacy was also provided along with opportunities to practice situational conflict resolution strategies. The participants received a total of 8 hr of instruction in which they observed the trainer model the skills, practiced requesting accommodations and negotiating with the trainer(s) and with each other, and role-played requesting accommodations and negotiating with training faculty and other staff members.

Palmer and Roessler (2000) reported that the treatment group also exhibited a significantly higher mean number of self-advocacy behaviors, $F(11, 38) = 60.93, p < .0001, R^2 = .69$, and conflict resolution behaviors, $F(11, 38) = 120.29, p < .0001, R^2 = .80$. As a result of the intervention, trained individuals possessed significantly more self-advocacy and conflict resolution skills than untrained individuals. In addition, the authors reported statistically significant differences between the treatment and control groups in general knowledge of accommodation rights and responsibilities, $F(11, 38) = 11.79, p < .0015, R^2 = .35$. The researchers found no significant differences in knowledge acquisition among the training sites, nor was there a significant condition by location interaction. These findings suggest that as a result of the training, regardless of the geographic setting, participants' knowledge of rights to and responsibilities for academic accommodations increased significantly. As a result of the intervention, the self-efficacy of the treatment group in requesting accommodations, $F(11, 38) = 10.58, p < .002, R^2 =$

.52, and resolving conflicts associated with those requests, $F(11, 38) = 21.75, g < .0001, R^2 \wedge .53$, increased significantly in comparison to the control group.

Individuals who received the training believed that they were more capable of successfully requesting academic accommodations and better able to successfully resolve disputes that may arise during that process. However, the researchers reported that there was a location effect check throughout, $F(11, 38) = 3.01, g = .02$, in the Request Self-Efficacy (REQSE) variable. An examination of the REQSE means and standard deviations by location indicated that two of the training sites exhibited a lower degree of variance, which may account for the location effect. The self-advocacy and conflict resolution behaviors of the treatment group were determined significantly more effective in the global assessment of social competence, $F(11, 38) = 10.03, g < .003, R^2 = .43$. Independent observers perceived the individuals in the treatment group as significantly more socially competent in requesting accommodations and resolving disputes that arose during the request process.

In another study, Walker and Test (2011) used the SACR training program to teach African American college students how to request academic accommodations. Findings demonstrated a functional relation between the self-advocacy intervention and students' ability to request academic accommodations in a role-play situation. Additional data indicated that the students were able to generalize their performance to meetings with their instructors. Furthermore, the findings indicated a high degree of social validity of outcomes and procedures. All of the participants in the study rated the SACR intervention as effective in empowering them to use advocacy skills to request needed

accommodations from their current professors. The Director of Disability Support Services rated the SACR intervention as a practical resource that could be used with other students with disabilities. Social validity data collected from the faculty panel members indicated that each member rated the preintervention videos lower than the postintervention videos, providing additional confirmation of the positive effects of the intervention on students' ability to request and acquire academic accommodations. Walker and Test's findings are consistent with previous research using SACR with college students with disabilities, demonstrating that college students with LD can acquire the self-advocacy skills to request academic accommodations (Palmer & Roessler, 2000; Roessler et al., 1998).

In addition, Walker and Test (2011) demonstrated how the principles of self-determination, when referring to minority students, can be used to empower students to advocate for themselves. Although the SACR was not intended to target minority students with disabilities, throughout the lessons each participant gained a firm understanding of his or her disability and how it affected his or her learning, was able to verbally articulate needs, and understood how to use these advocacy skills to break down barriers that could potentially prevent academic success. Therefore, these results help to support the social significance of the intervention by demonstrating how the effect of the intervention met the participants' ability to acquire advocacy skills.

Pilot Study

Although there is evidence showing that the SACR intervention can be used to teach students with LD in postsecondary settings how to self-advocate and request

accommodations, no research has focused primarily on teaching this intervention to high school students with LD. In an attempt to better understand the effects of a self-advocacy intervention on students with LD, the researcher conducted a single-subject pilot study in the fall semester of 2013. The purpose of this study was to examine the effects of a self-advocacy intervention on the performance of former college students with LD when requesting academic accommodations in a role-play situation. The following questions were asked:

1. Is there a functional relation between a self-advocacy intervention and the ability of former college students with LD to request academic accommodations in a role-play situation?
2. After the self-advocacy intervention is taught, will former college students with LD maintain those skills two weeks later?
3. What are the participants' perspectives on their confidence in using the self-advocacy skills after the intervention?

A changing criterion research design was used in this pilot study to monitor the behavior over time. The changing criterion design was appropriate for this study because of the gradual, stepwise changes in the targeted behavior being monitored. This design requires initial baseline observations followed by the implementation of a series of treatment subphases. Each treatment subphase is associated with a stepwise change in criterion rate for the target behavior (Gast, 2010). Each phase of the design provides a baseline for the next phase. When the rate of the target behavior changes with each stepwise change in the criterion, therapeutic change is replicated and experimental

control is demonstrated. In this pilot study, the independent variable was a self-advocacy intervention that consisted of 17 target behaviors.

In treatment Subphase I of the intervention, the participant was taught the first eight targeted behaviors in Lessons 1 through 3. In treatment Subphase II of the intervention, the participant was taught the next four targeted behaviors in Lessons 4 and 5 and was then asked to role play the first eight target behaviors previously taught in treatment Subphase I, and incorporate the next four targeted behaviors taught in treatment Subphase II. In treatment Subphase III, the participant was taught the last five target behaviors in Lessons 6 and 7 and was then asked to role play the 12 target behaviors previously taught in treatment Subphases I and II, and incorporate the last 5 target behaviors taught in treatment Subphase III. In the self-advocacy intervention, each treatment subphase of the intervention served as a baseline for the next treatment subphase.

In order to be included in this study, participants had to meet the following criteria: (a) must be a former college student, (b) must have LD, (c) must have at least a 2.0 grade point average on a 4.0 scale, (d) must have requested support services through a university's disability support services office, and (e) must have had difficulty requesting accommodations from an instructor, or had never requested accommodations from an instructor. The researcher recruited participants for the pilot study through professional networking. Three former college students met the inclusion criteria. Due to conflicting schedules and time constraints to complete the study, only one participant was able to participate in the study.

Welden. Welden (a pseudonym) was a 20-year-old African American former college student who had attended Delaware State University in Dover, Delaware from 2009 to 2011. He had a 2.0 cumulative grade point average and had not yet declared a major. It is not clear when Welden was diagnosed with LD, but he was evaluated in 2000 and found to have a full-scale IQ score of 88 on the WISC-IV. His performance on the Verbal Comprehension Index (VCI = 85) placed him in the low average range, Perceptual Reasoning Index (PRI = 108) and Working Memory Index (WMI = 91) in the average range, and Processing Speed Index (PSI = 78) in the borderline range compared to other adolescents his age. At the time of this study, Welden had dropped out of college. According to Welden, he made the decision to drop out of college in the fall of 2012 because he was not performing well in his classes and felt that it was best to withdraw rather than having failing grades on his transcript. However, when he was enrolled in college, his accommodations included extended time on tests, use of a computer or word processor, use of a note taker, use of a tape recorder, and use of a calculator. Welden self-reported that he was an active participant in class and often sat in the front of the classroom. However, he acknowledged that it was difficult for him to admit his learning differences to others.

The setting for the pilot study was mutually agreed upon and took place at a university library and occurred twice per week for three consecutive weeks. The total intervention time for the participant across three treatment subphases was 180 min. The independent variable was the self-advocacy intervention, which consisted of seven scripted lesson plans. Each lesson focused on 1 or more 17 targeted behaviors identified

by Rumrill, Roessler, and Brown (1997) as important in self-advocating for academic accommodations. There were three dependent variables in this pilot study. The first dependent variable was the number of correctly demonstrated targeted behaviors in a role-play situation. The participant's performance was observed and then noted on the Data Collection Form: a recording system with operational definitions and a 2-point rating scale (yes, no). This determined the extent to which the 17 target behaviors were demonstrated. The 17 target behaviors were:

1. Greet instructor – Participant verbally stated a greeting such as hello, good morning, or good afternoon.
2. Introduce yourself – Participant introduced self by name (participant verbally stated first and last name) or made reference to a specific class (e.g., student verbally stated the name of the class, class number, and section).
3. Reference discussion – Participant made reference to the reason for the academic accommodation discussion.
4. Identify disability status – Participant made a general statement about his disability (e.g., “I have a learning disability”).
5. Explain disability in functional terms – Participant made a verbal statement that explained how the disability affects him (e.g., “As a result of my disability, it is difficult for me to stay focused for an extended period of time”).
6. Mentions previous accommodations – Participant made a verbal statement identifying the accommodation used in a previous course (e.g., “Using an

audio recorder helps me review class lectures,” or “I have used a note taker in my other classes in the past”).

7. Explain benefits of past accommodations – Participant explained the benefit of the accommodation in class (e. g., “This audio recorder makes it easier for me to review what was discussed in class”).
8. Request use of accommodation – Participant stated that he thinks the accommodation would be helpful in this class (e.g., “I would like to use a tape recorder in your class,” or “I think having a note taker would be helpful”).
9. Identify resources and how they assist – Participant verbally stated who or what office would be able to assist in providing an accommodation (e.g., the Special Education Office).
10. State your role as the student – Participant verbally stated what his responsibility for implementing the accommodation (e.g., “I will make arrangements for the reader to meet me at the classroom on the day of the test”).
11. Ask for agreement of the accommodation request – Participant asked the instructor if the accommodation plan (Target Behavior 8) sounds agreeable (e.g., “Does this seem like a workable plan to you?” or “Do these suggestions sound okay to you?”).
12. Affirm agreement of the accommodation request – Participant verbally responded to the instructor’s agreement with an affirmative statement (e.g., “Good” or “Okay”).

13. Restate accommodations – Participant verbally stated the solution or accommodation (e.g., “Good. I will plan to use a reader on test days,” or “I will plan to use a note taker in class”).
14. Clarify your role as the student – Participant verbally stated what he or she would do to arrange for the accommodations to take place (e.g., “I will contact the Special Education Office and take care of scheduling a reader on test days”).
15. Clarify instructor’s role in facilitating the accommodation request – Participant specifically stated what action the instructor needed to take (e.g., “You will help me identify a student in the class who will let me make copies of class notes”).
16. Close with a positive statement suggesting closure of the accommodation request discussion – Participant made a general statement (e.g., “I’m looking forward to your class”).
17. Express appreciation of the instructor’s time or consideration of the accommodation request – Participant made a verbal statement expressing his or her appreciation (e.g., “Thanks for your help,” or “I appreciate your support”).

The second dependent variable was the maintenance probe, which was given two weeks after withdrawal of intervention. The participant’s performance during the maintenance probe was documented on the Data Collection Form. The third dependent variable was the participant’s perception of the intervention, which was gathered during a

postintervention interview. The effectiveness of the intervention was determined through visual analysis of the data, percentage of nonoverlapping data (PND), and qualitative analysis of pre- and postintervention interviews with the participant.

Welden demonstrated low performance across the six sessions in the baseline condition ($M = 2.00$, $SD = 0.63$). He demonstrated low variability in the first three data points in baseline sessions and flat and stable performance in the last three data points in baseline. Welden's performance was characterized by low variability during baseline.

Upon introduction of Subphase I of the intervention, Targeted Behaviors 1-8 were taught, and the criterion for Subphase I was 8 out of 8 correctly demonstrated targeted behaviors. Welden demonstrated a change in level from baseline ($M = 2.00$, $SD = 0.63$) to Subphase I ($M = 7.43$, $SD = 0.78$). Welden showed an immediacy of change in the number of correctly demonstrated targeted behaviors. The data were characterized by low variability in the first four data points in Subphase I and a stable and consistent trend in the last three data points in Subphase I. PND were calculated to be 100% from baseline to Subphase I for Welden. He reached the criterion for Subphase I and performed at the criterion during the last three data points in Subphase I.

Upon introduction of Subphase II of the intervention, Targeted Behaviors 9-12 were taught, and the criterion for Subphase II was 11 out of 12 correctly demonstrated targeted behaviors. Welden demonstrated a change in level from Subphase I ($M = 7.43$, $SD = 0.78$) to Subphase II ($M = 12.00$, $SD = 0.00$). Welden showed an immediacy of change in the number of correctly demonstrated target behaviors. The data were characterized by a flat trend and no variability throughout Subphase II. PND were

calculated to be 100% from Subphase I to Subphase II for Welden. Welden reached the criterion for Subphase II and consistently performed above the criterion throughout Subphase II.

Upon introduction of Subphase III of the intervention, Targeted Behaviors 13-17 were taught, and the criterion for Subphase III was 15 out of 17 correctly demonstrated targeted behaviors. Welden had a change in level from Subphase II ($M = 12.00$, $SD = 0.00$) to Subphase III ($M = 16.80$, $SD = 0.44$). Welden showed an immediacy of change in the number of correctly demonstrated target behaviors. The data were characterized by an upward trend throughout Subphase III. PND were calculated to be 100% from Subphase II to Subphase III for Welden. Welden reached the criterion for Subphase III and consistently performed above the criterion throughout Subphase III. A visual inspection of the data and PND levels indicated a strong evidence for a functional relation between the self-advocacy intervention and an increase in Welden's performance requesting academic accommodations in a role-play situation.

Two weeks following withdrawal of intervention, two maintenance probes were given. The purpose of the maintenance probes was to determine whether the participant maintained the self-advocacy skills two weeks following withdrawal of intervention. In the first maintenance probe, Welden performed 17 out of 17 (100%) of the target behaviors correctly two weeks following withdrawal of intervention. In the second maintenance probe Welden again performed 17 out of 17 (100) of the target behaviors correctly, showing that Welden maintained his knowledge of the 17 target behaviors ($M = 17.00$, $SD = 0.00$) two weeks after the end of the intervention.

In the preintervention interview, the participant stated that he did not recall any instances where he was required to self-advocate while in high school. He was aware that he had an IEP, and he knew that his teachers were supposed to provide him with his accommodations. However, he was never taught self-advocacy skills in high school nor did he ever have an experience in high school where he had to self-advocate or request academic accommodations. He could not recall any preparation in high school for what to expect at the college level as it relates to self-advocacy, other than having conversations with his parents about the self-advocacy expectations in college. In the postintervention interview, the participant stated that he felt that the intervention helped him explain his LD and academic needs. He also felt that the intervention help him speak up for himself. He stated that if he returned to college, he felt that he would be more comfortable asking for accommodations from his instructors.

Overall results. After analyzing the participant's data, there were three demonstrations of basic effects at different points in time. It was predicted that the participant would have a change in dependent data measurements after the intervention was implemented, which was confirmed. This indicates that the four steps in visual analysis were strong and met the criteria for evidence standards. In addition, the maintenance phase was higher than baseline phase. There was no overlapping between baseline and the intervention phases or maintenance.

Overall, the pilot study revealed that the self-advocacy intervention had a positive effect on the former college student's ability to request academic accommodations in a role-play situation. The pilot study also revealed that the participant was aware that he

had an IEP in high school and that he was to receive accommodations, but was not aware of what the accommodations were. He was also never taught self-advocacy skills or how to request accommodations. However, based on the participant's comments in the postintervention interview, he found the intervention to be helpful in understanding his disability and explaining his needs. While the findings of this study cannot be generalized due to limitations, including the sample size, the findings suggest that the self-advocacy intervention can have a positive effect on the performance of students with LD requesting academic accommodations in a role-play situation.

Single-Subject Research Design

Single-subject research design (SSRD) emerged from the literature on applied behavior analysis. SSRD is a quantitative experimental research approach that documents causal or functional relations between independent and dependent variables (Gast, 2010). A SSRD study allows the researcher to examine the effects of an intervention on an individual participant and address individual differences by making adjustments to the existing intervention or using an alternative intervention (Gast, 2010; Kratochwill et al., 2010). This design may involve only one participant, but usually involves multiple participants (e. g., three to eight). Each participant serves as his or her own control, and performance prior to intervention (baseline) is compared to performance during and after intervention. According to Horner et al. (2005), SSRD is appropriate for identifying evidence-based practices in special education because of its: (a) focus on a single individual, (b) analysis of those who do or do not respond as well to treatment, (c) analysis of the relation between the intervention and outcomes, (d) suitability for typical

educational conditions, (e) aptness for predicting conditions when the change occurs, and (f) cost-effectiveness for identifying evidence-based practices.

It should be noted that most of the studies examined in this literature review and discussed in this chapter employed a SSRD. Multiple-baseline design was the most frequently used design (e.g., Allen et al., 2001; Arndt et al., 2006; Cross et al., 1999; Durlak et al., 1994; German et al., 2000; Hammer, 2004; Mazzotti et al., 2010). It was mostly often used to determine the effectiveness of self-advocacy interventions (e.g., the Self-Directed IEP, the Self-Advocacy Strategy, the McGill Action Planning System, Take Action Intervention, direct instruction and learning strategy, and computer-assisted instruction).

Multiple-baseline design. The multiple-baseline design seeks to establish a functional relation between the targeted behavior and the intervention over repeated instruction and manipulation of the independent variable (Gast, 2010). Characteristics of this design include a baseline and intervention phase. Baseline refers to preintervention or existing conditions that are continuously measured prior to the introduction of the intervention. The multiple-baseline design requires a plan for continuous measurement of the targeted behaviors, conditions, or study participants prior to the introduction of the independent variable (Gast, 2010). When the first participant reaches a stable and consistent baseline, then the intervention (independent variable) is introduced. The second participant remains in the baseline condition. After the second participant reaches a stable and consistent baseline then the intervention is introduced to the second participant. This pattern continues until all the participants reach the intervention phase.

In the multiple-baseline design, experimental control is established by replicating the intervention effect across tiers. A tier could be an individual or group of individuals and the intervention should be replicated with at least three tiers in order to study the intervention effect (Gast, 2010).

Changing criterion design. A changing criterion design is appropriate for evaluating the effects of a treatment on the gradual or stepwise changes in behavior (Gast, 2010). This design requires initial baseline observations followed by the implementation of a treatment program in each of a series of treatment subphases. Each treatment phase is associated with a stepwise change in criterion rate for the targeted behavior (Gast, 2010). Each phase of this design provides a baseline for the next phase. When the rate of the targeted behavior changes with each stepwise change in the criterion, therapeutic change is replicated and experimental control is demonstrated (Gast, 2010). Experimental control is demonstrated by a combination of the length and number of the criterion changes as well as the magnitude of each change. Advantages of this design are that it does not require the withdrawal of a seemingly effective treatment plan and that it enables experimental analysis within the context of gradually improving behavior.

Combined research design. In recent years, researchers have combined two or more single-subject research designs to obtain answers to more complex research questions. By merging two or more different single-subject research designs, combined designs provide the researcher with multiple opportunities of demonstrating a functional relation (Kennedy, 2005). There are three major benefits of the combined design. First,

combined designs are used to study more complex behavioral processes that an individual single-case design may not permit (Kennedy, 2005). For example, a researcher may want to simultaneously compare two conditions while also analyzing the effect of a third variable on each of the two conditions by using an A-B-A-B design. Second, if one aspect of a combined design (e.g., a multiple baseline design) fails to show a functional relation, another aspect of the design (e.g., an A-B-A-B design) may be used to demonstrate experimental control (Kennedy, 2005). Third, combined designs, because they can be used to demonstrate experimental control in many ways, provide stronger demonstrations of functional relations (Kennedy, 2005). That is, combined designs can be used to show multiple replications within an experimental analysis (Kennedy, 2005).

Chapter Summary

The 28 research studies reviewed provided mixed results regarding the effectiveness of self-determination interventions for secondary school students with disabilities. Twenty-seven of the 28 studies reported positive effects of self-determination interventions on secondary students with disabilities. Two of the 28 studies reported mixed results in their findings. For example, Cross et al. (1999) reported that both the Choicemaker and MAPS intervention group participants reported significant changes in their self-rating and teacher evaluation of their self-determination skills, but displayed limited ability to use their new self-determination skills in their transition and IEP meetings. Similarly, Lancaster et al. (2002) reported mixed findings of an Interactive Hypermedia Program intervention. The authors found the IHP was just as effective in teaching a complex self-advocacy strategy as live instruction.

The five most frequently cited interventions during the search period showed positive effects on participants' IEP participation, transition planning, and access to the general education curriculum. For example, Lee et al. (2010a) and Wehmeyer, Palmer, Lee, et al. (2011) reported that students who received the WFA intervention combined with technology-based reading support benefitted more than their peers who did not receive that support, particularly in self-determination, self-regulation, and transition planning knowledge. Similarly, Hammer (2004) reported that the SAS paired with computer-assisted instruction and simulation increased student participation in IEP meetings. Martin et al. (2006) reported that the Self-Directed IEP intervention group significantly started and led more IEP meetings, increased time talked during the IEP meetings, engaged in more IEP meeting leadership steps, and reported higher positive perceptions of the IEP meetings than the control group. Lee et al. (2008) and Shogren et al. (2012) reported promising evidence of a relationship between and impact of the SDLMI intervention and access to the general education curriculum for students with disabilities. Powers et al. (2001) reported that participants in the Take Charge for the Future treatment group demonstrated significant increases in their involvement in transition planning activities, empowerment, transition awareness, and level of participation in transition planning meetings compared with participants in the wait-list or control group.

Although the interventions reviewed showed positive effects on the ability of secondary students with disabilities to be actively involved in planning and leading their transition and IEP meetings and gaining increased access to the general education

curriculum, it is possible that these skills could increase exponentially if the interventions went deeper and further. The development of IEP goals and student participation in IEP meetings are just scratching the surface of what students could do and what will be required in postsecondary settings. In conclusion, based on the 28 studies reviewed, there is evidence to demonstrate that secondary school students with disabilities benefit from interventions that promote self-advocacy and self-determination skill development and IEP participation. An opportunity exists to further develop those skills and prepare students to be better self-advocates while in high school and in preparation for self-advocacy requirements in postsecondary settings.

Chapter Three: Methodology

The research methodology for examining the effects of a self-advocacy intervention on high school students with learning disabilities (LD) is presented in this chapter. First, the four research questions that guided this inquiry are presented. Next, details regarding the participants are presented, including the criteria for participation, recruitment techniques, informed consent procedures, and participant demographics. Additional information is provided about the setting, independent variable, and materials and instruments related to the intervention. Descriptions of the dependent variable, research design, data collection procedures, interobserver agreement, fidelity of treatment, and social validity are presented. Finally, data analysis procedures, including visual analysis and percentage of nonoverlapping data (PND), are discussed.

Research Questions

The purpose of this study was to examine the effects of a self-advocacy intervention on the performance of high school students with specific learning disabilities (LD) when requesting academic accommodations in a role-play situation. There were four research questions:

1. Is there a functional relation between a self-advocacy intervention and the performance of high school students with LD requesting academic accommodations in a role-play situation?

2. Do high school students with LD generalize the self-advocacy skills learned in a role-play situation to interactions with their teachers (generalization)?
3. Do high school students with LD generalize the self-advocacy skills learned in a role-play situation to interactions with the Special Education Coordinator (generalization)?
4. Do high school students with LD maintain the self-advocacy skills two weeks after mastering the skills in a role-play situation (maintenance)?

Participants

In this section, information about the participants is provided, including the criteria for participation, recruitment of participants, informed consent procedures, and the specific characteristics of the individual participants. Students with LD who participated in this study are referred to as participants throughout the study. Other individuals involved in the study are identified based on their role in the study or their profession. The other individuals in the study are the researcher, participants' teachers, a school administrator, independent observers, and content specialists.

Criteria for participation. According to Horner et al. (2005), single-subject research design (SSRD) may involve one participant, but usually involves multiple participants (three to eight). Five participants were recruited for this study. The targeted population for this self-advocacy intervention was high school students with LD who planned to attend college after graduating from high school. They would benefit from learning the self-advocacy intervention, as they would have the opportunity to use this experience in college. In order to be included in this study, participants had to meet the

following criteria: (a) must be a sophomore, junior, or senior in high school, (b) must have a learning disability as determined by a psycho-educational assessment (e.g., Wechsler Intelligence Scale for Children), (c) must have at least a 2.0 grade point average on a 4.0 grading scale, (d) must be eligible for special education services per IDEIA in the category of LD, (e) must have either experienced problems in the past requesting academic accommodations or have never requested academic accommodations from a teacher, (f) must have accommodations on a current IEP, and (g) must plan to attend college. Participants were excluded from the study if they: (a) were identified as having a disability other than LD, (b) did not have a current IEP, (c) had a 504 plan, (d) did not attend the targeted secondary school, (e) did not have at least a 2.0 grade point average on a 4.0 scale, and (f) did not intend on attending college.

Recruitment of participants. The researcher submitted an Institutional Review Board (IRB) application to George Mason University IRB for approval to conduct research on human subjects. When final approval was granted (Appendix A), the researcher contacted the principal at the targeted school to begin the recruitment process. The principal at the targeted school provided a letter of support for the study (Appendix C). A flyer was posted in approved areas at the targeted school (Appendix D). The principal invited the researcher to give a presentation about the research study to parents at the school's "Back to School" night program. Two parents expressed interest in having their child participate in the research study. The following week, the researcher had the opportunity to speak directly to the student body regarding the study at the school's daily morning meeting. Two students expressed an interest in participating in the research

study after that meeting. In addition, the principal identified two students who met the participation criteria. Of the two students identified by the principal, only one student expressed an interest in participating in the study. A total of five students expressed an interest in participating in the study.

A recruitment package was emailed to the parents or guardians of the students who were either identified or expressed an interest in participating. The recruitment package included a cover letter, Parent Informed Consent form, Student Informed Assent form, and a recruitment flyer (Appendix E). The content in the recruitment packet outlined the purpose and structure of the study and invited the identified students to participate in the study. The material further explained that the students who participated in the study and completed all sessions would receive a \$50 iTunes gift card. Follow-up phone calls were made to parents to give them an overview of the study (including procedures and time commitment) and answer any questions they had regarding the study.

Informed consent procedures. If the participant expressed interest in participating in the study, the researcher met individually with the participant and his or her parents at the targeted school. The researcher provided a brief overview of the study, completed a review of the participant's cumulative file and current individualized education program (IEP) to confirm that the participant met the inclusion criteria, and answered questions. The researcher informed the parents and participants that participation in the study was voluntary, and that they could withdraw from the study at any time without specifying a reason. As noted in the Parent Informed Consent and the

Student Informed Assent forms, each participant was given a pseudonym to maintain confidentiality in the study. Before the study began, all identifiers were deleted and replaced with a pseudonym. After the parents signed the Parent Informed Consent form, the researcher reviewed the Student Informed Assent with the participant. After both forms were signed, the families were provided copies for their records.

Participants with Learning Disabilities

Five high school students with LD were selected for this study. A detailed description of each participant is presented in this section, including the student's age, current level of functioning (as noted by scale scores reported on the participant's most recent psycho-educational evaluation), current course load, accommodations, related services (developmental, corrective, and other supportive services as required to assist a child with a disability to benefit from special education), strengths (academic, developmental, or functional skills), weaknesses (skills the student needs to learn), and other demographic information. This information was collected from a review of each participant's cumulative file and current IEP. This review of the participant's records occurred during the period of establishing rapport in the initial participant interviews. (More detailed information regarding the questions asked in the initial interviews is provided later in the chapter.) Demographic characteristics of the participants with LD are summarized in Table 2.

Table 2

Participant Demographic Characteristics

Participant	Gender	Ethnicity	Age	IQ	VCI	PRI	WMI	PSI	GPA	Related Services
Alejandro	Male	Caucasian	16	99*	93	108	102	91	3.2	Transportation
Carlos	Male	African American	17	77*	87	84	80	71	2.8	OT/Transportation/ESY
Elvis	Male	African American	18	81*	81	86	88	88	2.7	Speech
India	Female	African American	18	77**	96	84	74	68	3.4	Speech/OT/Transportation
Jay	Male	Vietnamese	18	88*	85	106	91	78	3.9	Speech/OT/Counseling

Note. IQ = Full Scale Intelligence Quotient; VCI = Verbal Comprehension Index; PRI = Perceptual Reasoning Index; WMI = Working Memory Index; PSI = Processing Speed Index; GPA = Grade Point Average on a 4.0 Scale; OT = Occupational Therapy; ESY = Extended School Year.

*Wechsler Intelligence Scale for Children–Fourth Edition. **Wechsler Intelligence Scale for Children–Second Edition.

Carlos. Carlos was a 17-year-old African American high school senior. He had a 2.8 cumulative grade point average on a 4.0 scale. He was diagnosed with LD when he was 9 years old and in the fourth grade. He was reevaluated in 2015 to determine continued eligibility for LD support services and was found to have a 77 full-scale IQ on the WISC-IV. His scale-score performance on the Verbal Comprehension Index (VCI = 87), Perceptual Reasoning Index (PRI = 84), and Working Memory Index (WMI = 80) placed him in the low average range compared to other adolescents his age. His scale-score performance on the Processing Speed Index (PSI = 71) placed him in the borderline range compared to other adolescents his age. At the time of this study, Carlos's courses were TV Production II, Personal Fitness, Algebra II, Information Systems Management I, English 12, Reading, and Senior Career Project. His accommodations, as noted on his

current IEP, included extended time on tests and assignments, multiple or frequent breaks, note-taking support, access to an electronic speller or word processor, access to a human reader, and graphic organizers. He received related services in occupational therapy, transportation, and extended school year (ESY) services.

Carlos seemed to be a very shy and quiet young man, and at times he seemed disinterested in participating in the study. For example, although he arrived on time for the intervention sessions, he made very little eye contact with the researcher. When he was asked questions, he provided short answers and did not elaborate without being prompted. He did not present a firm handshake to the researcher, and he would often sit slouched in his chair. During the first intervention session, Carlos kept looking at the time on his cell phone. His behavior gave the researcher the impression that either he had somewhere to go or he wanted the intervention session to end soon. The researcher eventually asked Carlos to put the cell phone away and reminded him of the time commitment he agreed to when he signed the Student Informed Assent. The researcher also informed Carlos that he could choose not to participate in the study. Carlos promptly put his cell phone away and stated that he wanted to complete the study. Carlos reported that he has never asked teachers for accommodations. After graduating from high school, Carlos planned to major in Business Administration and was exploring degree programs at a college and two universities in the Northeast region of the United States.

Alejandro. Alejandro was a 16-year-old Caucasian high school junior. He had a 3.2 cumulative grade point average on a 4.0 scale. His mother reported that he was diagnosed with LD at the age of 4. In 2009, he was reevaluated to determine continued

eligibility for LD support services and was found to have a 99 full-scale IQ on the Wechsler Intelligence Scale for Children (WISC-IV). His scale-score performance on the Verbal Comprehension Index (VCI = 93), Perceptual Reasoning Index (PRI = 108), Working Memory Index (WMI = 102), and Processing Speed Index (PSI = 91) placed him in the average range compared to other adolescents his age. At the time of this study, Alejandro's courses were Reading, Algebra II, TV Production I, English 11, Spanish II, Information Systems Management I, and Chemistry. His accommodations, as noted on his current IEP, included access to a human reader, note-taking support, text to speech software, use of a calculator, graphic organizers, extended time on tests and assignments, multiple or frequent breaks, and reduced distractions. He also received transportation-related services.

Alejandro was a very confident and enthusiastic young man with an outgoing personality, although he self-described as shy. For example, Alejandro arrived at the intervention sessions on time, presented a firm handshake, made direct eye contact with the researcher, and sat straight in his chair. He also smiled frequently as he interacted with the researcher. He would often ask, "How did I do?" after the role play. Alejandro acknowledged that he had never requested accommodations from his teachers and believed that he would benefit from participating in the study. After graduating from high school, he planned to attend a university in the Mid-Atlantic region of the United States and major in Business, Nursing, or Computer Technology.

India. India was an 18-year-old African-American high school senior. She had a 3.4 cumulative grade point average on a 4.0 scale. She was diagnosed with LD when she

was 8 years old and in the third grade. In 2011, India was reevaluated to determine continued eligibility for LD support services and was found to have a 77 full-scale IQ on the WISC-IV. Her scale-score performance on the Verbal Comprehension Index (VCI = 96) placed her in the average range compared to other adolescents her age, Perceptual Reasoning Index (PRI = 84) in the low average range compared to other adolescents her age, and Working Memory Index (WMI = 74) and Processing Speed Index (PSI = 68) in the borderline to low average range compared to other adolescents her age. At the time of this study, India's courses were Biology, Senior Career Project, Algebra II, World History and Geography, Photography, Reading, and English 12. Her accommodations, as noted on her current IEP, included access to a word processor, use of a calculator, access to a human reader, text to speech software, graphic organizers, extended time on tests and assignments, reduced distractions, and note-taking support. She also received related services in speech and language, occupational therapy, and transportation services.

India was a soft-spoken young woman with a genuinely friendly disposition. For example, she smiled and laughed often and was eager to learn the intervention. She arrived promptly at the intervention sessions, presented a firm handshake, made direct eye contact with the researcher, and sat straight and on the edge of her chair. She asked questions when she needed further clarification on the target behaviors. She reported having difficulty requesting accommodations. After graduating from high school, she planned on attending a college in the Mid-Atlantic region of the United States, majoring in Hospitality Management with a minor in Baking and Pastry.

Jay. Jay was an 18-year-old Vietnamese high school senior. He had a 3.9 cumulative grade point average on a 4.0 scale. It is not clear when Jay was diagnosed with LD, but he was reevaluated in 2010 to determine continued eligibility for LD support services and was found to have a full-scale IQ score of 88 on the WISC-IV. His scale-score performance on the Verbal Comprehension Index (VCI = 85) placed him in the low average range compared to other adolescents his age, while his performance on the Perceptual Reasoning Index (PRI = 108) and Working Memory Index (WMI = 91) placed him in the average range, and his performance on the Processing Speed Index (PSI = 78) placed him in the borderline range compared to other adolescents his age. At the time of this study, Jay's courses were TV Production II, Personal Fitness, Reading, Senior Career Project, Information Systems Management, English 12, and Math Lab. His accommodations, as noted on his current IEP, included extended time on tests and assignments, a reader for exams, note-taking support, multiple or frequent breaks, preferential seating, and graphic organizers. Other related services included counseling and occupational and speech therapy.

Jay was a serious young man who was eager to learn the intervention. For example, his facial expressions were always stern, and he appeared to be intently focused on learning the intervention. He arrived at the intervention sessions promptly, presented a firm handshake to the researcher, made direct eye contact, and sat straight in his chair. He learned the intervention quickly and presented himself as a perfectionist. For example, If Jay did not complete the role play to his satisfaction, he would often ask if he could repeat the exercise. Jay reported that his accommodations were mostly provided to him,

but he asked for help when needed. Upon graduating from high school, he anticipated taking a “gap” year off from school before pursuing postsecondary education. He planned to attend a local community college and major in Information Technology and Film Studies.

Elvis. Elvis was an 18-year-old African-American high school senior. He had a 2.7 cumulative grade point average on a 4.0 scale. His mother reported that Elvis was diagnosed with LD at the end of his second grade year when he was 7 years old. He was reevaluated in 2010 to determine continued eligibility for LD support services and was found to have a full-scale IQ of 81 on the WISC-IV. His scale-score performance on the Verbal Comprehension Index (VCI = 81), Perceptual Reasoning Index (PRI = 86), Working Memory Index (WMI = 88), and Processing Speed Index (PSI = 88) placed him in the low average range compared to other adolescents his age. At the time of this study, Elvis’s courses included Principles of Recording, Probability and Statistics, Information Systems Management, English 12, and Senior Career Project. His accommodations, as noted on his current IEP, included use of a calculator, text to speech software, access to an electronic speller or word processor, graphic organizers, preferential seating, and note-taking support. He received related services for speech.

Elvis was a very enthusiastic young man. For example, he laughed often at himself when he made mistakes as he was learning the intervention. He would often joke with the researcher and poked fun at himself. He arrived at the intervention sessions promptly, presented a firm handshake, made direct eye contact with the researcher, and sat straight in his chair. He was very attentive to the instruction and would ask questions

for clarity if he did not understand. Elvis reported that he had never asked teachers for accommodations, but that he was always told that he had accommodations and could take his time with class assignments. After graduating from high school, he planned on attending college. At the time of this study, he had applied to two universities and two colleges in the Mid-Atlantic region of the United States, where he was exploring degree programs in Communications, Psychology, and Photography.

Other Individuals

In this section, detailed information about the other individuals in the study is provided. Eight other individuals involved in the study were identified based on their role in the study and their profession: the researcher, participants' teachers, a school administrator, independent observers, and content specialists.

Researcher. The researcher provided instruction for the intervention to all participants in the study and collected all data for the study. The researcher is a fully certified and highly qualified special education teacher for K-12 students in multiple disability categories. He has more than 12 years of experience in providing educational services to students with learning disabilities in classroom and work settings. He also has three years of experience as a secondary-transition teacher providing transition support services to students with high- and low-incidence disabilities. He has taught students in multiple disability categories in both team-taught and special education self-contained classes. He has also taught general education courses.

Participants' teachers. Participants' teachers were used in role playing during generalization. The first teacher, a Caucasian female, was a fully certified and highly

qualified special education teacher and reading specialist at the targeted school. She had 13 years teaching experience and had worked at the targeted school for nine years. The second teacher, also a Caucasian female, was a fully certified and highly qualified special education and algebra teacher at the targeted school. She had five years teaching experience and had worked at the targeted school for four years.

The teachers were selected to participate as role players in this study based on nominations by the participants. The researcher asked the participants to nominate a teacher with whom they wanted to do their role plays during the generalization phase of the study. After the participants nominated the teacher to the researcher, the researcher asked the participants why they nominated the teacher. Comments included “Ms. _____ is my favorite teacher,” or “Ms. _____ stays after school a lot to work with students. I’m sure she would be willing to assist with the role plays,” and “I like Mr. _____’s class.”

The researcher encouraged the participants to ask the teacher if he or she would be willing to role play with them on a designated day after school hours. After the participant received a verbal commitment from the teacher, the researcher then met individually with the teachers to provide an overview of the study (including procedures and time commitment) and answered their questions. The researcher informed them that participation in the study was voluntary, they could withdraw from the study at any time and without specifying a reason, and that their participation in the study would be confidential. After the researcher answered their questions, the teachers signed the Educator Consent form (Appendix F). Once signed, the researcher made copies of the Educator Consent form for their records.

School administrator. The school administrator who participated in the study was the Special Education Coordinator, who was used in role playing during generalization. She was an African American female educator who was fully certified and highly qualified in special education. She had 18 years teaching experience and had worked at the targeted school for two years. After the researcher received a verbal commitment from the Special Education Coordinator, he provided an overview of the study (including procedures and time commitment) and answered her questions. The researcher informed the Special Education Coordinator that participation in the study was voluntary, she could withdraw from the study at any time and without specifying a reason, and that her participation in the study would be confidential. After the researcher answered her questions, the Special Education Coordinator signed the Educator Consent form (Appendix F). Once signed, the researcher made copies of the Educator Consent form for her records.

Independent observers. There were two independent observers in this study. The first independent observer was recruited to independently observe the researcher (via video tape) for 30% of the sessions for each of the three treatment subphases per participant and document the delivery of instruction on the Fidelity of Treatment Checklist (Appendix G). She was an African American female educator who was fully certified and highly qualified in special education and transition. She was also a fellow doctoral candidate.

The second independent observer was recruited to independently observe and score 30% of the video-recorded role-play situations for baseline, and each of the three

treatment subphases, maintenance phase, and generalization phase for the five participants in the study. The researcher was the first scorer. The scores from the researcher and this independent observer were used to calculate the interobserver agreement (IOA). She was an African American female educator who was certified and highly qualified in early childhood education. She taught elementary school students for 15 years prior to this study and was also a fellow doctoral candidate.

Content specialists. Two content specialists were used to validate the probes and instruments used in this study. The first content specialist was an African American female educator who was fully certified and highly qualified in special education and reading. She had 15 years of teaching experience and a Ph.D. in Education. She also had teaching endorsements in Specific Learning Disabilities K-12 and Administration and Supervision PreK-12. The second content specialist was an African American female educator who was fully certified and highly qualified Special Education Coordinator. She had 12 years of teaching experience and two years of experience as a Special Education Coordinator. She also had teaching endorsements in Emotional Disturbance K-12 and Special Education General Curriculum K-12.

Setting

The self-advocacy intervention took place at a private special education secondary school located in a suburban community with a diverse population in the Mid-Atlantic region of the United States. According to the U.S. Census Bureau (2010) report, the population of this Mid-Atlantic region was 66% Caucasian, 11% Black, 11% Hispanic, 9% Asian, and 3% mixed race. The school served 65 students from Grades 5 through 12.

The student:teacher ratio was 4:1. The school's mission was to educate and promote lifelong independent learning in promising students with language-based learning differences in a rigorous and individualized college-preparatory environment. Ninety-nine percent of the students graduated from the designated school, and 85% of the students pursued postsecondary education.

The study was conducted after school hours, specifically from 3:30 p.m. to 5:00 p.m., and on weekends. The primary setting for the intervention was at the designated school. If the participants had a scheduling conflict with other extracurricular activities during the week, the intervention took place at a setting in the community during the weekend. Weekend sessions occurred three times during the intervention period with two of the participants.

School settings. The intervention sessions took place at two locations within the designated school. The main setting at the school was the conference room located to the right of the main office. The conference room was set up in the style of a board room with a long table surrounded by 10 chairs in the center of the room. To the left of the table were four windows, and to the right of the table were two additional small tables positioned against the wall. A flat-screen television was mounted on the wall at the far right of the center table. To the far left end of the center table was a projection screen. The walls were painted a light olive green color. The room was quiet, with few distractions. Once participants entered the room, they sat to the left of the researcher, who was positioned at the far right end of the conference table.

The second setting at the school was the student lounge. This room was used when faculty meetings or parent–teacher conferences were scheduled in the conference room. The student lounge was an open space furnished with a couch, beanbag chairs, a pool table, a flat-screen television, a desktop computer, and a small round table surrounded by four chairs. The researcher sat at the round table, and the participant sat to his left. Because the intervention sessions took place at the end of the school day, there were few distractions or interruptions from other people.

Community settings. In addition to the school settings, the interventions took place at three community settings: a university library, a children’s hospital, and a community center. An intervention session with Carlos took place in a university library from 11:00 a.m. to 12:30 p.m. on a Saturday. The location was mutually agreed upon by the participant, the participant’s parents, and the researcher. The intervention session took place on the first floor of the library in the study area to the right of the main entrance. Cubicles were located at the front and back of the room and served as office space for the library staff and individual study areas for students. The researcher sat at a round table at the front of the room, and the participant sat to his left. Although some students entered and left the study area, the activity was not especially distracting. However, a malfunctioning central air unit frequently emitted a loud, unusual sound. The participant seemed to be distracted because of the loud central air unit and paused for 1-2 min until the researcher verbally directed him to focus on the role play.

The second community setting was a family room at a children’s hospital. The intervention session here was also with Carlos and took place from 10:00 a.m. to 11:30

a.m. on a Friday morning. The location was mutually agreed upon by the participant, the participant's parents, and the researcher. The activity of families entering and leaving the room was a distraction to the participant, as evidenced by frequent pauses for 1-2 min until the researcher verbally directed the participant to focus on the role play.

The third setting was at a community center, where an intervention session with Alejandro took place from 1:00 p.m. to 2:30 p.m. on a Sunday afternoon. The room where the intervention session took place was the dining room. It had 5 large round tables, and each table was surrounded by 10 chairs. There were windows on the perimeter of the room, and the walls were painted a light beige color. The researcher sat at the round table positioned to the far right of the room, and the participant sat to his left. Because the intervention session took place on a Sunday afternoon, there were few distractions from other people.

Independent Variable

The independent variable in this study was the self-advocacy instruction modified from the Self-Advocacy and Conflict Resolution Training (SACR): Strategies for the Classroom Accommodation Request Intervention (Rumrill et al., 1999). The purpose of the self-advocacy instruction was to assist students in understanding what their accommodations were and to teach the skills associated with accessing them. The self-advocacy instruction was designed for participants to learn how to: (a) state their disability and explain it in functional terms, (b) reference accommodations that they have used in the past that aided in their success, (c) explain the benefits of those

accommodations, and (d) develop the confidence to ask for the accommodations to which they are entitled under the law.

This intervention consisted of 7 scripted lessons (Appendix H). Each lesson focused on 1 or more of the 17 targeted behaviors identified by Rumrill et al. (1999) as important in self-advocating for academic accommodations. All of the lessons were scripted for the intervention. Each lesson included the following seven components: (a) advance organizer, (b) skill description, (c) goal of the skill, (d) skill examples, (e) modeling, (f) role playing, and (g) summary of the lesson. These components occurred in sequential order during each of the seven lessons. All lessons were taught across two to three 30-min sessions. If a participant needed more time to learn the targeted behaviors taught in a lesson, then the lesson was extended across sessions to allow more time for the participant to master the targeted behavior.

Seven components of the scripted lessons. The first component was an advance organizer. For the advance organizer component of each lesson, there was a script which included directions for introducing the upcoming lesson by: (a) stating the objective, (b) stating the rationale or the importance of the lesson, and (c) activating prior knowledge by reviewing what was learned in the previous lesson. The second component was the skill description. During the skill description component, the researcher identified and described the specific skill associated with the target behavior being taught in the lesson. The third component of the scripted lessons was the goal of the skill. During the goal of the skill component, the researcher stated the goal of the skill or target behavior. For example, the goal for the first lesson was to learn how to “establish a friendly basis for

interaction and let the teacher know who you are and your relationship to the teacher.”

The fourth component was skill examples. During this component, the researcher provided examples of the skill or target behavior that was being taught. The fifth component of the scripted lessons was modeling. During the modeling component, the researcher verbalized the skill and target behavior and asked the participant to notice the manner and tone of the researcher’s remarks as well as the specific statements made and key behaviors demonstrated. The sixth component was role playing. During role playing, the researcher and the participant practiced the target behaviors. In each role play, the researcher played the role of a teacher who was unfamiliar with both the participant and his or her accommodations. During the role play, the participant practiced the skills that he or she learned for self-advocacy for academic accommodations. The seventh component was a summary of the lesson. During the summary component of the scripted lessons, the researcher verbally summarized the specific skills and target behaviors that were taught during that lesson.

How the lessons were taught. Seventeen target behaviors were taught during the self-advocacy instruction, as described in detail in the Independent Variable section. The identified target behaviors were taught during three subphases of the self-advocacy intervention (Table 3). In Subphase I, Lessons 1-3 were taught covering Target Behaviors 1-8. In Subphase II, Lessons 4-5 were taught covering Target Behaviors 9-12. In Subphase III, Lessons 6-7 were taught covering Target Behaviors 13-17. The subphases were established during the researcher’s pilot study and were determined based on the grouping of the skills taught and the natural break of the target behaviors.

Table 3

Self-Advocacy Lessons

Intervention Phases	Self-Advocacy Lessons	Targeted Behaviors
Subphase I	Lesson 1 – Introduction	Behavior 1 – Greet Instructor Behavior 2 – Introduce Yourself Behavior 3 – Reference Discussion
	Lesson 2 – Disclosure	Behavior 4 – Identify Disability Behavior 5 – Explain Disability in Functional Terms
	Lesson 3 – Solution	Behavior 6 – Mention Previous Accommodations Behavior 7 – Explain Benefits of Past Accommodations Behavior 8 – Request Use of Accommodations
Subphase II	Lesson 4 – Resources	Behavior 9 – Identify Resources and How They Assist Behavior 10 – State Your Role as the Student
	Lesson 5 – Agreement	Behavior 11 – Ask for Agreement of the Accommodation Request Behavior 12 – Affirm Agreement of the Accommodation Request
Subphase III	Lesson 6 – Summary	Behavior 13 – Restate Accommodations Behavior 14 – Clarify Your Role as the Student Behavior 15 – Clarify Instructor’s Role in Facilitating the Accommodation Request
	Lesson 7 – Closure	Behavior 16 – Close with a Positive Statement Suggesting Closure of the Accommodation Request Discussion Behavior 17 – Express Appreciation for the Instructor’s Time and Consideration of the Accommodation Request

Materials and Instruments Related to the Intervention

In this section, the materials and instruments directly related to the self-advocacy intervention are described. Two categories of materials were used in this study. The first category was the scripted lesson plans. The scripted lessons plans also served as content for the PowerPoint presentation (Appendix I) and the participant workbook (Appendix J). The second category was technology. The technology used in this study was an Apple iPad and Dell Laptop. There were also two categories of instruments used in this study. The first category was the student instrument. The student instrument described later in this chapter was the Social Validity Survey. The second category of instruments was the

research instruments. The research instruments described in this chapter are: (a) the Educator Feedback on Role Play Form, (b) the Fidelity of Treatment Checklist, and (c) the Interobserver Agreement Form. The validation of the instruments is also discussed in this section.

Scripted lesson plans. The scripted lesson plans (Appendix H) consisted of 7 lessons that described the 17 targeted behaviors that individuals with LD need to effectively request academic accommodations in the classroom. The basic approach involved presentation of information (didactic training), modeling, and role playing. The sequence of each component's delivery was described in the Independent Variable section of this chapter. As noted, the content of the scripted lesson plans served as the content for the PowerPoint presentation and the participant workbook.

Technology. An iPad Pro was used to video record the participant role plays. The iPad Pro was a 9.7 inch touch screen tablet made by Apple. The iPad Pro had a multitouch LED-backlit 9.7 x 7.5 in. display screen and weighed 1.5 pounds, with a battery that lasted up to 10 hr. A laptop was used to display the PowerPoint presentation and video record the intervention sessions. The laptop was 9.16 x 13.31 x 1.25 in., weighed 4.7 pounds, and was made by Dell. The laptop had a battery that lasted for approximately 4 hr.

Student instrument. The student instrument used in this research was the Social Validity Survey (Appendix K). The social validity survey was a two-part feedback form used to elicit the participants' perception of the intervention. The researcher sought feedback from the participants on how well they liked and learned from the self-advocacy

instruction. In Part I, the participants rated their level of agreement with 12 statements about IEP accommodations and the self-advocacy intervention by using a 4-point Likert scale (*strongly disagree, disagree, agree, and strongly agree*). In Part II, participants rated the importance of each of the 17 targeted behaviors learned in the self-advocacy intervention by using a 5-point Likert scale (*not important, slightly important, moderately important, important, and very important*). The participants were also asked four open-ended questions on the survey about the targeted behaviors that they liked best, least, or would change, and whether or not they would recommend the self-advocacy intervention to other students.

Research instruments. Three research instruments were used in this study. The first research instrument was the Educator Feedback on Role Play Form. The Educator Feedback on Role Play Form (Appendix L) was used by the Special Education Coordinator and the teachers to note the performance of the participants during the generalization phase of the study. The evaluators rated their level of agreement with three statements about the student's politeness, clarity in explaining his or her disability and accommodation needs, and whether, based on the student's approach and explanation, they would grant the accommodation request. The evaluators used a 5-point Likert scale (*strongly disagree, disagree, neutral, agree, strongly agree*) to rate their level of agreement with the three statements. The researcher trained the evaluators by reviewing the directions and emphasizing the importance of completing the entire form. The researcher told the evaluators that they would be rating the participant's performance during two role-play scenarios using the 5-point Likert scale. The researcher stressed that

no feedback was to be given to the participants after the completion of the role play and that the evaluation forms should be returned to the researcher immediately after completing the evaluation.

The second research instrument was the Fidelity of Treatment Checklist (Appendix G). The Fidelity of Treatment Checklist was used to determine the extent to which the researcher followed the scripted lesson plans. The fidelity of treatment was measured based on the delivery of the instructional components of the self-advocacy instruction during the three subphases of the intervention. The checklist listed the instructional components: (a) advance organizer (the researcher activated prior knowledge by stating the objective of the lesson), (b) a detailed description of the skill to be taught (the researcher verbally described the skill), (c) the goal of the skill (the researcher verbally said the goal of the skill), (d) skill examples (the researcher verbally provided examples of the skill), (e) modeling (the researcher verbally modeled the skill), (f) role playing (the researcher verbally requested that the participant practice the skill with the researcher), and (g) a summary of the lesson (the researcher made a brief statement summarizing the skill that was taught).

The third research instrument was the Interobserver Agreement Checklist (Appendix M). The Interobserver Agreement Checklist was used to compare the independent observations by two different observers of the 17 targeted behaviors during the role-play situations. The interobserver agreement procedures are described in detail earlier in this chapter. The checklist was a chart that included the 17 targeted behaviors and the operational definitions (Table 3). Space was provided next to each of the targeted

behaviors and operational definitions for the researcher to write a “Y” if the independent observer and the researcher agreed that the target behavior was performed and an “N” if there was not agreement that the targeted behavior was performed. The interobserver agreement was then calculated by using the formula at bottom of the checklist. Additional space was provided on each line to document whether or not there was total agreement that the targeted behavior was demonstrated.

Validation of instruments. The five scoring rubrics used in this study were checked for content and face validity by the two content specialists described in the Participant section of this chapter. This validation process occurred prior to the beginning of this research study. The five scoring rubrics were: (a) Data Collection Form (Appendix N), described in the dependent variable section of this chapter; (b) Social Validity Survey (Appendix K); (c) Educator Feedback on Role Play form (Appendix L); (4) Fidelity of Treatment Checklist (Appendix G); and (5) Interobserver Agreement Checklist (Appendix M).

Content validity was an examination of the functionality of the Likert scales on the Data Collection Form, Social Validity Survey, and Educator Feedback on Role Play form. The content specialists were asked to note on the instruments if the Likert scales were balanced and if they would measure what the researcher intended. There were no recommendations for changes to these instruments. Face validity was the way that the instruments were presented. The content specialists were asked to review all five instruments and make any recommendations to improve the layout of the rubrics for ease of scoring. Recommendations were made for two instruments: the Data Collection Form

and the Social Validity Survey. On the Data Collection Form, the content specialists suggested adding space on the top of the form for the participant's name, the intervention phase, the probe number, and the length of the probe. They also suggested adding space at the end of the form to document the number of correctly demonstrated steps, and the total number of steps in the intervention phase. For the Social Validity Survey, the content specialists recommended adding the rating scale at the top of each page of the survey for easier reference. Changes to the Data Collection Form and the Social Validity Survey were made per the content specialists' recommendations.

Dependent Variable

The dependent variable in this study was the number of correctly demonstrated target behaviors, out of a total of 17 that participants performed during a role-play situation that was video-recorded. The 17 targeted behaviors were as follows:

1. Greet instructor – Participant verbalized a greeting such as “Hello,” “Good morning,” or “Good afternoon.”
2. Introduce yourself – Participant introduced self by name (participant verbally stated first and last name) and made reference to a specific class (e.g., student verbally stated the name of the class, class number, and section).
3. Reference discussion – Participant made reference to the reason for the academic accommodation discussion (e.g., “I’m here today to discuss accommodations that I need in your class.”).
4. Identify disability status – Participant made a general statement about his or her disability (e.g., “I have a learning disability.”).

5. Explain disability in functional terms – Participant made a verbal statement that explained how the disability affects him or her (e.g., “As a result of my disability, it is difficult for me to stay focused for an extended period of time.”).
6. Mentions previous accommodations – Participant made a verbal statement identifying the accommodation used in a previous course (e.g., “I have used an audio recorder for class lectures,” or “I have used a note taker in my other classes in the past.”).
7. Explain benefits of past accommodations – Participant explained the benefit of the accommodation in class (e.g., “Using the audio recorder makes it easier for me to review what was discussed in class.”).
8. Request use of accommodation – Participant stated that he or she thinks the accommodation would be helpful in this class (e.g., “I would like to use a tape recorder in your class,” or “I think having a note taker would be helpful.”).
9. Identify resources and how they assist – Participant verbally stated who or what office would be able to assist in providing an accommodation (e.g., the special education office.).
10. State your role as the student – Participant verbally stated what his or her responsibility for implementing the accommodation is (e.g., “I will make arrangements for the reader to meet me at the classroom on the day of the test.”).

11. Ask for agreement of the accommodation request – Participant asked the instructor if the accommodation plan (Target Behavior 8) sounds agreeable (e.g., “Does this seem like a workable plan to you?” or “Do these suggestions sound okay to you?”).
12. Affirm agreement of the accommodation request – Participant verbally responded to the instructor’s agreement with an affirmative statement (e.g., “Good” or “Okay”).
13. Restate accommodations – Participant verbally stated the solution or accommodation (e.g., “I will plan to use a reader on test days,” or “I will plan to use a note taker in class.”).
14. Clarify your role as the student – Participant verbally stated what he or she would do to arrange for the accommodations to take place (e.g., “I will contact the special education office and take care of scheduling a reader on test days.”).
15. Clarify instructor’s role in facilitating the accommodation request – Participant specifically stated what action the instructor needed to take (e.g., “You will help me identify a student in the class who will let me make copies of class notes.”).
16. Close with a positive statement suggesting closure of the accommodation request discussion – Participant made a general statement (e.g., “I’m looking forward to your class.”).

17. Express appreciation for the instructor's time and consideration of the accommodation request – Participant made a verbal statement expressing his or her appreciation (e.g., “Thanks for your help,” or “I appreciate your support.”).

For each targeted behavior, there were two or three required elements (refer to Appendix N). Participants received a “3” if all of the required elements for each of the 17 target behaviors were demonstrated as described on the data collection sheet (Appendix N). Participants received a “2” if the behavior demonstrated was acceptable. An acceptable rating was made when the participant stated or demonstrated the target behavior but excluded one of the required elements. Participants received a “1” for an unacceptable response. An unacceptable rating was made when the participant used inappropriate language (profanity), gestures, or slang. Participants received a “0” for no response when the participant did not verbally respond or demonstrate in any way the target behavior. For example, a participant would receive a “3” (detailed response) for the second targeted behavior (i.e., introduce yourself) if he or she verbally introduced him- or herself by his or her first and last name and verbally referenced the specific class, class number, and section number. A participant received a “2” for an acceptable response if he or she greeted the instructor and introduced him- or herself by first name only and made reference to the class, but did not mention the class number or section number. A participant received a “1” for an unacceptable response if the participant used inappropriate language (profanity), gestures, or slang, or if the participant did not state his

or her name, but referenced the class. A participant received a “0” for no response when the participant did not verbally respond or demonstrate in any way the target behavior.

Data Collection Form

The Data Collection Form was a recording system with operational definitions and a 4-point Likert rating scale (*detailed response, acceptable response, unacceptable response, and no response*). The Data Collection Form was used by the researcher to note the extent to which the 17 targeted behaviors were demonstrated. Space was provided on the form to write comments (Appendix N).

Probes for Baseline, Intervention, and Generalization Phases

The probes for baseline, intervention (Subphases I, II, & III), generalization, and maintenance phases were developed by the researcher and contained scenarios depicting students requesting academic accommodations from their teachers. The role-play probes were similar in format, consisting of brief scenarios (three or four sentences) describing a student with a specific disability, what accommodation that student has, and a school situation in which that student needs to ask a teacher for an academic accommodation (Appendix O).

There were a minimum of five role-play probes per participant in the baseline and a minimum of five role-play probes per participant in each of the three subsequent subphases of the intervention. The researcher reviewed the IEP with each participant and allowed the participant to choose the accommodation request that would be used in the role-play probes so that the participant could focus on learning the 17 steps in the

intervention. This role-play probe was used during the baseline, the three intervention subphases, and the maintenance phase of the intervention.

In the generalization phase, there were four different role-play probes per participant. Each participant role played two different academic accommodation requests with a teacher, and two different academic accommodation requests with the Special Education Coordinator. The role-play probes used in the generalization phase of the study were chosen by the researcher and were individualized for each participant based on the accommodations on the participant's IEP. The role-play probes used in the generalization phase of the study were not the same role-play probes that were used during the baseline, the three intervention subphases, and the maintenance phase of the intervention.

Validation of probes. The role-play probes were checked for content validity by two content specialists, both of whom were experts in special education. The researcher provided the content specialists with sample role-play probes developed after reviewing IEP accommodations of the students. The researcher asked the content specialists to review the role-play probes with accommodation requests and determine, based on their experiences as special educators and the criteria provided, if the role-play probes and accommodation requests were appropriate for students with LD.

The criteria that the content specialists were asked to consider were: (a) did the probe consist of a brief scenario (three or four sentences) describing a student with LD, (b) did the probe include a typical accommodation request of a student with LD, and (c) did the probe include a specific school situation in which that student needs to ask a teacher for an academic accommodation? The researcher asked the content specialists to

write “yes” next to the role-play probe if they agreed that the role-play probes and accommodation requests met the criteria and were appropriate for students with LD and to write “no” next to the role-play probe if they did not agree that the role-play probes and accommodation requests were appropriate for students with LD. The content specialists were in 100% agreement that the role-play probes and accommodation requests were appropriate for students with LD. The content specialists were described in detail in the Participants section earlier in this chapter.

Research Design

A single-subject research study entails an experimental research design that documents causal or functional relations between independent and dependent variables (Horner et al., 2005). Researchers utilizing a single-subject research design (SSRD) study the effects of an intervention on an individual participant and address his or her differences by making changes to the existing intervention or using an alternative intervention (Gast, 2010; Kratochwill et al., 2010). A SSRD may involve one participant, but usually includes multiple participants (three to eight) in a single study. Each participant serves as his or her own control, and performance prior to intervention is compared to enactment during and after intervention. SSRD has also been widely used to evaluate the effectiveness of interventions, especially for students with LD (Hembry, Bunuan, Beretvas, Ferron, & Van den Noortgate, 2015; Kratochwill et al., 2013; Maggin & Chafouleas, 2013; Swanson & Sachse-Lee, 2000).

Combined research design. In this study, a combined research design was used. With a combined research design, the researcher uses two or more single-subject research

designs in an individual study to answer complex research questions (Kennedy, 2005). By merging two or more different SSRDs, combined research designs provide the researcher with multiple opportunities to demonstrate a functional relationship between the independent and dependent variables (Kennedy, 2005). In this study, a combined research design was used which included multiple baseline and changing criterion research designs.

Multiple baseline research design. The first single-subject research design used in this study was a multiple baseline design across participants. This research design allowed the researcher to observe the participants' behavior measured over time to determine if there was a functional relation between the dependent and independent variables for each participant (Horner et al., 2005). Steps included defining the dependent and independent variables and then collecting baseline data for each participant. When the first participant reached a stable and consistent baseline, then the intervention (independent variable) was introduced to that participant while the remaining participants stayed in the baseline condition. When the first participant in the treatment subphase reached the first criterion, then the treatment was introduced to the second participant who had a stable and consistent baseline. This process was repeated for the remaining participants. The multiple baseline design across participants is well-suited for educational research for individuals exhibiting similar behaviors that require attention (Gast, 2010). Due to individual learning differences, the multiple baseline design across participants also allows for some individualization during the intervention component.

For example, if a participant needs more time to learn content or acquire the behaviors being taught, then further instruction can be implemented on an individual basis.

Changing criterion research design. The second single-subject research design used in this study was a changing criterion research design. This research design is appropriate to evaluate instructional or therapeutic programs that require gradual, stepwise changes in behavior (Gast, 2010). This design requires initial baseline observations followed by the implementation of a treatment program in each of a series of treatment subphases. Gast (2010) asserted that each treatment phase is associated with a stepwise change in criterion rate for the targeted behavior. Each phase of the design provides a baseline for the next phase. When the rate of the targeted behavior changes with each stepwise change in the criterion, therapeutic change is replicated and experimental control is demonstrated. The changing criterion research design was appropriate for this study because of the stepwise change in the targeted behaviors in each of the three treatment subphases.

In this study, the independent variable was the self-advocacy instruction that consisted of 17 targeted behaviors. The targeted behaviors were organized into three treatment subphases, and then taught one phase at a time. When a participant reached mastery in the first treatment subphase, he or she then received instruction for the next treatment subphase. This process continued until all participants reached mastery in the three treatment subphases. Each treatment subphase served as a baseline for the next treatment subphase. A combined research design was used, which included a multiple

baseline design across participants, and within each treatment subphase, a changing criterion design was implemented.

Design Standards for Single-Subject Research

In an effort to establish evidence-based practices in single-subject research, standards were established as criteria for researchers to evaluate the internal validity of an SSRD study. According to Kratochwill et al. (2010), the following requirements must be met for a study to be deemed as meeting design standards:

1. Systematic manipulation of the independent variable. This means that the researcher determines when and how the independent variable conditions change.
2. Interobserver agreement in each phase. Each variable must be measured systematically over time by more than one assessor for at least 20% of the data points in each condition.
3. There must be three attempts to demonstrate an effect at three different points in time or with three different phase repetitions (i.e., multiple baseline designs with at least three baseline conditions).
4. At least three data points per phase are required to qualify as an attempt to demonstrate an effect.

To meet the first design standard, regarding the systematic manipulation of the independent variable, the researcher predetermined when and how instruction of the 17 targeted behaviors (independent variable) occurred, and predetermined the conditions (e.g., stability, reaching the criterion) in which the participant moved to the next

treatment subphase. To meet the second design standard, the dependent variable must be measured systematically by more than one assessor, and the researcher must collect interassessor agreement in each phase, and on at least 20% of the data points in each condition. In this study, interobserver agreement was assessed by two observers for 30% of the data points in baseline and each of the three treatment subphases, generalization phase, and maintenance phase, thus exceeding the criteria for the second design standard. To meet the third design standard, the self-advocacy intervention was replicated across five participants, and the researcher established experimental control during each of the three treatment subphases. To meet the fourth design standard, a treatment phase must have a minimum of three data points. In this study, the researcher predetermined that there had to be three data points at criterion before the participants could move to the next treatment subphase. The researcher exceeded the three data point threshold by having five or more data points in each treatment subphase. Therefore, the current study met the four design standards established by Kratochwill et al. (2010).

Data Collection Procedures

In this section, the data collection procedures are described. The data collection procedures included eight activities that were completed before, during, and after the intervention. These activities were: (a) initial interview, (b) random assignment of participants to the intervention phases, (c) baseline, (d) treatment Subphase I, (e) treatment Subphase II, (f) treatment Subphase III, (g) generalization, and (h) maintenance.

Initial interview. The participants each completed a 30- to 45-min one-on-one, in-person interview with the researcher at the beginning of the study (prior to collecting data for the baseline phase). These interviews were not recorded. The purpose of the interviews was for the researcher to establish rapport with the participants, determine whether they met the participation criteria, and gauge their commitment to completing the study. To establish rapport, the researcher asked the participants personal questions, such as hobbies and interests, favorite pastimes, favorite academic subjects, and family background.

The researcher determined eligibility to participate in the study by inquiring into participants' grade level, disability status, grade point average, if they had a current IEP, and their experience requesting accommodations (Appendix P). The participants were also asked about their plans after high school, such as which college or university they planned to attend, as well as their academic major. The participants were also invited to ask the researcher questions about the study. Once it was determined that the participants met the criteria to participate in the study, and they communicated their commitment to completing the study, the researcher again reviewed the signed Student Assent Form with the participants. The manner in which the participants were randomly assigned to the baseline and the three treatment subphases is described in the next section.

Random assignment to intervention. Participants were randomly assigned to the intervention, which consisted of a baseline and three treatment subphases. The researcher put the names of the five participants on separate sticky notes, which were then folded and placed in an envelope. The numbers 1 through 5 were written on a sheet of paper.

The envelope was shaken, and the sticky notes were mixed by hand. The researcher pulled a sticky note from the envelope, and the participant whose name was on the sticky note was assigned to receive the intervention first. This process continued until all five participants were assigned a number order. The first participant assigned was Carlos, followed by Alejandro, India, Jay, and then Elvis.

Baseline. When the participant entered the room for the intervention lesson, he or she was asked to sit in the chair positioned to the left of the researcher. The participant was asked to role play with the researcher how he or she would request an academic accommodation to the best of his or her ability. During each role-play situation, the researcher played the role of an instructor who was unfamiliar with the participant requesting the accommodation. The researcher did not provide any instruction or feedback to the participant. Each role-play situation was videotaped both for interobserver reliability purposes and so that the researcher could later observe the participant's behavior and complete the corresponding Data Collection Form. Each role-play situation lasted for 1.5 to 2 min on average per participant.

The data points in baseline ranged from five to nine data points per participant. The targeted behaviors that the participant demonstrated during baseline were measured under preintervention conditions, until a stable trend and level were established for each as demonstrated by low variability for three consecutive role-play situations. Once an acceptable level and trend were established with one participant, then the researcher introduced the intervention to that participant. The other participants remained in baseline under preintervention conditions.

Treatment Subphase I. The first day of the self-advocacy intervention began with the first participant meeting with the researcher to discuss the accommodations listed on his IEP. The researcher asked each participant to choose one accommodation that he or she wanted to focus on for the purpose of the study, and informed the participant that he or she would practice how to request this accommodation for a particular class throughout the study. The researcher further explained that he would teach the participant a self-advocacy intervention through seven lessons (described earlier in this chapter). The researcher informed each participant that he or she would periodically practice requesting accommodations.

The researcher then taught the participant Lessons 1-3, which covered Target Behaviors 1-8: (a) greet instructor, (b) introduce yourself, (c) reference discussion, (d) identify disability status, (e) explain disability in functional terms, (f) mention previous accommodations, (g) explain benefits of past accommodations, and (h) request use of accommodation. Immediately after completion of the first three lessons, the participant was asked to complete role-play probes requesting an accommodation, using the first eight target behaviors. The participant role played with the instructor until a 100% criterion (8 out of 8 correctly demonstrated target behaviors) was reached for three consecutive role plays. If the participant did not reach 100% criterion for three consecutive role plays, then instruction continued.

When the criterion was reached, the researcher immediately collected a minimum of five video-recorded data probes for each participant (Table 4). According to the third design standard, there must be three attempts to demonstrate an effect at three different

points in time or with three different phase repetitions (Kratochwill et al., 2010).

Although it was proposed to collect no more than two probes per day, due to the participants' availability and time constraints, the probes were all collected in one day immediately after the instructional sessions. Participants were given a 5- to 10-min break between probes as needed. The total intervention time across participants during Subphase I ranged from 59 to 68 min per participant. The average intervention time across participants during Subphase I was 62 min per session.

Treatment Subphase II. This phase began with the researcher reviewing the first eight targeted behaviors with the participant and answering any questions that the participant had. The researcher then taught the participant Lessons 4-5 which covered Target Behaviors 9-12: (9) identify resources and how they help, (10) explain what you will do, (11) ask for agreement, and (12) affirm agreement.

Immediately after Lessons 4-5 were taught, the participant was asked to complete role-play probes requesting an accommodation using the first eight targeted behaviors taught and incorporating the next four targeted behaviors taught. The participant role played with the researcher until a 92% criterion (11 of the 12 targeted behaviors) was reached for three consecutive role plays. If the participant did not reach a 92% criterion for three consecutive role plays, then instruction continued.

When the criterion was reached, the researcher immediately collected a minimum of five video-recorded data probes for each participant (Table 4). As noted earlier, the probes were collected one after the other immediately after the instructional sessions.

Table 4

The Number of Probes Collected per Instructional Session

Session	Participants	Number of Probes per Date					
Week 1 10/05 - 09 Baseline		10/05	10/06	10/07	10/08	10/09	
	Carlos	1	1	1	1	1	
	Alejandro	2	1	1	1	1	
	India		2	2	2	1	
	Jay		3	2	2	1	
	Elvis			3	3	3	
Week 2 10/12 - 16 Subphase I		10/12	10/13	10/14	10/15	10/16	
	Carlos	5					
	Alejandro		7				
	India			5			
	Jay				8		
	Elvis					5	
Week 3 10/19 - 23 Subphase II		10/19	10/20	10/21	10/22	10/23	10/24
	Carlos						N/C
	Alejandro		5				
	India			5			
	Jay				5		
	Elvis					5	
Week 4 10/26 - 30 Subphase III		10/26	10/27	10/28	10/29	10/30	10/31
	Carlos	*5					**5
	Alejandro						***5
	India			5			
	Jay				5		
	Elvis					5	
Week 5 11/09 - 13 Generalization		11/09	11/10	11/11	11/12	11/13	
	Carlos					4	
	Alejandro			4			
	India		4				
	Jay		4				
	Elvis					4	
Week 6 11/16 - 20 Maintenance		11/16	11/17	11/18	11/19	11/20	
	Carlos				2		
	Alejandro				2		
	India		2				
	Jay		2				
	Elvis				2		

Note. N/C = No probes collected. Session held at community setting with Carlos due to scheduling conflict
 *5 = Five cold probes collected for Carlos. **5 = Five cold probes collected for Carlos in a community setting.
 ***5 = Five cold probes collected for Alejandro in a community setting.

The total intervention time across participants during Subphase II ranged from 55 to 73 min per participant. The average intervention time across participants during Subphase II was 64 min per session.

Treatment Subphase III. This phase began with the researcher reviewing the first 12 targeted behaviors with the participant and answering any questions that the participant had. The researcher then taught the participant Lessons 6-7 covering Target Behaviors 13-17: (13) restate accommodations, (14) clarify your role as a student, (15) clarify instructor's role, (16) close with a positive statement, and (17) express appreciation. Immediately after Lessons 6-7 were taught, the participant was asked to complete role-play probes requesting an accommodation using the 12 targeted behaviors taught and incorporating the last 5 behaviors taught. The participant role played with the researcher until an 88% criterion (15 of the 17 correctly demonstrated target behaviors) was reached for 3 consecutive role plays. If the participant did not reach an 88% criterion for 3 consecutive role plays, then instruction continued.

When the criterion was reached, the researcher immediately collected a minimum of five video-recorded data probes for each participant (Table 4). As noted earlier, the probes were collected one after the other immediately after the instructional sessions. The total intervention time across participants during Subphase III ranged from 43 to 61 min per participant. The average intervention time across participants during Subphase III was 52 min per session.

Each intervention session was one-on-one with the participant. The participant was reminded that the intervention sessions were being recorded. The researcher also

implemented any pertinent accommodations on the participant's IEP in the intervention sessions. For example, if a participant had an accommodation for frequent breaks on his or her IEP, then breaks were incorporated into the treatment subphase sessions. The lesson ended when the participant demonstrated mastery of the targeted behaviors, as determined by the researcher observing the participant demonstrate the targeted behaviors in a role-play situation. However, a lesson could span several sessions if the participant did not demonstrate mastery and needed more time to learn the targeted behaviors. The lengths of the treatment subphase sessions were provided earlier in this section.

Generalization. One week after the intervention, four different generalization probes were administered across two different school-based personnel. The researcher informed the participant that he or she should arrange a meeting with one of his or her current teachers to complete two role-play scenarios (probes) requesting academic accommodations. For each generalization probe, the participant was given a role-play situation by the teacher and asked to role play requesting the academic accommodation to the best of his or her ability. During each role-play situation, the teacher played the role as him- or herself. After the role plays were finished, the teacher immediately completed the Educator Feedback on Role Play Form (Appendix L) and returned the forms to the researcher. The teacher did not provide feedback to the participant. Once the role plays with the teachers were complete, the participant completed two different role-play scenarios requesting accommodations with the Special Education Coordinator. The Special Education Coordinator followed the same procedures as the teachers during the role-play scenarios. After the role plays were finished, the Special Education Coordinator

completed the Educator Feedback on Role Play Form (Appendix L) and returned the forms to the researcher. The Special Education Coordinator did not provide feedback to the participant. The role plays in the generalization phase were video recorded. Although the criterion during subphase III while the participants learned the intervention was 88% (15 of the 17 correctly demonstrated target behaviors), the goal and expectation of the participants' performance during generalization was 100% criterion (17 of the 17 correctly demonstrated target behaviors).

Maintenance. Two weeks after the intervention, two maintenance probes were given. The purpose of the maintenance probes was to determine whether the participants remembered the advocacy skills after two weeks. The maintenance probes were the same probes that were used during baseline and the three intervention subphases. The probes were administered using the same procedure as the probes given during the baseline and treatment subphases, which prompted participants to demonstrate how they would request an accommodation in a role-play situation with the researcher. During maintenance, one cold probe was given followed immediately by one hot probe. The goal and expectation of the participants' performance during maintenance was 100% criterion.

Reliability

Interobserver agreement. Interobserver agreement refers to the procedure for enhancing the believability of data by comparing independent observations of the same events from two or more people (Gast, 2010). In this study, two observers scored the participants' performance of the 17 target behaviors during the role-play situations. The researcher calculated the scores as the primary observer. The secondary observer, a

fellow doctoral candidate, scored the 30% of video-recorded role-play situations for baseline, each of the three treatment subphases, generalization phase, and maintenance phase for the five participants. This independent observer was described in detail in the Participant section of this chapter as Independent Observer II.

The training involved the researcher discussing each of the target behaviors, providing operational definitions for each target behavior, and providing examples and nonexamples of the skills associated with each of the target behaviors. The independent observer was trained to a criterion of 100% using a sample video-recorded role-play situation made during the researcher's pilot study. Once the independent observer was trained, the independent observer and the researcher used the Data Collection Form (Appendix N) to independently score a second role-play situation video-recorded during the researcher's pilot study. This practice role-play situation also resulted in a 100% criterion.

The formula used to calculate interobserver agreement (IOA) was as follows (Kennedy, 2005):

$$\frac{\text{Agreements}}{\text{Agreements} + \text{Disagreement}} \times 100 = \text{Percent of Agreement}$$

The IOA calculations resulted in 99.82% agreement across all sessions measured.

Fidelity of treatment. Fidelity of treatment refers to the extent to which the intervention was implemented as intended (Horner et al., 2005; Swanson et al., 2011). Fidelity of treatment measures was used in this study to determine how closely the researcher followed the self-advocacy scripted lesson plans. The observer was a fellow doctoral candidate recruited as an independent observer to complete the Fidelity of

Treatment Checklist (Appendix G). This independent observer was described in detail in the Participant section of this chapter as Independent Observer I. The researcher met with the independent observer at a university library, provided a copy of the scripted lesson plans and reviewed them, discussed the nine instructional components of the lessons, and answered questions. The observer was instructed to write a plus sign (+) to indicate that the researcher taught the lesson or that the instruction was carried out accurately and a minus (-) to indicate that the lesson was not taught or that the instruction was not carried out accurately. The observer then watched a video recording from one of the intervention sessions for one of the participants (this session was not used to calculate the fidelity of treatment). The observer completed the checklist (Appendix G) based on the instructional components followed during the video. The researcher also scored this session and there was 100% agreement between the researcher and the observer on the fidelity of treatment in that session.

Thirty percent of the sessions with each participant were observed using the fidelity of treatment measures and noted on the Fidelity of Treatment Checklist, which was described in detail in the Materials and Instruments Related to the Intervention section of this chapter. Fidelity of treatment was calculated by dividing the number of steps completed by the nine planned steps. All nine steps were observed during one session. The calculations resulted in 100% fidelity across 30% of the three treatment subphases for each of the five participant's sessions.

Data Analysis

In order to investigate the functional relations and answer the four research questions posed in this study, an analysis of the procedures and the probes was conducted. Table 5 outlines the research questions, data collection procedures, and corresponding analysis methods. Information from baseline and the three treatment subphases were examined to determine whether an effect was demonstrated three different times. The two data analyses techniques used to determine effectiveness of the intervention—visual analysis and percent of nonoverlapping data (PND)—are described in this section. Social validity data were also analyzed. Detailed results using these data analysis techniques are presented in the next chapter.

Table 5

Methodology Summary

Research Question	Type of Data Collection	Analysis Method
1. Is there a functional relation between a self-advocacy intervention and the performance of high school students with LD requesting academic accommodations in a role-play situation?	Baseline and treatment subphase probes	Visual analysis, PND
2. Do high school students with LD generalize the self-advocacy skills learned in a role-play situation to interactions with their teachers (generalization)?	Generalization probes	Visual analysis
3. Do high school students with LD generalize the self-advocacy skills learned in a role-play situation to interactions with the Special Education Coordinator (generalization)?	Generalization probes	Visual analysis
4. Do high school students with LD maintain the self-advocacy skills two weeks later in a role-play situation (maintenance)?	Maintenance probes (same as baseline and treatment subphase probes)	Visual analysis

Note. LD = learning disability.

Visual analysis. Visual inspection was made among the five participants' data for baseline and the three treatment subphase data points only. The visual analysis of data was interpreted for each participant and across participants through six components: (a)

level, (b) trend, (c) variability, (d) immediacy of the effect, (e) overlap, and (f) consistency of data (Kratochwill et al., 2010). Descriptions of each component are as follows:

- The level is the average performance of a participant during a subphase of the intervention. For this study, the level is expressed in means. The levels reported in treatment for the current study were the means of the last three data points within each subphase (within each condition) due to the increasing trend (Kennedy, 2005).
- The trend is the slope of the best-fitting line for data within a subphase. Variability of the data refers to the range of data about the best-fitting straight line (Gast, 2010; Horner et al., 2005).
- Immediacy is the magnitude of change between the last three data points in one subphase and the first three data points in the next subphase.
- Overlap refers to the percentage of data from the treatment subphase that enters the range of data from the previous subphase.
- Consistency is the extent to which data patterns were similar in similar subphases.

Percentage of nonoverlapping data. The nonregression effect size of the percentage of nonoverlapping data (PND) was reported for each participant's data to support visual analysis and to assess the degree to which data in adjacent subphase overlap. According to Scruggs, Mastropieri, and Castro (1987), PND scores are represented by the proportion of overlapping data displayed between treatment and

baseline phases. The PND were incorporated into the visual inspection of data points as a primary indicator of effectiveness. PND scores were calculated by dividing the number of data points in the treatment subphase that did not overlap with the highest baseline data point by the total number of data points in the treatment subphase. This calculation was then converted to a percentage by multiplying by 100. Calculating the PND between each baseline and the three treatment subphases for each participant would determine whether the self-advocacy instruction was effective. Scruggs, Mastropieri, Cook, and Escobar (1986) have suggested that a PND higher than 90% indicates high effectiveness, 70-90% represents fair effectiveness, 50-70% indicates questionable effectiveness, and a PND of less than 50% suggests that the intervention was ineffective.

Social Validity

Social validity data were collected from multiple perspectives, including those of the participants, teachers, and an administrator (the Special Education Coordinator). During the generalization phase of the study, one week following withdrawal of intervention, two teachers and the Special Education Coordinator at the designated school evaluated the participants' performance while requesting academic accommodations in a role-play situation. The evaluators were asked to rate their level of agreement with the following statements using a 5-point Likert scale (*strongly disagree, disagree, neutral, agree, strongly agree*) and provide comments, if applicable, on the Educator Feedback on Role Play Form (see Appendix L):

- The student was polite when he or she approached to request accommodations.

- The student clearly explained his or her disability and the accommodations that were needed.
- Based on the student's approach and explanation, I would grant the accommodation request.

Additional social validity data were collected at the end of intervention from the participants' responses to a two-part Social Validity Survey (Appendix K). In the first part of the survey, the participants were asked to rate their level of agreement with the following 12 statements regarding their IEP accommodations and the self-advocacy intervention on a 4-point Likert scale ranging from *strongly disagree* to *strongly agree* (Appendix K):

- I know what is meant by accommodations on my IEP.
- This self-advocacy intervention is the first time I have learned about how to request accommodations that are on my IEP.
- Through learning this self-advocacy intervention, I increased my awareness of accommodations on my IEP.
- After learning this self-advocacy intervention, I have a clearer understanding about why I have accommodations identified on my IEP.
- Prior to learning this self-advocacy intervention, I was already talking with my instructors about accommodations from my IEP and using them.
- Prior to this self-advocacy intervention, I was not sure about what accommodations were on my IEP.

- Prior to this self-advocacy intervention, I had a good way to talk with my instructors about accommodations for me in their class.
- After learning this self-advocacy intervention, I believe I will be more effective in talking with instructors about accommodations I need in their classes.
- After learning this self-advocacy intervention, I believe I can explain my disability and academic needs.
- After learning this self-advocacy intervention, I am confident advocating for my academic needs.
- After learning this self-advocacy intervention, I am more comfortable requesting academic accommodations than I was before I learned this intervention.
- After learning this self-advocacy intervention, I am more likely to request academic accommodations.

In the second part of the Social Validity Survey, participants were asked to rate the importance of each of the 17 target behaviors on a 5-point Likert scale ranging from not important to very important (*not important, slightly important, moderately important, important, very important*; see Appendix K). In addition, participants were asked to answer four open-ended questions:

- Which of the target behaviors did you like best?
- Which of the target behaviors did you like the least?
- Which of the target behaviors would you change?

- Would you recommend this intervention to other students? Why or why not?

Data from the evaluators' feedback on role-play forms were analyzed by comparing similar and dissimilar responses received for each of the three questions. Data from the first part of the participant survey were analyzed by comparing similar and dissimilar responses received for each of the 12 statements and reported by the ratio of the participants' agreement with each statement. Data from the second part of the survey were analyzed by comparing similar and dissimilar responses received for each of the 17 statements and reported as percentages of the participants' agreement to each statement. The participants' responses to the four open-ended questions in the second part of the survey were analyzed and reported based on similar and dissimilar participant responses.

Chapter Summary

The purpose of this research was to examine the effectiveness of a self-advocacy intervention on the performance of high school students with LD requesting academic accommodations in a role-play situation. Specifically, the four research questions asked:

1. Is there a functional relation between the self-advocacy intervention and the performance of high school students with LD requesting academic accommodations in a role-play situation?
2. Do high school students with LD generalize the self-advocacy skills learned in a role-play situation to interactions with their teachers?
3. Do high school students with LD generalize the self-advocacy skills learned in a role-play situation to interactions with the Special Education Coordinator?

4. Do high school students with LD maintain the self-advocacy skills two weeks after the end of the intervention?

Eligible participants were engaged in a combined SSRD study, which included multiple baselines across participants and changing criterion designs. The self-advocacy intervention occurred once a week for five to six consecutive weeks and consisted of seven scripted lessons focusing on 1 or more of the 17 target behaviors that were taught to the participants during three treatment subphases. The intervention occurred at the designated school after school hours or in community settings during the weekend. The total intervention time for five participants across three treatment subphases ranged from 167 to 189 min for five to six sessions. The average intervention time across five participants was 179 min with each intervention session averaging 59 min. The dependent variable in this study was the number of correctly demonstrated targeted behaviors in a role-play situation. Additional information about social validity was also included in this chapter. The results for each research question are reported in Chapter 4.

Chapter Four: Results

The results of a combined single-subject research study, which included multiple baseline across participants and changing criterion design, are presented in this chapter. The effects of a self-advocacy intervention on the performance of high school students with LD when requesting academic accommodations in a role-play situation were examined. The independent variable in this study was the self-advocacy instruction modified from the Self-Advocacy and Conflict Resolution Training (SACR): Strategies for the Classroom Accommodation Request Intervention (Rumrill et al., 1999). The effects of the self-advocacy intervention are reported based on the dependent variable (the number of correctly demonstrated target behaviors in a role-play situation) and additional measures regarding the participants' perceptions and attitudes regarding the intervention.

Five high school students with LD participated in this study. Participants were randomly assigned to the intervention, which consisted of baseline and three treatment subphases. Once an acceptable level and trend was established for baseline with one participant, then the independent variable was introduced to the next randomly-selected participant. The current study consisted of a baseline, three treatment subphases, generalization, and maintenance phases. The criterion for the three treatment subphases was established prior to intervention based on the researcher's experience during the pilot study and the participants' working memory and processing speed deficits. Additional

data were collected about social validity from participants, the teachers, and an administrator (special education coordinator).

During baseline, the participant was given a role-play situation depicting a student requesting an academic accommodation from a teacher. The role-play situation consisted of a brief scenario describing a student with a specific disability, the student's accommodation, and a school situation in which that student needs to ask a teacher for an academic accommodation (e. g., you are a student at the _____ School who has a specific learning disability. An accommodation on your Individualized Education Program (IEP) is that you receive extended time on tests. You approach Mr. Wilson your English teacher and request an accommodation of extended time for your upcoming test in your English class). The participant was asked to role play with the researcher how he or she would request the accommodation to the best of his or her ability. The researcher did not provide instruction nor give the participant feedback on his or performance during the role-play probe.

In treatment Subphase I, the researcher and the participant discussed the accommodations listed on the participant's IEP. The researcher asked each participant to choose one accommodation that he or she wanted to focus on for the purpose of the study, and informed the participant that he or she would practice how to request this accommodation for a particular class throughout the study. The participant was then taught Lessons 1-3, which covered Target Behaviors 1-8: (1) greet instructor, (2) introduce yourself, (3) reference discussion, (4) identify disability status, (5) explain disability in functional terms, (6) mention previous accommodation, (7) explain benefits

of past accommodations, and (8) request use of accommodation. After the first three lessons were complete, the participant role played requesting the accommodation selected by the participant using the first eight target behaviors taught.

In treatment Subphase II, the participant was taught Lessons 4-5, which covered Target Behaviors 9-12: (9) identify resources and how they assist, (10) state your role as the student, (11) ask for agreement of the accommodation request, and (12) affirm agreement of the accommodation request. After Lessons 4 and 5 were taught, the participant role played requesting the accommodation selected by the participant, using the first eight targeted behaviors taught and then incorporating the next four targeted behaviors taught.

In treatment Subphase III, the participant was taught Lessons 6-7, which covered Target Behaviors 13 to 17: (13) restate accommodation, (14) clarify your role as the student, (15) clarify instructor's role in facilitating the accommodation request, (16) close with a positive statement that suggests closure of the accommodation request discussion, and (17) express appreciation of the instructor's time or consideration of the accommodation request. After Lessons 6 and 7 were taught, the participant role played requesting the accommodation selected by the participant, using 12 targeted behaviors taught and then incorporating the last 5 behaviors taught. The participants received an average of 179 min of instruction across three treatment subphases for five to six sessions. Due to the participants' availability and time constraints, the hot probes were all collected in one day immediately after the instructional sessions one right after the other.

The cold probes were also collected in one day at the beginning of next instructional session one right after the other.

In the generalization phase, one week following withdrawal of intervention, four different generalization probes were administered across two different school-based personnel. The participants completed two role-play situations requesting academic accommodations with a current teacher and two role-play situations requesting academic accommodations with the special education coordinator. Two weeks following withdrawal of intervention, two probes were administered to determine whether the participants maintained their self-advocacy skills. Data for each participant and each phase of the intervention are numerically presented and described in this chapter.

The effects of the self-advocacy intervention on the performance of five high school students with LD when requesting academic accommodations in a role-play situation are described in relation to the following research questions (RQ):

1. Is there a functional relation between a self-advocacy intervention and the performance of high school students with LD requesting academic accommodations in a role-play situation?
2. Do high school students with LD generalize the self-advocacy skills learned in a role-play situation to interactions with their teachers (generalization)?
3. Do high school students with LD generalize the self-advocacy skills learned in a role-play situation to interactions with the special education coordinator (generalization)?

4. Do high school students with LD maintain the self-advocacy skills two weeks after mastering intervention in a role-play situation (maintenance)?

In this study, a combined SSRD was utilized. First, a multiple baseline design across participants was used to observe the participants' behavior monitored over time (Figure 6). This design allowed the researcher to determine whether there was a functional relation between the dependent and independent variables for each participant (Horner et al., 2005). Next, a changing criterion design was implemented (Figure 6). This design required initial baseline observations followed by the implementation of a treatment program in a series of treatment subphases. Each treatment subphase was associated with a stepwise change in criterion rate for the targeted behavior. Each phase of the design provided a baseline for the next phase. When the rate of the targeted behavior changed with each stepwise change in the criterion, therapeutic change was replicated, and experimental control was demonstrated (Gast, 2010). The changing criterion research design was appropriate for this study because of the stepwise change in the targeted behaviors in each of the three treatment subphases.

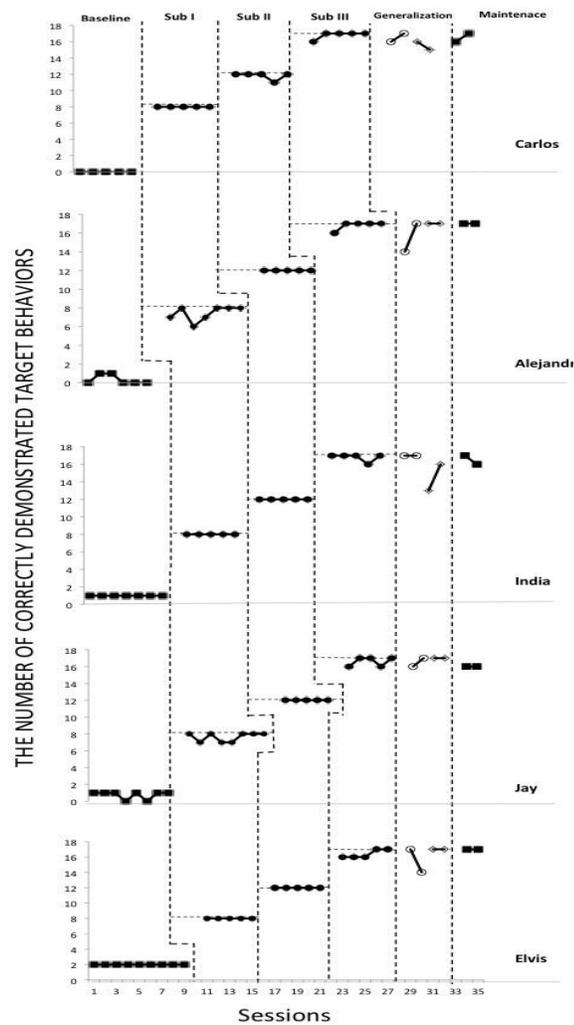


Figure 6. Multiple baseline and changing criterion across participants.

The two data analysis techniques used to evaluate the effectiveness of the self-advocacy intervention were visual analysis and PND. The visual analysis of the data were analyzed across baseline, three treatment subphases, generalization, and maintenance phases for each participant and across participants based on the following six components: (a) level, (b) trend, (c) variability, (d) immediacy of the effect, (e) overlap, and (f) consistency of data (Kratochwill et al., 2010). The PND were integrated into the

visual inspection of the data points as another way to analyze the data to determine the effectiveness of the self-advocacy intervention.

The Data Collection form (Appendix N) was a recording system with operational definitions and a 4-point Likert rating scale (*detailed response*, *acceptable response*, *unacceptable response*, and *no response*). The Data Collection form was used by the researcher to note the extent to which the 17 targeted behaviors were demonstrated.

Results for Research Question 1

Is there a functional relation between a self-advocacy intervention and the performance of high school students with LD requesting academic accommodations in a role-play situation? The participant was given a role-play situation depicting a student requesting an academic accommodation from a teacher. The participant's performance requesting an academic accommodation in a role-play situation was analyzed. Levels, standard deviations (SD), and PND were calculated for each participant (see Table 6). During the initial baseline phase, all participants demonstrated low variability, flat trends, and low levels of performance. The number of baseline sessions for all participants ranged from five to nine sessions. Data points ranged from 0 to 2 during baseline. All participants demonstrated an immediate change in level upon introduction of each subphase of the intervention. There was no overlap of data points for all participants between baseline and the three treatment subphases. PND were calculated at 100% across all participants and all subphases. According to Scruggs et al. (1986), a PND higher than 90% indicates high effectiveness.

To meet the fourth SSRD standard, a treatment phase must have a minimum of three data points. In this study, the researcher preestablished that the participant had to have three data points at or above criterion before the participant could move to the next treatment subphase. The researcher exceeded the three data point threshold by having five or more data points in each treatment subphase. Therefore, the current study met the fourth design standard established by Kratochwill et al. (2010). The consistency of data, including flat trends, low variability, evident changes in levels, and PND in each treatment subphase across all participants indicated evidence of high effectiveness and a functional relation between the self-advocacy intervention and an increase in the participants' performance while requesting academic accommodations in a role-play situation.

Table 6

Levels and PND of Individual Participant Performance Requesting Academic Accommodations

Participant	Baseline <i>M (SD)</i>	Subphase I <i>M (SD)</i>	Subphase II <i>M (SD)</i>	Subphase II <i>M (SD)</i>	PND
Carlos	0.00 (0.00)	8.00 (0.00)	11.80 (0.44)	16.80 (0.44)	100%
Alejandro	0.33 (0.51)	7.43 (0.78)	12.00 (0.00)	16.80 (0.44)	100%
India	1.00 (0.00)	8.00 (0.00)	12.00 (0.00)	16.80 (0.44)	100%
Jay	0.75 (0.46)	7.63 (0.51)	12.00 (0.00)	16.60 (0.54)	100%
Elvis	2.00 (0.00)	8.00 (0.00)	12.00 (0.00)	16.40 (0.45)	100%

Carlos. As seen in Figure 7, Carlos demonstrated low performance across the five sessions in the baseline condition ($M = 0.00$, $SD = 0.00$). He demonstrated no variability

across baseline sessions. Carlos's performance was characterized by a flat trend and was consistently stable during baseline.

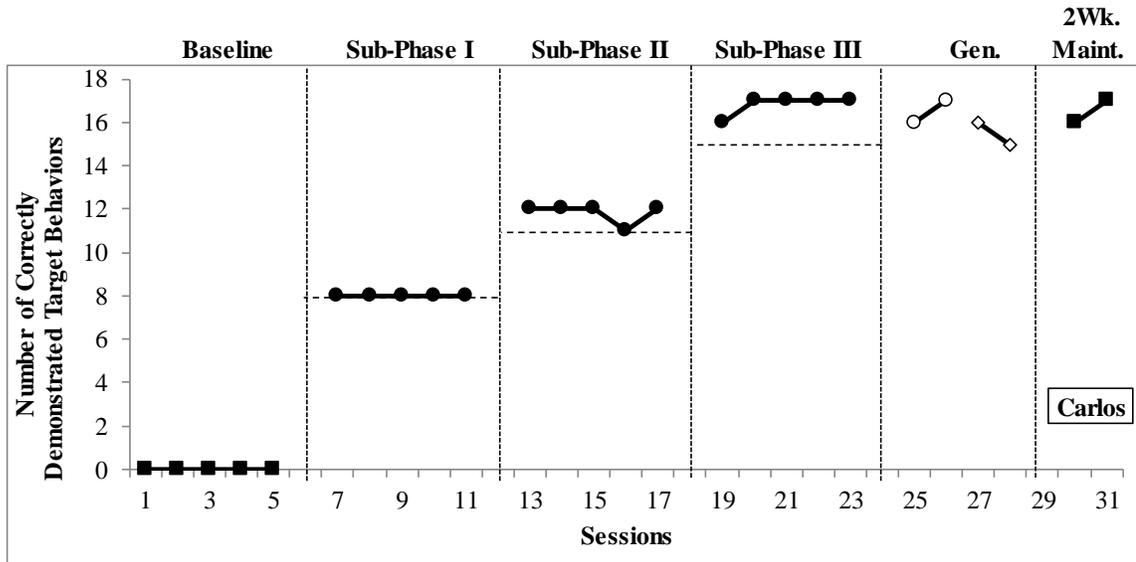


Figure 7. The number of correctly demonstrated target behaviors for Carlos across baseline (■), Subphase I, Subphase II, and Subphase III (●), generalization with teacher (○), generalization with special education coordinator (◇), two-week maintenance (■).

Upon introduction of Subphase I of the intervention, Targeted Behaviors 1-8 were taught, and the criterion for Subphase I was eight out of eight correctly demonstrated targeted behaviors. Carlos demonstrated a change in level from baseline ($M = 0.00$, $SD = 0.00$) to Subphase I ($M = 8.00$, $SD = 0.00$). Carlos showed an immediate change in the number of correctly demonstrated targeted behaviors. The data were characterized by a flat trend and no variability throughout Subphase I. PND were calculated to be 100% from baseline to Subphase I for Carlos. Carlos reached the criterion for Subphase I and consistently performed at the criterion level throughout Subphase I.

Upon introduction of Subphase II of the intervention, Targeted Behaviors 9-12 were taught, and the criterion for Subphase II was 11 out of 12 correctly demonstrated targeted behaviors. Carlos demonstrated a change in level from Subphase I ($M = 8.00$, $SD = 0.00$) to Subphase II ($M = 11.80$, $SD = 0.44$). Carlos showed an immediacy of change in the number of correctly demonstrated target behaviors. The data were characterized by a flat trend and low variability throughout Subphase II. PND were calculated to be 100% from Subphase I to Subphase II for Carlos. Carlos reached the criterion for Subphase II and consistently performed on or above the criterion throughout Subphase II.

Upon introduction of Subphase III of the intervention, Targeted Behaviors 13 through 17 were taught, and the criterion for Subphase III was 15 out of 17 correctly demonstrated targeted behaviors. Carlos had a change in level from Subphase II ($M = 11.80$, $SD = 0.44$) to Subphase III ($M = 16.80$, $SD = 0.44$). Carlos showed an immediate change in the number of correctly demonstrated target behaviors. The data were characterized by a flat trend and low variability throughout Subphase III. PND were calculated to be 100% from Subphase II to Subphase III for Carlos. Carlos reached the criterion for Subphase III and consistently performed above the criterion throughout Subphase III. A visual inspection of the data (Figure 7) and PND levels indicated evidence of high effectiveness and a functional relation between the self-advocacy intervention and an increase in Carlos's performance requesting academic accommodations in a role-play situation.

Alejandro. As seen in Figure 8, Alejandro demonstrated low performance across the six sessions in the baseline condition ($M = 0.33$, $SD = 0.51$). He demonstrated low

variability in the first three data points in baseline sessions and flat and stable performance in the last three data points in baseline. Alejandro's performance was characterized by low variability during baseline.

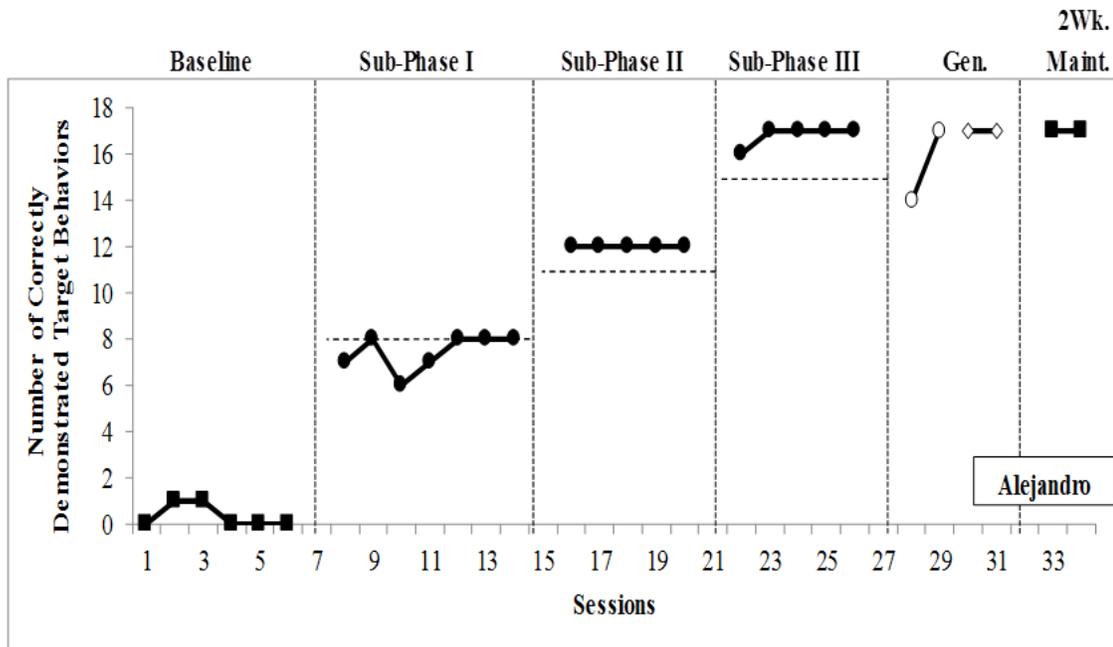


Figure 8. The number of correctly demonstrated target behaviors for Alejandro across baseline (■), Subphase I, Subphase II, and Subphase III (●), generalization with teacher (○), generalization with special education coordinator (◇), two-week maintenance (■).

Upon introduction of Subphase I of the intervention, Targeted Behaviors 1-8 were taught, and the criterion for Subphase I was eight out of eight correctly demonstrated targeted behaviors. Alejandro demonstrated a change in level from baseline ($M = 0.33$, $SD = 0.51$) to Subphase I ($M = 7.43$, $SD = 0.78$). Alejandro showed an immediate change in the number of correctly demonstrated targeted behaviors. The data were characterized by low variability in the first four data points in Subphase I and a stable and consistent

trend in the last three data points in Subphase I. PND were calculated to be 100% from baseline to Subphase I for Alejandro. Alejandro reached the criterion for Subphase I and performed at the criterion during the last three data points in Subphase I.

Upon introduction of Subphase II of the intervention, Targeted Behaviors 9-12 were taught, and the criterion for Subphase II was 11 out of 12 correctly demonstrated targeted behaviors. The criterion was established prior to intervention based on the researcher's experience during the pilot study and the participants' working memory and processing speed deficits. Alejandro demonstrated a change in level from Subphase I ($M = 7.43$, $SD = 0.78$) to Subphase II ($M = 12.00$, $SD = 0.00$). Alejandro showed an immediate change in the number of correctly demonstrated target behaviors. The data were characterized by a flat trend and no variability throughout Subphase II. PND were calculated to be 100% from Subphase I to Subphase II for Alejandro. Alejandro reached the criterion for Subphase II and consistently performed above the criterion throughout Subphase II.

Upon introduction of Subphase III of the intervention, Targeted Behaviors 13 through 17 were taught, and the criterion for Subphase III was 15 out of 17 correctly demonstrated targeted behaviors. Alejandro had a change in level from Subphase II ($M = 12.00$, $SD = 0.00$) to Subphase III ($M = 16.80$, $SD = 0.44$). Alejandro showed an immediate change in the number of correctly demonstrated target behaviors. The data were characterized by an upward trend throughout Subphase III. PND were calculated to be 100% from Subphase II to Subphase III for Alejandro. Alejandro reached the criterion for Subphase III and consistently performed above the criterion throughout Subphase III.

A visual inspection of the data (Figure 8) and PND levels indicated evidence of high effectiveness and a functional relation between the self-advocacy intervention and an increase in Alejandro’s performance requesting academic accommodations in a role-play situation.

India. As seen in Figure 9, India demonstrated low performance across the seven sessions in the baseline condition ($M = 1.00$, $SD = 0.00$). She demonstrated no variability across baseline sessions. India’s performance was characterized by a flat trend and was consistently stable during baseline.

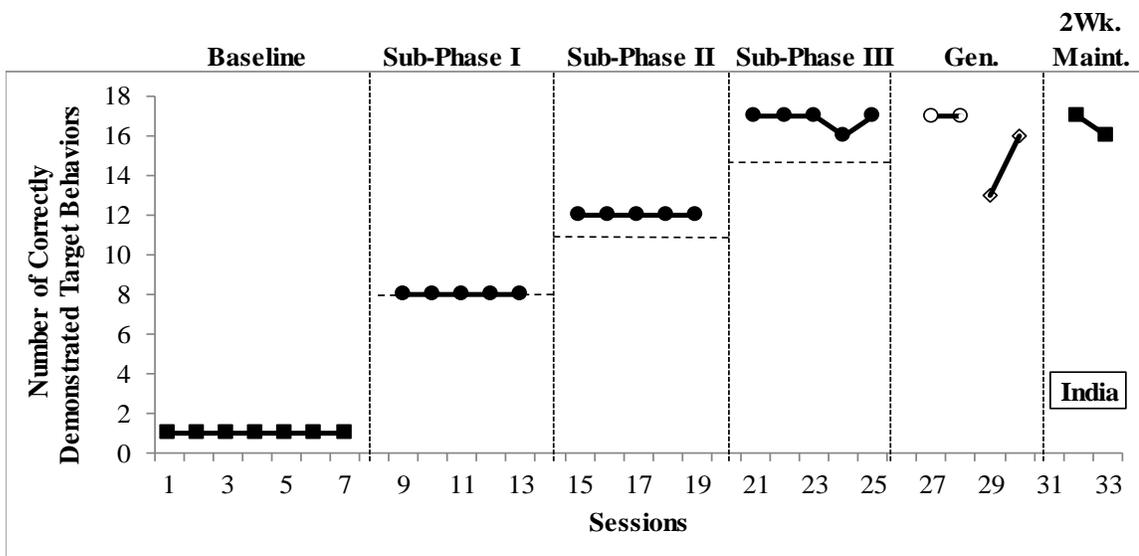


Figure 9. The number of correctly demonstrated target behaviors for India across baseline (■), Subphase I, Subphase II, and Subphase III (●), generalization with teacher (○), generalization with the special education coordinator (◇), two-week maintenance (■).

Upon introduction of Subphase I of the intervention, Targeted Behaviors 1-8 were taught, and the criterion for Subphase I was eight out of eight correctly demonstrated

targeted behaviors. India demonstrated a change in level from baseline ($M = 1.00$, $SD = 0.00$) to Subphase I ($M = 8.00$, $SD = 0.00$). India showed an immediate change in the number of correctly demonstrated target behaviors. The data were characterized by a flat trend and no variability throughout Subphase I. PND were calculated to be 100% from baseline to Subphase I for India. India reached the criterion for Subphase I and consistently performed at the criterion throughout Subphase I.

Upon introduction of Subphase II of the intervention, Targeted Behaviors 9-12 were taught, and the criterion for Subphase II was 11 out of 12 correctly demonstrated targeted behaviors. India demonstrated a change in level from Subphase I ($M = 8.00$, $SD = 0.00$) to Subphase II ($M = 12.00$, $SD = 0.00$). India showed an immediate change in the number of correctly demonstrated target behaviors. The data were characterized by a flat trend and no variability throughout Subphase II. PND were calculated to be 100% from Subphase I to Subphase II for India. India reached the criterion for Subphase II and consistently performed above the criterion throughout Subphase II.

Upon introduction of Subphase III of the intervention, Targeted Behaviors 13 through 17 were taught, and the criterion for Subphase III was 15 out of 17 correctly demonstrated targeted behaviors. India had a change in level from Subphase II ($M = 12.00$, $SD = 0.00$) to Subphase III ($M = 16.80$, $SD = 0.44$). India showed an immediate change in the number of correctly demonstrated target behaviors. The data were characterized by a stable trend throughout Subphase III. PND were calculated to be 100% from Subphase II to Subphase III for India. India reached the criterion for Subphase III and consistently performed above the criterion throughout Subphase III. A visual

inspection of the data (Figure 9) and PND levels indicated evidence of high effectiveness and a functional relation between the self-advocacy intervention and an increase in India's performance requesting academic accommodations in a role-play situation.

Jay. As seen in Figure 10, Jay demonstrated low performance across the eight sessions in the baseline condition ($M = 0.75$, $SD = 0.46$). He demonstrated low variability in the first six data points in the baseline sessions and flat and stable performance in the last two data points in baseline. Jay's performance was characterized by low variability during baseline.

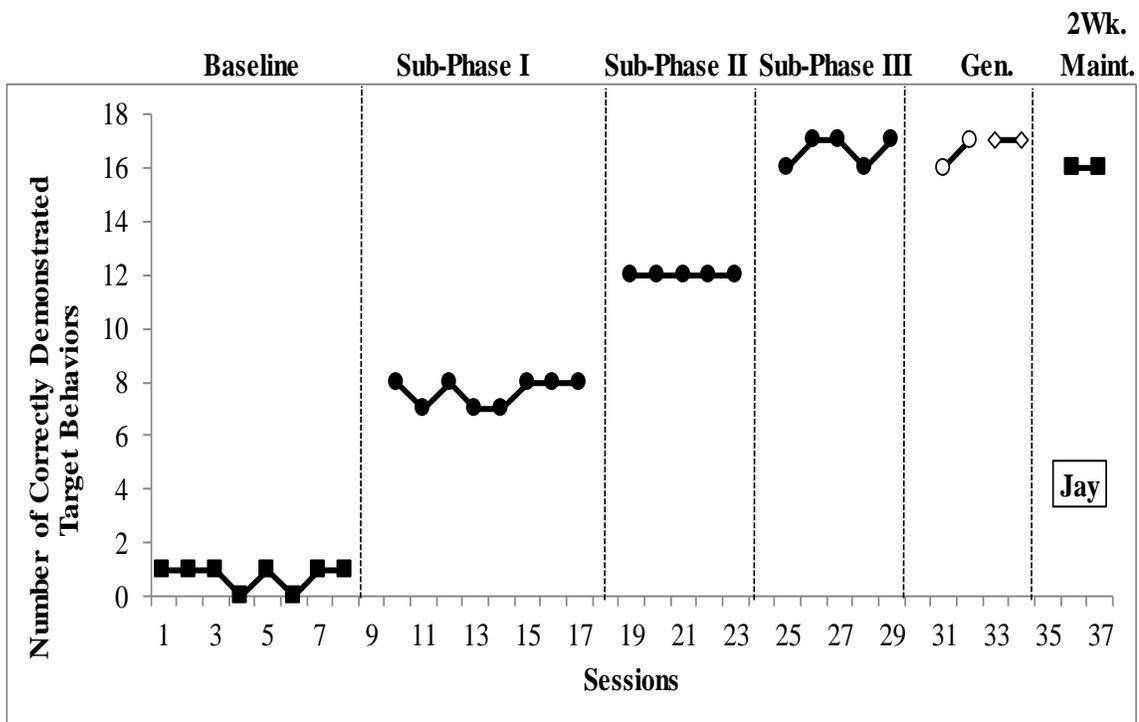


Figure 10. The number of correctly demonstrated target behaviors for Jay across baseline (■), Subphase I, Subphase II, and Subphase III (●), generalization with teacher (○), generalization with special education coordinator (◇), two-week maintenance (■).

Upon introduction of Subphase I of the intervention, Targeted Behaviors 1-8 were taught, and the criterion for Subphase I was eight out of eight correctly demonstrated targeted behaviors. Jay demonstrated a change in level from baseline ($M = 0.75$, $SD = 0.46$) to Subphase I ($M = 7.63$, $SD = 0.51$). Jay showed an immediate change in the number of correctly demonstrated target behaviors. The data were characterized by low variability throughout Subphase I. PND were calculated to be 100% from baseline to Subphase I for Jay. Jay reached the criterion for Subphase I and consistently performed at the criterion throughout Subphase I.

Upon introduction of Subphase II of the intervention, Targeted Behaviors 9-12 were taught, and the criterion for Subphase II was 11 out of 12 correctly demonstrated targeted behaviors. Jay demonstrated a change in level from Subphase I ($M = 7.63$, $SD = 0.51$) to Subphase II ($M = 12.00$, $SD = 0.00$). Jay showed an immediate change in the number of correctly demonstrated target behaviors. The data were characterized by a flat trend and no variability throughout Subphase II. PND were calculated to be 100% from Subphase I to Subphase II for Jay. Jay reached the criterion for Subphase II and consistently performed above the criterion throughout Subphase II.

Upon introduction of Subphase III of the intervention, Targeted Behaviors 13 through 17 were taught, and the criterion for Subphase III was 15 out of 17 correctly demonstrated targeted behaviors. Jay had a change in level from Subphase II ($M = 12.00$, $SD = 0.00$) to Subphase III ($M = 16.60$, $SD = 0.54$). Jay showed an immediate change in the number of correctly demonstrated target behaviors. The data were characterized by low variability throughout Subphase III. PND were calculated to be 100% from Subphase

II to Subphase III for Jay. Jay reached the criterion for Subphase III and consistently performed above criterion throughout Subphase III. A visual inspection of the data (Figure 10) and PND levels indicated evidence of high effectiveness and a functional relation between the self-advocacy intervention and an increase in Jay’s performance requesting academic accommodations in a role-play situation.

Elvis. As seen in Figure 11, Elvis demonstrated low performance across the nine sessions in the baseline condition ($M = 2.00$, $SD = 0.00$). He demonstrated no variability across baseline sessions. Elvis’ performance was characterized by a flat trend and was consistently stable during baseline.

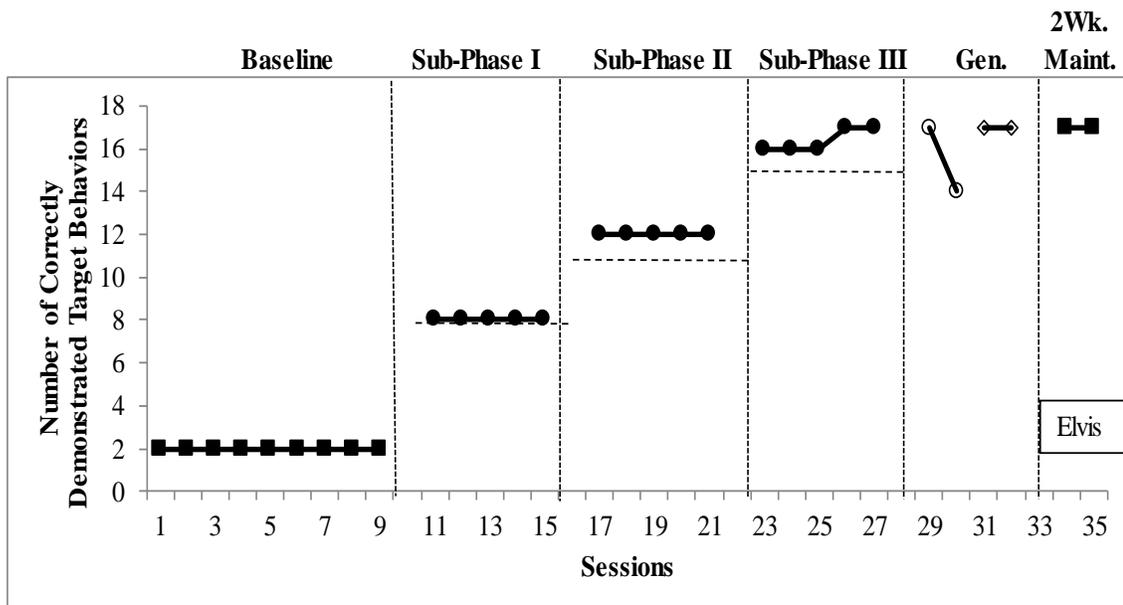


Figure 11. The number of correctly demonstrated target behaviors for Elvis across baseline (■), Subphase I, Subphase II, and Subphase III (●), generalization with teacher (○), generalization with special education coordinator (◇), two-week maintenance (■).

Upon introduction of Subphase I of the intervention, Targeted Behaviors 1-8 were taught, and the criterion for Subphase I was eight out of eight correctly demonstrated targeted behaviors. Elvis demonstrated a change in level from baseline ($M = 2.00$, $SD = 0.00$) to Subphase I ($M = 8.00$, $SD = 0.00$). Elvis showed an immediate change in the number of correctly demonstrated target behaviors. The data were characterized by a flat trend and no variability during Subphase I. PND were calculated to be 100% from baseline to Subphase I for Elvis. Elvis reached criterion for Subphase I and consistently performed at the criterion level throughout Subphase I.

Upon introduction of Subphase II of the intervention, Targeted Behaviors 9-12 were taught, and the criterion for Subphase II was 11 out of 12 correctly demonstrated targeted behaviors. Elvis demonstrated a change in level from Subphase I ($M = 8.00$, $SD = 0.00$) to Subphase II ($M = 12.00$, $SD = 0.00$). Elvis showed an immediate change in the number of correctly demonstrated target behaviors. The data were characterized by a flat trend and no variability during Subphase II. PND were calculated to be 100% from Subphase I to Subphase II for Elvis. Elvis reached the criterion for Subphase II and consistently performed above the criterion throughout Subphase II.

Upon introduction of Subphase III of the intervention, Targeted Behaviors 13 through 17 were taught, and the criterion for Subphase III was 15 out of 17 correctly demonstrated targeted behaviors. Elvis had a change in level from Subphase II ($M = 12.00$, $SD = 0.00$) to Subphase III ($M = 16.40$, $SD = 0.54$). Elvis showed an immediate change in the number of correctly demonstrated target behaviors. The data were characterized by an upward trend during Subphase III. PND were calculated to be 100%

from Subphase II to Subphase III for Elvis. Elvis reached criterion for Subphase III and consistently performed above criterion throughout Subphase III. A visual inspection of the data (Figure 11) and PND levels indicated evidence of high effectiveness and a functional relation between the self-advocacy intervention and an increase in Elvis' performance requesting academic accommodations in a role-play situation.

Results for Research Question 2

Do high school students with LD generalize the self-advocacy skills learned in a role-play situation to interactions with their teachers (generalization)? During the generalization phase of the study, one week following withdrawal of intervention, the participants were asked to perform two new role-play situations with a current teacher. The role plays in the generalization phase were selected by the researcher and were not the same role-play situations used in baseline and the three treatment subphases. In the first role-play situation with the teacher, data points for all participants ranged from 14 to 17 ($M = 16.00$, $SD = 1.22$). Two of the five participants (India and Elvis) generalized their performance of the self-advocacy skills to the criterion of 17 out of 17 correctly demonstrated targeted behaviors in the first role-play situation with their teachers. In the second role play with the teachers, data points for all participants again ranged from 14 to 17 ($M = 16.40$, $SD = 1.34$), but there was a slight increase in their overall performance in the second role-play situation with their teachers in comparison to the first role-play situation. Four of the five participants (Carlos, Alejandro, India, and Jay) generalized their performance of the self-advocacy skills to the criterion of 17 out of 17 correctly demonstrated targeted behaviors in the second role play. One participant (India)

generalized her performance to the criterion in both role-play situations with her teacher. As all participants demonstrated low variability and high performance in the role-play situations with their teachers, it was concluded that they were able to generalize the self-advocacy skills with their teachers one week after withdrawal of intervention.

Carlos. As seen in Figure 7, in the first generalization session with his teacher, Carlos performed 16 out of 17 (94%) of the target behaviors correctly when the intervention was withdrawn. The target behavior that Carlos missed in the first generalization phase with his teacher was Target Behavior 6: (mentions previous accommodation). In the second generalization session with his teacher, Carlos performed 17 out of 17 (100%) of the target behaviors correctly. There was low variability between the data points in the generalization phase with the teacher. Carlos generalized his performance of the 17 target behaviors with his teacher ($M = 16.50$, $SD = 0.70$), which is slightly lower than the criterion but consistently higher than baseline ($M = 0.00$, $SD = 0.00$).

Alejandro. As seen in Figure 8, in the first generalization session with his teacher, Alejandro performed 14 out of 17 (82%) of the target behaviors correctly when the intervention was withdrawn. The three target behaviors that Alejandro missed in the first generalization phase with his teacher were: Target Behavior 2 (introduce yourself), Target Behavior 3 (reference discussion), and Target Behavior 8 (request use of accommodation). In the second generalization session with his teacher, Alejandro performed 17/17 (100%) of the target behaviors correctly. There was low variability between the data points in the generalization phase with the teacher. Alejandro

generalized his performance of the 17 target behaviors with his teacher ($M = 15.5$, $SD = 2.12$), which is slightly lower than the criterion but consistently higher than baseline ($M = 0.33$, $SD = 0.51$).

India. As seen in Figure 9, in the first generalization session with her teacher, India performed 17/17 (100%) of the target behaviors correctly when the intervention was withdrawn. In the second generalization session with her teacher, India performed 17/17 (100%) of the target behaviors correctly. There was no variability between the data points in the generalization sessions with the teacher. India generalized her performance of the 17 target behaviors with her teacher ($M = 17.00$, $SD = 0.00$) to the criterion and consistently higher than baseline ($M = 1.00$, $SD = 0.00$).

Jay. As seen in Figure 10, in the first generalization session with his teacher, Jay performed 16/17 (94%) of the target behaviors correctly when the intervention was withdrawn. The target behavior that Jay missed in the first generalization phase with his teacher was Target Behavior 3 (reference discussion). In the second generalization session with his teacher, Jay performed 17/17 (100%) of the target behaviors correctly. There was low variability between the data points in the generalization phase with the teacher, with the last data point slightly increasing. Jay generalized his performance of the 17 target behaviors with his teacher ($M = 16.50$, $SD = 0.70$), which is slightly lower than the criterion but consistently higher than baseline ($M = 0.75$, $SD = 0.46$).

Elvis. As seen in Figure 11, in the first generalization session with his teacher, Elvis performed 17/17 (100%) of the target behaviors correctly when the intervention was withdrawn. In the second generalization session with his teacher, Elvis performed

14/17 (82%) of the target behaviors correctly. The three target behaviors that Elvis missed in the second generalization session with his teacher were: Target Behavior 8 (request use of accommodation), Target Behavior 9 (identify resources and how they assist), and Target Behavior 10 (state your role as the student). There was low variability between the data points in the generalization phase with the teacher. Elvis generalized his performance of the 17 target behaviors with his teacher ($M = 15.50$, $SD = 2.12$), which is slightly lower than the criterion but consistently higher than baseline ($M = 2.00$, $SD = 0.00$).

Results for Research Question 3

Do high school students with LD generalize the self-advocacy skills learned in a role-play situation to interactions with the special education coordinator (generalization)? During the generalization phase of the study, one week following withdrawal of intervention, the participants were asked to perform two new role-play situations with the special education coordinator. The role plays in the generalization phase were selected by the researcher and were not the same role-play situations used in baseline, the three treatment subphases, or with the teachers. In the first role play with the special education coordinator, data points for all participants ranged from 13 to 17 ($M = 16.0$, $SD = 1.73$). Three of the five participants (Alejandro, Jay, and Elvis) generalized their performance of the self-advocacy skills to criterion (17 out of 17 targeted behaviors) in the first role-play situation with the special education coordinator. In the second role play with the special education coordinator, data points for all participants ranged from 15 to 17 ($M = 16.40$, $SD = 0.89$), which indicated a slight increase in their overall performance in the second

role-play situation with the special education coordinator. Three of the five participants (Alejandro, Jay, and Elvis) generalized their performance of the self-advocacy skills to criterion (17 out of 17 targeted behaviors) in the second role play. Three participants (Alejandro, Jay, and Elvis) generalized their performance to criterion (17 out of 17 targeted behaviors) in both role-play situations with the special education coordinator. All participants demonstrated low variability and high performance in the role-play situations with the special education coordinator and therefore, were able to generalize the self-advocacy skills with the special education coordinator one week after withdrawal of intervention.

Carlos. As seen in Figure 7, in the first generalization session with the special education coordinator, Carlos performed 16/17 (94%) of the target behaviors correctly. The target behavior that Carlos missed in the first generalization session with the special education coordinator was Target Behavior 10 (state your role as the student). In the second generalization session with the special education coordinator, Carlos performed 15/17 (88%) of the target behaviors correctly. The two target behaviors that Carlos missed in the second generalization session with his teacher were: Target Behavior 8 (request use of accommodation) and Target Behavior 17 (express appreciation). There was low variability between the data points in the generalization phase with the teacher, with the last data point slightly decreasing. Carlos generalized his performance of the 17 target behaviors with the special education coordinator ($M = 15.50$, $SD = 0.70$), which was lower than he generalized with his teacher ($M = 16.50$, $SD = 0.70$) but consistently higher than in baseline ($M = 0.00$, $SD = 0.00$).

Alejandro. As seen in Figure 8, in the first generalization session with the special education coordinator, Alejandro performed 17/17 (100%) of the target behaviors correctly. In the second generalization session with the special education coordinator, Alejandro again performed 17/17 (100%) of the target behaviors correctly. There was no variability between the data points in the generalization sessions with the special education coordinator. Alejandro generalized his performance of the 17 target behaviors with the special education coordinator ($M = 17.00$, $SD = 0.00$), which was consistently higher than he generalized with his teacher ($M = 15.50$, $SD = 2.12$) and baseline ($M = 0.33$, $SD = 0.51$).

India. As seen in Figure 9, in the first generalization session with the special education coordinator, India performed 13/17 (76%) of the target behaviors correctly. The four target behaviors that India missed in the first generalization phase with the special education coordinator were: Target Behavior 2 (introduce yourself), Target Behavior 9 (identify resources and how they assist), Target Behavior 10 (state your role as the student), and Target Behavior 13 (restate accommodations). In the second generalization session with the special education coordinator, India performed 16/17 (94%) of the target behaviors correctly. The target behavior that India missed in the second generalization phase with the special education coordinator was Target Behavior 8 (request use of accommodation). There was low variability between the data points in the generalization phase with the special education coordinator, with the last data point slightly increasing. India generalized her performance of the 17 target behaviors with the special education coordinator ($M = 14.50$, $SD = 2.12$), which was lower than she

generalized with her teacher ($M = 17.00$, $SD = 0.00$) but consistently higher than baseline ($M = 1.00$, $SD = 0.00$).

Jay. As seen in Figure 10, in the first generalization session with the special education coordinator, Jay performed 17/17 (100%) of the target behaviors correctly. In the second generalization session with the special education coordinator, Jay again performed 17/17 (100%) of the target behaviors correctly. There was no variability between the data points in the generalization sessions with the special education coordinator. Jay generalized his knowledge of the 17 target behaviors with the special education coordinator ($M = 17.00$, $SD = 0.00$), which was slightly higher than he generalized with his teacher ($M = 16.50$, $SD = 0.70$) and consistently higher than baseline ($M = 0.75$, $SD = 0.46$).

Elvis. As seen in Figure 11, in the first generalization session with the special education coordinator, Elvis performed 17/17 (100%) of the target behaviors correctly. In the second generalization session with the special education coordinator, Elvis again performed 17/17 (100%) of the target behaviors correctly. There was no variability between the data points in the generalization sessions with the special education coordinator. Elvis generalized his performance of the 17 target behaviors with the special education coordinator ($M = 17.00$, $SD = 0.00$), which was higher than he generalized with his teacher ($M = 15.50$, $SD = 2.12$) and consistently higher than baseline ($M = 2.00$, $SD = 0.00$).

Results for Research Question 4

Do high school students with LD maintain the self-advocacy skills two weeks after mastering intervention in a role-play situation (maintenance)? During the maintenance phase of the study, two weeks following withdrawal of intervention, the participants were asked to perform two role-play situations with the researcher. The purpose of the maintenance probes was to demonstrate whether the participants maintained the self-advocacy skills after the intervention had been taught and participants had demonstrated mastery. The role plays in the maintenance phase were the same role plays and accommodation requests that the participants used in baseline and the three treatment subphases. In the first maintenance probe, data points for all participants ranged from 16 to 17 ($M = 16.6$, $SD = 0.54$). Three of the five participants (Alejandro, India, and Elvis) generalized their performance of the self-advocacy skills to the criterion (17 out of 17 targeted behaviors) in the first maintenance probe with the researcher. In the second maintenance probe with the researcher, data points for all participants again ranged from 16 to 17 ($M = 16.6$, $SD = 0.54$). Three of the five participants (Carlos, Alejandro, and Elvis) generalized their performance of the self-advocacy skills to the criterion in the second maintenance probe. Two participants (Alejandro and Elvis) maintained their performance to the criterion in both maintenance probes with the researcher. As all participants demonstrated low variability and high performance during the maintenance probes, it was concluded that they were able to maintain the self-advocacy skills two weeks after withdrawal of intervention.

Carlos. As seen in Figure 7, in the first maintenance probe, Carlos performed 16/17 (94%) of the target behaviors correctly two weeks following withdrawal of intervention. The target behavior that Carlos missed in the first maintenance probe was Target Behavior 6 (mentions previous accommodations). In the second maintenance probe, Carlos performed 17/17 (100) of the target behaviors correctly. There was low variability between the two probes in the maintenance phase, with the last probe slightly increasing. Carlos maintained his performance of the 17 target behaviors ($M = 16.50$, $SD = 0.70$) two weeks after withdrawal of intervention.

Alejandro. As seen in Figure 8, in the first maintenance probe, Alejandro performed 17/17 (100%) of the target behaviors correctly two weeks following withdrawal of intervention. In the second maintenance probe, Alejandro again performed 17/17 (100) of the target behaviors correctly. There was no variability between the two probes in the maintenance phase. Alejandro maintained his knowledge of the 17 target behaviors ($M = 17.00$, $SD = 0.00$) two weeks after withdrawal of intervention.

India. As seen in Figure 9, in the first maintenance probe, India performed 17/17 (100%) of the target behaviors correctly two weeks following withdrawal of intervention. In the second maintenance probe, India performed 16/17 (94%) of the target behaviors correctly. The target behavior that India missed in the second maintenance probe was Target Behavior 8 (request use of accommodation). There was low variability between the two probes in the maintenance phase, with the last probe slightly decreasing. India maintained her performance of the 17 target behaviors ($M = 16.50$, $SD = 0.70$) two weeks after withdrawal of intervention.

Jay. As seen in Figure 10, in the first maintenance probe, Jay performed 16/17 (94%) of the target behaviors correctly two weeks following withdrawal of intervention. The target behavior that Jay missed in the first maintenance probe was Target Behavior 3 (reference discussion). In the second maintenance probe, Jay again performed 16/17 (94%) of the target behaviors correctly. The target behavior that Jay missed in the second maintenance probe was again Target Behavior 3 (reference discussion). There was no variability between the two probes in the maintenance phase. Jay maintained his performance of the 17 target behaviors ($M = 16.00$, $SD = 0.00$) two weeks after withdrawal of intervention.

Elvis. As seen in Figure 11, in the first maintenance probe, Elvis performed 17/17 (100%) of the target behaviors correctly two weeks following withdrawal of intervention. In the second maintenance probe, Elvis again performed 17/17 (100%) of the target behaviors correctly. There was no variability between the two probes in the maintenance phase. Elvis maintained his performance of the 17 target behaviors ($M = 17.00$, $SD = 0.00$) two weeks after withdrawal of intervention.

Social Validity

Social validity data were collected from teachers (Appendix Q), an administrator (Appendix R), and the participants (Appendix S). During the generalization phase of the study, one week following withdrawal of intervention, two teachers and an administrator (Special Education Coordinator) provided social validity data on the participants' performance during two role-play situations. The evaluators used three statements to rate the performance of the participants' self-advocacy skills using a 5-point Likert scale (1 =

strongly disagree, 2 = *disagree*, 3 = *neutral*, 4 = *agree*, 5 = *strongly agree*). The evaluators rated the participants' approach when requesting the accommodation, how clearly each participant explained his or her accommodation, and whether the evaluators would grant the request based on the participants' approach and explanation of the accommodation request.

Social validity data from the participants were collected one day after the maintenance phase using a two-part social validity survey. In part one of the survey, the participants rated 12 statements about their IEP accommodations and the self-advocacy intervention using a 4-point Likert scale (1 = *strongly disagree*, 2 = *disagree*, 3 = *agree*, 4 = *strongly agree*). When interpreting the results, the *agree* and *strongly agree* responses were combined under the category of *agree*. Similarly, the *disagree* and *strongly disagree* responses were grouped together under the *disagree* category. In part two of the survey, the participants rated the importance of the 17 target behaviors using a 5-point Likert scale (1 = *not important*, 2 = *slightly important*, 3 = *moderately important*, 4 = *important*, 5 = *very important*). When interpreting the results, the *slightly important* and *moderately important* responses were combined under the *moderately important* category. Similarly, the *important* and *very important* responses were grouped together under the *important* category. The participants' responses to the open-ended questions were reported by similar responses.

Social validity results from the teachers. For the first role play, when the teacher responded on the social validity Educator Feedback on Role-Play Form to the statement "Was the student polite when he or she approached to request an

accommodation,” Carlos and India received a strongly agree rating, Jay received an agree rating, and Alejandro and Elvis received neutral ratings. The teacher noted that Alejandro forgot to say his name in the initial approach, and that Elvis forgot to extend his hand for a handshake. For the second role play, when the teacher responded on the social validity Educator Feedback on Role-Play form to the statement if the student was polite when he or she approached to request an accommodation, all five participants received strongly agree ratings from the teacher (Appendix Q).

For the first role play, when the teacher responded on the social validity Educator Feedback on Role-Play form to the statement if the student clearly explained his or her disability and the accommodation needed, India and Jay received strongly agree ratings, Carlos and Alejandro received agree ratings, and Elvis received a neutral rating. The teacher noted that Carlos was hesitant and had difficulty explaining his needs, but that he improved during the role play. The teacher also noted that Elvis got a little confused when explaining his disability and accommodation needs. For the second role play, when the teacher responded on the social validity Educator Feedback on Role-Play Form to the statement if the student clearly explained his or her disability and the accommodation needed, Jay received a strongly agree rating; Carlos, Alejandro, and Elvis received an agree rating; and India received a neutral rating. The teacher noted that Alejandro did a good job explaining how the use of a calculator would be beneficial to him, but that India and Elvis needed to further explain their disability and accommodation needs (Appendix Q).

For the first role play, when the teacher responded on the social validity Educator Feedback on Role-Play Form to the statement whether the teacher would grant the accommodation request based on the student's approach and explanation, India and Jay received strongly agree ratings, Carlos and Alejandro received agree ratings, and Elvis received a neutral rating. The teacher noted that Elvis explained his disability and needs, but not very well. For the second role play, when the teacher responded on the social validity Educator Feedback on Role-Play Form to the statement whether the teacher would grant the accommodation request based on the student's approach and explanation, Jay received a strongly agree rating; Carlos, Alejandro, and Elvis received an agree rating; and India received a neutral rating. The teacher noted that Alejandro performed much better during the second role play. The teacher also noted that Elvis performed better during the second role play, but had difficulty knowing how to correct himself when he made a mistake during the role play (Appendix Q).

Social validity results from the administrator. For the first role play, when the Special Education Coordinator responded on the social validity Educator Feedback on Role-Play Form to the statement if the student was polite when he or she approached to request an accommodation, Alejandro, India, and Jay received strongly agree ratings, and Carlos and Elvis received agree ratings. For the second role play, when the Special Education Coordinator responded on the social validity survey to the statement if the student was polite when he or she approached to request an accommodation, again, Alejandro, India, and Jay received strongly agree ratings, and Carlos and Elvis received agree ratings (Appendix R).

For the first role play, when the Special Education Coordinator responded on the social validity Educator Feedback on Role-Play Form to the statement, “The student clearly explained his or her disability and the accommodation needed,” Alejandro and Jay received strongly agree ratings, India and Elvis received agree ratings, and Carlos received a disagree rating. The special education coordinator noted that Carlos struggled with remembering the target behaviors in the self-advocacy intervention. For the second role play, when the Special Education Coordinator responded on the social validity Educator Feedback on Role-Play Form to the statement, “The student clearly explained his or her disability and the accommodation needed,” Alejandro and Jay again received strongly agree ratings, and Carlos, India, and Elvis received agree ratings. The Special Education Coordinator noted that Carlos improved in the second role play (Appendix R).

For the first role play, when the Special Education Coordinator responded on the social validity Educator Feedback on Role-Play Form to the statement would you grant the accommodation request based on the student’s approach and explanation, Alejandro, India, and Jay received strongly agree ratings, and Carlos and Elvis received agree ratings. For the second role play, when the Special Education Coordinator responded on the social validity Educator Feedback on Role-Play Form to the statement would you grant the accommodation request based on the student’s approach and explanation, again, Alejandro, India, and Jay received strongly agree ratings, and Carlos and Elvis received agree ratings (Appendix R).

Social validity results from the participants. According to the social validity data from participants on Part 1 of the survey, four of the five participants indicated that

they know what is meant by accommodations on their IEP. All five participants indicated that the self-advocacy intervention was the first time that they learned how to request accommodations on their IEP. All participants indicated that learning the self-advocacy intervention increased their awareness of accommodations on their IEP, and that they now have a clearer understanding about why they have accommodations on their IEP. All participants were in agreement that prior to the self-advocacy intervention, they were not talking to their instructors about their accommodations, nor were they using the accommodations. The participants further indicated that prior to learning the self-advocacy intervention, they were not sure about what accommodations were on their IEP. All participants were in agreement that prior to learning the self-advocacy intervention, they did not have a good way to talk with instructors about accommodations in their class.

According to social validity data, all participants agreed that after learning the self-advocacy intervention, they will be more effective talking with instructors about accommodations they need in their class, they can explain their disability and academic needs, they are confident advocating for their academic needs, and they are more comfortable requesting academic accommodations than they were before learning the intervention. Finally, all participants indicated that after learning the self-advocacy intervention, they are more likely to request academic accommodations. Based upon the participants' feedback, the self-advocacy intervention had a positive effect on their ability to advocate for themselves in an academic setting.

According to social validity data from participants on Part 2 of the survey, where they rated the importance of the 17 target behaviors one by one, 100% of the participants were in agreement that Target Behavior 1 (greet instructor) and Target Behavior 3 (reference discussion) were the most important target behaviors. Eighty percent of the participants reported that the following target behaviors were the second most important: Target Behavior 2 (introduce yourself), Target Behavior 4 (identify disability status), Target Behavior 5 (explain disability in functional terms), Target Behavior 8 (request use of accommodation), Target Behavior 11 (ask for agreement of the accommodation request), Target Behavior 13 (restate accommodation), Target Behavior 14 (clarify your role as the student), and Target Behavior 17 (express appreciation of the instructor's time or consideration of the accommodation request). Eighty percent of the participants reported that Target Behavior 10 (state your role as the student) was the third most important target behavior. Sixty percent of the participants reported the fourth most important target behaviors were: Target Behavior 6 (mentions previous accommodations), Target Behavior 7 (explain benefits of past accommodation), and Target Behavior 16 (close with a positive statement suggesting closure of the accommodation request discussion). Sixty percent of the participants reported that the fifth most important Target Behavior was 12 (affirm agreement of the accommodation request). Forty percent of the participants reported that the least important target behaviors were: Target Behavior 9 (identify resources and how they assist) and Target Behavior 15 (clarify instructor's role in facilitating the accommodation request).

According to social validity data from participants on Part 2 of the survey, in which they responded to four open-ended questions about the target behaviors, the responses were varied regarding which of the target behaviors the participants liked best. Alejandro and India both reported that they liked Target Behavior 3 (reference discussion) best. Carlos reported that his favorite target behavior was Target Behavior 2 (introduce yourself). Jay and Elvis both reported two favorite target behaviors. Jay reported Target Behavior 4 (identify disability status) and Target Behavior 5 (explain disability in functional terms) as his favorite target behaviors. Elvis reported Target Behavior 6 (mentions previous accommodation) and Target Behavior 7 (explain benefits of past accommodation) as his favorite target behaviors.

In response to the question regarding which of the target behaviors the participants liked least, the responses were again varied. Alejandro reported Target Behavior 9 (identify resources and how they assist) as his least favorite target behavior. India reported Target Behavior 15 (clarify instructor's role in facilitating the accommodation request) as her least favorite target behavior. Carlos reported Target Behavior 13 (restate accommodation) as his least favorite target behavior. Jay reported Target Behavior 7 (explain benefits of past accommodation) as his least favorite target behavior. Elvis reported that he liked all of the target behaviors.

In response to the question regarding which of the target behaviors the participants would change, the responses were again varied. Alejandro reported that he would change Target Behavior 9 (identify resources and how they assist). Jay and India both reported that they would change Target Behavior 7 (explain benefits of past

accommodation). Carlos reported that he would change Target Behavior 13 (restate accommodation). Elvis reported that he would not change any of the target behaviors.

In response to the question regarding whether they would recommend the self-advocacy intervention to other students, 100% of the participants reported that they would recommend the intervention to other students. Sixty percent of the participants made reference to the intervention being beneficial to those students who attend college. Jay stated, “When students graduate from high school, they will need these tips and advice on doing well in college.” Carlos stated, “It is a good thing to do while you are in college.” Elvis said, “I would recommend this intervention to other students because it helps them get on the right path to succeed in college.” Forty percent of the participants made reference to the intervention being an important life skill. For example, India stated, “I would recommend the intervention to another student if they had trouble showing confidence.” Alejandro stated, “I would recommend this intervention to other students because you should have these self-advocacy skills in life. You will always need them and this intervention really helps you learn them.”

Chapter Summary

The effects of a self-advocacy intervention on the performance of high school students with LD when requesting academic accommodations in a role-play situation were analyzed and presented in this chapter. All participants demonstrated an immediate change in level upon introduction of each subphase of the intervention. PND were calculated at 100% across all participants and all subphases. The consistency of data, including flat trends, low variability, and evident changes in levels in each subphase

across all participants indicated evidence of high effectiveness and a functional relation between the self-advocacy intervention and an increase in the participants' performance while requesting academic accommodations in a role-play situation. Participants were able to generalize the self-advocacy skills with their teachers and Special Education Coordinator one week after withdrawal of intervention. They were also able to maintain the self-advocacy skills two weeks after withdrawal of intervention. Social validity data from teachers and the Special Education Coordinator on the participants' performance during the role plays provided further support of the effectiveness of the self-advocacy intervention. In addition, all participants reported being more confident advocating for their academic needs and more comfortable requesting academic accommodations than they were before learning the self-advocacy intervention. The next chapter provides a discussion of major findings from the study.

Chapter Five: Discussion

This chapter includes discussion of the major findings from the single-subject research study about the effects of a self-advocacy intervention on five high school students with specific learning disabilities (LD) and subsequent implications for both researchers and practitioners that derived from this study. First, the participants' acquisition of the self-advocacy skills are discussed. Next, the major findings in this study are compared to previous research. Limitations and recommendations for future research are also identified in the chapter.

Acquisition of the Self-Advocacy Skills: Mastery of Learning

The findings in the current study are consistent with previous research that used the Self-Advocacy and Conflict Resolution Curriculum (SACR): Strategies for the Classroom Accommodation Request (Rumrill et al., 1999) with college students with LD (Palmer & Roessler, 2000; Roessler et al., 1998; Walker & Test, 2011), demonstrating that high school students with LD can acquire self-advocacy skills to request academic accommodations. Additionally, the current study is the first to use this self-advocacy intervention with high school students with LD.

The researcher's direct instructional approach to the highly structured lessons seemed to contribute to the participants' acquisition of the self-advocacy skills taught. Each lesson included seven components that occurred in sequential order during each of the seven lessons. The researcher modeled the skill several times and engaged the

participants during role play while they requested academic accommodations and practiced the target behaviors. The preestablished criterion for mastery allowed for the participants to learn the target behaviors in gradual steps. However, the preestablished criterion for mastery was not 100% in Subphases II and III. Although the participants showed improvement in learning the self-advocacy intervention, they did not always demonstrate 100% mastery of the 17 steps in the intervention.

In addition, the researcher instructed the participants to use the same accommodation in the role plays in the three subphases while they learned the self-advocacy intervention. The researcher's rationale for the participants using the same role play was so that they could focus on learning at least 15 of the 17 steps in the self-advocacy intervention as opposed to incorporating different accommodations while they learned the 17 steps. According to cognitive load theory (Park, Korbach, & Brünken, 2015; Plass, Moreno, & Brünken, 2010; Sweller, Ayres, & Kalyuga, 2011), the total cognitive capacity is limited and intrinsic cognitive load depends on the element interactivity. The larger the number of elements that must be processed in working memory and the more complex their relation to each other, the higher the intrinsic load (Park et al., 2015; Plass et al., 2010; Sweller et al., 2011). In the current study, the researcher attempted to reduce the cognitive load by teaching the first eight target behaviors in Subphase I, the next four target behaviors in Subphase II, and the last five target behaviors in Subphase III.

Furthermore, the manner in which the hot and cold probes were collected may have also contributed to the participants' retention. Due to the participants' availability

and time constraints, the hot probes were all collected in one day immediately after the instructional sessions one right after the other. The cold probes were also collected in one day at the beginning of next instructional session one right after the other. The collection of the hot and cold probes all at once may have had an effect of the retention level of the participants.

Video self-evaluation and mobile technology may have also contributed to one participant's acquisition of the self-advocacy skills. The researcher noticed during Subphase III that Alejandro was having difficulty remembering Target Behavior 8 (request use of accommodation). Although the researcher was providing verbal feedback to Alejandro, he was still not making the correction nor demonstrating mastery. In one of the role plays in Subphase III, the researcher did not provide verbal feedback to Alejandro but instead the researcher played the video of the role play on the iPad for Alejandro to review and asked him to identify the target behavior that he missed. After reviewing the video on the iPad three or four times, Alejandro was able to observe his performance of the role play, identify the target behavior that he missed, and self-corrected in the next role play.

In another example where video self-evaluation and mobile technology were utilized, Alejandro had a habit of saying the word "this" when he should have said the word "accommodation." Alejandro was unaware of this behavior before the researcher pointed it out to him. Although the researcher provided verbal feedback, Alejandro was not self-correcting. In addition to providing Alejandro verbal feedback regarding his performance and the misuse of the words, the researcher played the video on the iPad of

Alejandro's performance of the role play so that he could see how he was misusing the words. Alejandro was using video self-evaluation to view the video of himself performing the behavior, and then he began to self-correct.

Although the participants in this study demonstrated that they could learn the 17 steps in the self-advocacy intervention, progress from acquisition to fluency was sometimes slow. The time that it took for the participants to demonstrate the target behaviors ranged from 30 to 45 seconds to 3 minutes. Those who took longer to demonstrate the target behaviors were possibly processing. The participants who were slow in processing may have needed more time to shift from acquisition to fluency.

Maintenance and Generalization

High school students with LD maintained their knowledge of the 17 steps of the self-advocacy intervention two weeks after withdrawal of intervention (RQ4) as evidenced by their maintenance data. Data points for all participants ranged from 16 to 17, with 2 participants maintaining their performance to 100% criterion in both maintenance probes, and 2 participants maintaining their performance to 100% criterion in one maintenance probe. All participants demonstrated low variability and high performance during the maintenance probes.

Some students with LD have difficulty recalling information and remembering strategies or steps in a process due to deficits in cognitive load (Park et al., 2015). For the students in this study to maintain their self-advocacy skills two weeks after demonstrating mastery is quite an accomplishment. The participants' performance in maintenance highlights the strength of the self-advocacy instruction. Another strength in this study is

that the participants were able to generalize four different accommodation requests with two different individuals (the teachers and the Special Education Coordinator). Both strengths in this study are attributed to the researcher's direct instructional approach to the highly structured lessons and the researcher's attempt to reduce the intrinsic cognitive load of the participants while they learned the self-advocacy intervention.

Social Validity

Results of how satisfied the participants were with the self-advocacy intervention from the social validity survey may be attributed to their positive attitude toward learning the self-advocacy intervention. The participants' report of increased confidence after the self-advocacy intervention is consistent with previous research (Lee et al., 2008; Wood et al., 2010). The participants also reported at the beginning of the study that they were not asking their instructors for, nor were they using their accommodations. This revelation is particularly concerning because the participants in this study were juniors and seniors in high school who intend to attend college where they will be expected to self-advocate. The most efficient and effective way to ensure students receive their accommodations is to teach them how to ask for them during their academic careers (Downing et al., 2007; Prater et al., 2014; Roberts et al., 2016).

Description of Major Findings Compared to Previous Research

The results of the current research are discussed in this section and compared to results acquired by other researchers. Regarding the duration of the intervention (number of lessons, how many times per week, across how many weeks, and the length of each lesson), the current study included two to three lessons, one session per week per

participant, for five to six consecutive weeks (including baseline). The total intervention time for five participants across three treatment subphases ranged from 167 to 189 min. Other researchers who employed a self-advocacy or self-determination intervention with high school students taught an average of four lessons, two times per week, for 10 weeks, for a total of 412 min (Abery et al., 1995; Allen et al., 2001; Arndt et al., 2006; German et al., 2000; Lancaster et al., 2002; Mazzotti et al., 2010; Van Reusen & Bos, 1994). However, previous research studies involving a self-advocacy or self-determination intervention with junior high students were taught an average of eight lessons, two times per week, for eight weeks, for a total of 765 min (Hammer, 2004; Lee et al., 2010a; Lee et al., 2010b; Test & Neale, 2004). The researcher considered this information to determine the number of lessons as a starting point in the current study. The researcher also factored into account that the self-advocacy and conflict resolution curriculum developed by Rumrill et al. (1999) was modified in the current study and the focus was only on one skill (self-advocacy) and not conflict resolution while previous studies at the high school and junior high school levels included multiple skills (i.e., self-determination, self-efficacy, transition plan knowledge, outcome expectancy).

In the case of the self-advocacy intervention used in this study (Rumrill et al., 1999), if the preestablished criterion for mastery for all three subphases of the intervention had been set at 100%, then more instructional lessons would have been required. Factors such as disability, the number of target behaviors being taught, and grade level also need to be considered when planning a timeline for the self-advocacy

intervention. For example, more time may be needed for some students with LD who have working memory or processing deficits.

The self-advocacy intervention in this study (Rumrill et al., 1999) was not administered on a daily basis, which could have affected the retention level for students with LD, resulting in the slight variability of data in the treatment subphases. The participants in the current study received the self-advocacy intervention once per week. Other researchers such as Lancaster et al. (2002) conducted a self-advocacy intervention for high school students with LD five to six lessons per week for 30 to 45 minutes each for six weeks. Mazzotti et al. (2010) implemented a self-advocacy intervention for high school students with mild to moderate ID four times per week for 15 min each for four weeks. In the current study, the participants' acquisition of the self-advocacy skills taught may have improved if the intervention was administered more frequently and for a longer duration. In addition, the hot probes were all collected in one day immediately after the instructional sessions one right after the other. The cold probes were also collected in one day at the beginning of next instructional session one right after the other. The collection of the hot and cold probes all at once may have had an effect on the retention level of the participants.

Regarding the instructional features of the self-advocacy intervention, all five participants demonstrated an immediate change in level upon introduction of each treatment subphase of the intervention. Some reasons for the immediate change in level may be that the 1:1 instruction allowed more focus, and the participants were motivated to learn the intervention. The study was based on carefully designed instruction and only

focused on self-advocacy, which may have influenced the participants' performance. The 1:1 researcher-to-student ratio allowed more attention to the participants and possibly more focus on the part of the participants. The researcher's direct instructional approach may have also contributed to the participants' acquisition of the self-advocacy skills taught. According to Morgan, Hsiao, Dobbins, Brown, and Lyons (2015), direct instruction has proven to aid students in learning steps in a process. The direct instruction in the current study assisted students in learning the 17 steps in the self-advocacy intervention.

Practical Implications

The findings from this study revealed seven implications for teachers who desire to teach students self-advocacy skills. One implication of these findings is that the Self-Advocacy and Conflict Resolution intervention developed by Rumrill et al. (1999) could be a blueprint for teachers to use with students at different levels of their academic careers. Using the self-advocacy intervention with elementary and middle school students would give them an opportunity to learn about their LD and begin to ask for and use the accommodations noted on their IEP. Further use of the self-advocacy intervention with high school students will support them in becoming self-reliant and their own self-advocate. Students need to be aware of their strengths and needs so that they will be able to come up with their own accommodations. Students need to be self-determined and begin to identify solutions on how to get the necessary resources. In high school, students can develop their self-advocacy skills as they prepare for transition to postsecondary education or employment where they will be expected to self-advocate.

Students with LD may experience more success acquiring self-advocacy skills if they were required to take a course in self-advocacy or if self-advocacy instruction was embedded in the school day curriculum. A second implication is that in the short-term, students learn critical self-advocacy skills that are realistic and meaningful to them. For example, students with LD could learn about their strengths and needs, the accommodations that are available to support them, and be able to practice appropriate ways to acquire them. The long-term gain is that students can continue developing their self-advocacy skills in a natural setting after they have learned them. The development of the self-advocacy skills should extend beyond the students' participation in their annual IEP meeting. Rather, it should include daily opportunities for the students to advocate on their own behalf. Students need to be aware of their academic needs, be able to identify accommodations that work best, and be resourceful to identify the resources they need to be successful. Students who develop strong self-advocacy skills while in high school are preparing for future opportunities for self-advocacy in postsecondary education, leisure, and employment. Ultimately, this is the desired outcome.

During instruction, one observation that helped students learn the self-advocacy intervention is that they had materials to refer to (i.e., the PowerPoint presentation and the student workbook) (Rumrill et al., 1999). The researcher referred to the PowerPoint presentation and examples from the student workbook during instruction. It is typical for teachers to have materials displayed in the classroom that relate to the content that students are learning (Beach, Thein, & Webb, 2015; Bland, 2013; Lewison, Leland, & Harste, 2014). In hindsight, the researcher reflects on if the students had additional

tangible study materials (i.e., a bookmark or flashcards), would these have aided in their retention of the self-advocacy intervention? A third implication is for teachers to develop a bookmark or flash cards with the 17 target behaviors for students to access while they learn the steps in the self-advocacy intervention or during independent study time. A fourth implication is that teachers could pair students together and give them a role-play scenario and have them role play together. One student could play the role of a teacher while the other plays the role of the student requesting accommodations. After the role play, the student who played the role of the teacher could provide feedback to the student requesting the accommodation before the students switch roles.

A fifth implication for teachers is that they could allow the students to develop their own role-play scenarios from real-life experiences where they would need to ask for accommodations. The students could then create videos of themselves requesting the accommodations from the role plays that they created and present the videos in class. Teachers should also allow extra time to reteach target behaviors if the student does not demonstrate mastery criterion. For example, the teacher may include extra sessions to review the target behaviors that the student may be struggling to learn. If the extra time is not allotted during instruction, then there may be a delay in the students' progress from acquisition to fluency. A sixth implication is that the extra time will give the teacher additional opportunity to model the target behavior and students additional opportunity to role play with the teacher and progress from skill acquisition to fluency. It is critical for teachers to build in opportunities for students to practice role playing with people who are unfamiliar to them. A seventh implication is that these opportunities may enhance the

students' comfort level in disclosing their disability and requesting accommodations with people who are unfamiliar to them in the future such as employers or college professors.

Limitations

Several limitations are noted in this study. The three limitations related to procedures are discussed first. They include: (a) the timing in which the probes were collected, (b) the preestablished criterion that was set for mastery in treatment Subphases II and III of the self-advocacy intervention, and (c) the video recording of the intervention. Next, limitations relating to the frequency of the intervention, time of day of the study, and the number of participants are discussed.

First, a major limitation of this study was the timing in which the probes were collected. When the criterion was reached, the researcher immediately collected a minimum of five video-recorded data probes for each participant. According to design standard three (Kratowill et al., 2010), there must be three attempts to demonstrate an effect at three different points in time or with three different phase repetitions. Although it was proposed to collect no more than two probes per day, due to the participants' availability and time constraints, the hot probes were all collected in one day immediately after the instructional sessions one right after the other. The cold probes were all collected in one day at the beginning of next instructional session one right after the other.

A second limitation in the procedures was the preestablished criterion that was set for mastery in treatment Subphases II and III of the self-advocacy intervention. In this study, the changing criterion research design was implemented because of the stepwise

change in the targeted behaviors in each of the three treatment subphases. The criterion was established prior to intervention based on the researcher's experience during the pilot study with a participant with LD who had working memory and processing speed deficits, similar to the five participants in this study. In treatment Subphase I of the current study, the criterion was preestablished at 100% mastery (8 out of 8 correctly demonstrated target behaviors). In treatment Subphase II of the current study, the criterion was preestablished at 92% mastery (11 out of 12 correctly demonstrated targeted behaviors), and in treatment Subphase III of the current study, the criterion was preestablished at 88% mastery (15 out of 17 correctly demonstrated targeted behaviors). The limitation is that the criterion was not set at 100% mastery for each treatment subphase or at least 100% mastery in treatment Subphase III prior to generalization where the participants were expected to demonstrate 100% mastery. Although the participants demonstrated that they were learning the self-advocacy intervention, they did not always demonstrate 100% mastery of the 17 steps in the intervention.

The participants' performance during the treatment subphases was graphed by the number of correctly demonstrated targeted behaviors in each treatment subphase. The researcher did not wait for the participants to reach 100% mastery in treatment Subphases II and III because the participants were showing progression in their overall performance in treatment Subphases II at 92% criterion and in treatment Subphase III at 88% criterion. During the role-play situations, the participants were able to demonstrate the target behaviors after multiple attempts. The limitation in the procedures was setting the mastery criterion at 92% in treatment Subphase I and 88% in treatment Subphase III. If

the participant only demonstrated 92% mastery in treatment Subphase II and 88% mastery in treatment Subphase III, then he or she was not performing all of the target behaviors in each treatment subphase. This is a limitation because the researcher expected the participants to perform at 100% criterion in the generalization and maintenance phases of the study although they were not expected to perform at 100% criterion in treatment Subphase I and II.

A third limitation in the procedures was that each phase of the intervention was video recorded. Although the purpose of video recording the intervention was for interobserver agreement and fidelity of treatment purposes, the video recordings were a limitation in that in real-life situations, the participants would not be recorded when they request accommodations, and therefore the video recordings may have had an impact on the participants' performance. For example, when the participants knew that they were about to be recorded, they would often take a deep breath and appeared to stare into space as if they were focusing really hard in anticipation of being recorded. The fourth limitation was the frequency of the intervention. The intervention in this study occurred once per week. Students with LD may benefit from having the intervention more frequently (e.g., two or three times per week). A fifth limitation relating to the duration of the study was that data were not collected on the amount of time that it took each participant to demonstrate the target behavior in a role-play situation. In the current study, the time that it took for the participants to demonstrate the target behaviors ranged from 30 to 45 seconds to 3 minutes. The participants who needed more time were possibly processing. Some students who were slow in processing may have needed an

instructional technique like a mnemonic or more time to switch from acquisition to fluency. The limitation was that the impact of the participants' working memory and processing speeds deficits on their acquisition of the self-advocacy skills were not anticipated by the researcher and therefore collecting this data was outside of the scope of this study.

A sixth limitation was the time of day that the intervention occurred. The self-advocacy intervention took place once a week in the afternoon at the end of the school day. It is possible that the participants may have been fatigued at the end of the school day, which could have affected their performance during the role plays. Additionally, extracurricular activities were also scheduled after school. All five participants had a scheduling conflict at some point during the intervention. Two participants in particular (Carlos and Alejandro) had scheduling conflicts that required the location of the intervention to be changed from the school setting to a community setting. Although the researcher was able to meet with the participants during the same week that there was a conflict, this is still perceived as a limitation because ideally the intervention and data collection should occur in the same setting for all participants. It is also possible that there may have been other students interested in participating in the study but could not due to scheduling conflicts with other extracurricular activities after school and the time of the day that the intervention occurred.

The last limitation was the low number of participants. There were only five students who met the inclusion criteria in this single-subject study. Of those participants, there was only one female. Therefore, even though the participants showed improvement

in their performance requesting academic accommodations in a role-play situation, generalizability to more students in a larger setting is not possible. Additional research is needed to determine if the same results can be achieved in a larger population including more female participants. Moreover, since all five participants were identified as LD, findings from this study may not have similar results with students in other disability categories. Furthermore, this study took place at a private special education secondary school. Because of the specialized nature of this setting, the findings of this study are unable to be generalized to a larger diverse population.

Recommendations for Future Research

There are nine recommendations for future research. The first recommendation is to investigate the impact of video self-modeling and mobile technology on the participants' acquisition of the self-advocacy skills. Although the video recordings of the intervention sessions were discussed as a limitation, the unintended benefit of the video recordings was the instant play back feature that benefited one participant by assisting him in identifying the target behaviors that he missed, and also assisted in changing his behavior. In this study, the purposes of the video recordings of the intervention were for interobserver agreement and fidelity of treatment purposes. The participants were given verbal feedback from the researcher regarding their performance demonstrating the target behaviors. In addition to the verbal feedback, viewing the video role play instantly after performing the target behaviors may assist the participants in improving their performance. For future study, the video recorder should be placed in an inconspicuous location.

The second recommendation for future research is that researchers should investigate the impact of small group instruction on the participants' ability to learn, maintain, and generalize the self-advocacy skills taught. Future researchers could pair participants together to practice role-play scenarios and have the participants create videos of the role plays and share them in small groups. The third recommendation for future research is to collect data on the length of time it takes for the participants to demonstrate the 17 target behaviors in a role play. In the current study, the time that it took for the participants to demonstrate the target behaviors ranged from 30 to 45 seconds to 3 minutes. The participants who needed more time were possibly processing. Some students who were slow in processing may have needed an instructional technique like a mnemonic or more time to switch from acquisition to fluency. In future research, perhaps the processing times can be impacted by using a mnemonic or other processing strategies when at the acquisition stage to get at fluency.

The fourth recommendation for future research is to teach conflict resolution skills to the participants. The primary focus of this study was the self-advocacy instruction. However, it is possible that a student may encounter an employer or instructor in a postsecondary setting who may say "no" to an accommodation request or question whether or not an individual has a disability or need an accommodation. Conflict resolution skills would be beneficial for anyone to have in their repertoire, especially students with hidden disabilities such as LD.

The fifth recommendation for future research is that the self-advocacy instruction continue until the participants demonstrate 100% mastery because in the current study the

preestablished criterion was not 100% in treatment Subphases II and III. Although the participants demonstrated that they were learning the self-advocacy intervention, they did not always demonstrate 100% mastery of the 17 steps in the intervention. In this study, the changing criterion research design was implemented because of the stepwise change in the targeted behaviors in each of the three treatment subphases. The sixth recommendation for future research is that the practice of allowing the participants to use one accommodation as they learn the steps in the self-advocacy intervention should continue but also experiment with the participants using more than one accommodation as they learn the self-advocacy intervention. The purpose for having the participants use more than one accommodation is to determine if they are able to generalize the self-advocacy skill using different accommodations while they learn the self-advocacy intervention.

The seventh recommendation for future research is that researchers should investigate the impact of the participants' use of different accommodation requests in the generalization phase of the study. In addition, researchers should investigate if the participants are able to generalize the self-advocacy skills with two or more individuals. It is not clear from the social validity survey results whether or not the participants intended to continue use of the self-advocacy intervention at the conclusion of the study. An eighth recommendation for future research is that interviews be held with the participants at the end of the study or a question should be included in the social validity survey about the participants' intended use of the self-advocacy intervention.

Lastly, the participants in this study included four high school seniors and one junior with LD. A suggestion for future research would be to include elementary, junior high, and postsecondary school students as well as students in other disability categories. The most efficient and effective way to ensure students receive their accommodations is to teach them early in their academic careers how to ask for them. Moreover, students are learning critical self-advocacy skills for current and future use. Future research could investigate the students' self-determination skills by allowing them to figure out how to access their own accommodations.

Conclusion

The purpose of this study was to examine the effects of a self-advocacy intervention on the performance of five high school students with LD when requesting academic accommodations in a role-play situation. The participants were able to acquire, generalize, and maintain the self-advocacy skills after the intervention had been taught and participants had demonstrated mastery. In addition, social validity data gathered from the participants indicated that the effects of the self-advocacy intervention were socially important. Specifically, the participants' indicated that the self-advocacy intervention was beneficial and an important life-learned skill. They acknowledged that the self-advocacy intervention increased their confidence and helped them understand what is meant by accommodations on their IEP, and that they now have a clearer understanding as to why they have accommodations.

Although research has shown positive effects on the ability of secondary students with disabilities to be actively involved in planning and leading their transition and IEP

meetings and gaining increased access to the general education curriculum (Doren et al., 2013; Lee et al., 2010a; Lee et al., 2010b; Mazzotti et al., 2010; Powers et al., 2012; Shogren et al., 2012; Wehmeyer et al., 2012; Wehmeyer, Palmer, Lee, et al., 2011; Wehmeyer, Palmer, Williams-Diehm, et al., 2011; Wehmeyer et al., 2010; Wood et al., 2010), these skills could increase exponentially if the interventions went deeper and further. Self-advocacy is a lifelong skill. It is important that students develop their self-advocacy skills because their needs will not change nor will the requirements in the workplace or expectations in postsecondary education setting change because of their disability. Students need to be aware of their academic needs, be able to identify accommodations that work best, and be resourceful to identify the resources they need to be successful. Therefore, students should be self-reliant, self-determined, and become aware of their self-advocate requirements. These skills can be taught and developed while they are in high school.

Appendix A

IRB Approval Letter



Office of Research Integrity and Assurance

Research Hall, 4400 University Drive, MS 6D5, Fairfax, Virginia 22030
Phone: 703-993-5445; Fax: 703-993-9590

DATE: July 23, 2015

TO: Margaret E. King-Sears, PhD
FROM: George Mason University IRB

Project Title: [759732-1] "The Effects of a Self-Advocacy Intervention on High School Students' Ability to Request Academic Accommodations."

SUBMISSION TYPE: New Project

ACTION: APPROVED
APPROVAL DATE: July 23, 2015
EXPIRATION DATE: July 22, 2016
REVIEW TYPE: Expedited Review

REVIEW TYPE: Expedited review category #7

Thank you for your submission of New Project materials for this project. The George Mason University IRB has APPROVED your submission. This submission has received Expedited Review based on applicable federal regulations.

Please remember that all research must be conducted as described in the submitted materials.

Please remember that informed consent is a process beginning with a description of the project and insurance of participant understanding followed by a signed consent form. Informed consent must continue throughout the project via a dialogue between the researcher and research participant. Federal regulations require that each participant receives a copy of the consent document.

Please note that any revision to previously approved materials must be approved by the IRB prior to initiation. Please use the appropriate revision forms for this procedure.

All UNANTICIPATED PROBLEMS involving risks to subjects or others and SERIOUS and UNEXPECTED adverse events must be reported promptly to the Office of Research Integrity & Assurance (ORIA). Please use the appropriate reporting forms for this procedure. All FDA and sponsor reporting requirements should also be followed (if applicable).

All NON-COMPLIANCE issues or COMPLAINTS regarding this project must be reported promptly to the ORIA.

The anniversary date of this study is July 22, 2016. This project requires continuing review by this committee on an annual basis. You may not collect data beyond this date without prior IRB approval. A continuing review form must be completed and submitted to the ORIA at least 30 days prior to the

anniversary date or upon completion of this project. Prior to the anniversary date, the ORIA will send you a reminder regarding continuing review procedures.

Please note that all research records must be retained for a minimum of five years, or as described in your submission, after the completion of the project.

If you have any questions, please contact Karen Motsinger at 703-993-4208 or kmotsing@gmu.edu. Please include your project title and reference number in all correspondence with this committee.

This letter has been electronically signed in accordance with all applicable regulations, and a copy is retained within George Mason University IRB's records.

Appendix B

Review of Self-Advocacy and Self-Determination Interventions

Table B1

Intervention: Whose Future is it Anyway?

Researchers	Participants	Dependent Variable	Independent Variable	Frequency & Duration of Intervention	Instrument	Research Design	Results
Wehmeyer & Lawrence, 1995	53 high school students in various disability categories: LD – 27 ID – 16 OHI – 3 ED – 1 Not provided – 6 Age Range: 15 to 21	Self-determination Locus of Control Self-efficacy and outcome expectancy for educational planning	Whose Future is it Anyway?	Not specified	The ARC’s Self-determination scale. Adult version of the ANS IE Nowicki-Strickland Internal-External scale Self-efficacy and outcome researcher developed questionnaire	Pre-post test design w/no control group	There were significant changes in students’ scores on self-efficacy and outcome expectancy for educational planning.

Researchers	Participants	Dependent Variable	Independent Variable	Frequency & Duration of Intervention	Instrument	Research Design	Results
*Wehmeyer et al., 2010	371 high school students with ID (104) and LD (267) Age Range: 14 to 20 years	Self-determination	The Choicemaker Curriculum The Self-Directed IEP Self-Advocacy Strategy Steps to Self-Determination Whose Future is it Anyway? The Self-Directed Learning Model of Instruction (SDLMI)	Could not be determined	The ARC's self-determination scale (SDS) The AIR self-determination scale Criterion referenced measures	Longitudinal/Randomized trial placebo control group	The results of this study suggest that implementing interventions to promote self-determination results in significant changes in student self-determination; Participants showed significantly more positive patterns of growth in their self-determination scores than did students not exposed to self-determination interventions during the same period of time.

Researchers	Participants	Dependent Variable	Independent Variable	Frequency & Duration of Intervention	Instrument	Research Design	Results
Lee et al., 2010a	168 junior high and middle school students in receiving SPED services in multiple disability categories: Control group: ADD/ADHD – 5 EBD – 6 ID – 1 SD – 9 OHI – 8 AUT – 1 LD – 49 Experimental group: ADD/ADHD – 9 EBD – 12 ID – 22 SD – 6 OHI – 5 AUT – 3 LD – 29 Age: 13.29 to 13.89	Self-determination Self-efficacy Outcome expectancy Transition plan knowledge	Whose Future is Anyway? Curriculum with a computer-based reading support program (Rocket Reader)	10 sessions for 1 week	The ARC's Self-determination scale The AIR Self-determination scale The Whose Future Knowledge Scale The Self-efficacy and outcome expectancy planning scale	A pre-post design with a control group	In general, students benefited from the WFA instruction by showing enhanced self-determination, transition planning knowledge, and self-efficacy and outcome expectations for educational planning, and students who received instruction with the process utilizing the technology-based reading support benefited even more than did their peers who did not receive that support, particularly in self-determination, self-regulation, and transition planning knowledge.

Researchers	Participants	Dependent Variable	Independent Variable	Frequency & Duration of Intervention	Instrument	Research Design	Results
Lee et al., 2010b	168 junior high and middle school students in multiple disability categories: ADD/ADHD – 14 EBD – 18 ID – 15 OHI – 13 AUT – 7 LD – 78 Mean Age: 13.6	Self-determination Transition plan knowledge Self-efficacy	Whose Future is it Anyway?	10 lessons over 10 weeks	ARC's Self-determination scale AIR Self-determination scale-student version WFA knowledge test 20 item questionnaire	Group research design	Findings showed that instructional, knowledge, and dispositional or belief factors predicted students' self-determination over personal predictor variables, such as age, gender, and IQ level. Self-efficacy (SDS) and outcome expectancy (AIR-S) were the best predictors of students' self-determination. Students with higher self-determination scores were more likely to have higher transition planning knowledge test scores.

Researchers	Participants	Dependent Variable	Independent Variable	Frequency & Duration of Intervention	Instrument	Research Design	Results
Wehmeyer, Palmer, Lee, et al., 2011	493 middle and high school students receiving SPED services across multiple disability categories: ADD/ADHD – 31 EBD – 42 ID – 131 OHI – 28 AUT – 27 LD – 151 Other – 105 Age Range: 15.8 to 16.7	Student self-determination Transition knowledge and skills	Whose future is it anyway?	36 sessions	ARC's Self-determination scale AIR Self-determination scale – student version Whose future transition knowledge assessment	Longitudinal a randomized trial, placebo control group design	This study showed that the intervention with the Whose Future is it Anyway? Curriculum for middle and high school students with disabilities had a causal, positive effect on student self-determination and that students who received instruction from the teachers using the intervention showed improved self-determination and transition knowledge and skills across both middle and high school.

Researchers	Participants	Dependent Variable	Independent Variable	Frequency & Duration of Intervention	Instrument	Research Design	Results
*Wehmeyer, Palmer, Williams-Diehm, et al., 2011	194 high school students in multiple disability categories ID – 60 LD – 56 Not specified - 78 Age Range: 14 to 20	Self-determination Transition Knowledge	WebTrek w/audio prompting Decision Manager and AIMS Task Builder Whose Future is it Anyway? The NEXT STEP curriculum The Self-directed IEP The Self-Advocacy Strategy	Could not be determined	The ARC's Self-determination scale The AIR Self-determination scale The Transition Empowerment Scale	A randomized-trial control group design	The results from this study provide support for the relationship between student involvement in transition planning and enhanced self-determination and provide evidence of a causal relationship between efforts to promote such student involvement combined with technology use and enhanced self-determination.

*Studies with multiple independent variables.

Table B2

Intervention: The Self-Directed IEP

Researchers	Participants	Dependent Variable	Independent Variable	Frequency & Duration of Intervention	Instrument	Research Design	Results
Allen et al., 2001	4 high school students with moderate ID Age Range: 15 to 21	Student performance in mock IEP meetings Generalization to the real IEP meeting	Modified Self-directed IEP instruction	2 sessions per week @30 to 40 mins. each for 12 weeks.	Checklist adapted from the Choicemaker curriculum	A multiple baseline design across instructional units	Results indicated a functional relationship between the information taught in the modified Self-Directed IEP instruction and an increase in student participation in the annual IEP meeting.
Arndt et al., 2006	5 high school students with a variety of disabilities (EMD-1, AUT-1, EBD-1, LD-1, OHI-1) Age Range: 14 to 18	The level of student participation in mock IEP meetings	The Self-Directed IEP Instruction and videotapes	6 to 10 sessions @45 mins. each	Checklist for self-determination skills	Multiple baseline design across behaviors	The results of this study indicate a functional relationship between the implementation of the self-directed IEP multi-media package and increases in student participation in mock IEP meetings.

Researchers	Participants	Dependent Variable	Independent Variable	Frequency & Duration of Intervention	Instrument	Research Design	Results
Martin et al., 2006	130 middle and high school students in various disability categories: LD – 92 ID – 11 OHI – 10 EBD – 4 A/S – 4 Ortho – 3 Could not identify – 6 Age Range: 13 to 17 (85%) 12 (3.8%) 18 and older (11.2%)	Student/adult participation in the IEP Self-determination	The Self-directed IEP	Could not be determined	Post IEP meeting survey Choice maker self-determination assessment	Pre/posttest control and intervention design with random assignment	The intervention had a strong effect on increasing the percentage of time students talked, started, and led the IEP meeting.

Researchers	Participants	Dependent Variable	Independent Variable	Frequency & Duration of Intervention	Instrument	Research Design	Results
*Wehmeyer et al., 2010	371 high school students with ID (104) and LD (267) Age Range: 14 to 20 years	Self-determination	The Choicemaker Curriculum The Self-Directed IEP Self-Advocacy Strategy IPLAN Steps to Self-Determination Whose Future is it Anyway? The Self-Directed Learning Model of Instruction (SDLMI)	Could not be determined	The ARC's self-determination scale (SDS) The AIR self-determination scale Criterion referenced measures	Longitudinal/Randomized trial placebo control group	The results of this study suggest that implementing interventions to promote self-determination results in significant changes in student self-determination; Participants showed significantly more positive patterns of growth in their self-determination scores than did students not exposed to self-determination interventions during the same period of time.

Researchers	Participants	Dependent Variable	Independent Variable	Frequency & Duration of Intervention	Instrument	Research Design	Results
*Wehmeyer, Palmer, Williams-Diehm, et al., 2011	194 high school students in multiple disability categories ID – 60 LD – 56 Not specified - 78 Age Range: 14 to 20	Self-determination Transition Empowerment	WebTrek w/audio prompting Decision Manager and AIMS Task Builder Whose Future is it Anyway? The NEXT STEP curriculum The Self-directed IEP The Self-Advocacy Strategy	Could not be determined	The ARC's Self-determination scale The AIR Self-determination scale The Transition Empowerment scale	A randomized-trial control group design	The results from this study provide support for the relationship between student involvement in transition planning and enhanced self-determination and provide evidence of a causal relationship between efforts to promote such student involvement combined with technology use and enhanced self-determination.

*Studies with multiple independent variables.

Table B3

Intervention: The Self-Advocacy Strategy (SAS)

Researchers	Participants	Dependent Variable	Independent Variable	Frequency & Duration of Intervention	Instrument	Research Design	Results
Test & Neale, 2004	4 8 th grade students with high incidence disabilities (1-MMD, LD-2, 1-EBD) Age Range: 12 to 13	The quality of student contributions Self-determination	The Self-Advocacy Strategy	10 sessions ranging from 20 to 45 mins. each for two weeks.	The ARC's Self-Determination Scale	Single-Subject multiple probe design	The participants made gains in their response scores following the introduction of the Self-Advocacy Strategy. All participants made gains from pretest to posttest with the ARC's self-determination scale. The results from this study demonstrated a functional relationship between the Self-Advocacy Strategy and the quality of student's contributions.

Researchers	Participants	Dependent Variable	Independent Variable	Frequency & Duration of Intervention	Instrument	Research Design	Results
Hammer, 2004	3 middle school students with LD (2) and Tourette Syndrome(1) Age Range: 12 to 13	Positive relevant response, negative relevant response, irrelevant response.	The Self-Advocacy Strategy	7 sessions for 45 mins. each	The Self Advocacy Strategy (CD-Rom – hypermedia program)	Multiple baseline across subject design	<p>After intervention, the total number of relevant responses and the number positive relevant responses immediately increased above baseline, while the number of irrelevant and negative relevant responses remained low.</p> <p>Overall, the self-advocacy strategy appeared effective supporting the findings of previous studies; The participants were more involved in writing goals and participating in their IEP conferences; Participants were able to verbalize their strengths and areas for improvement.</p>

Researchers	Participants	Dependent Variable	Independent Variable	Frequency & Duration of Intervention	Instrument	Research Design	Results
*Wehmeyer et al., 2010	371 high school students with ID (104) and LD (267) Age Range: 14 to 20 years	Self-determination	The Choicemaker Curriculum The Self-Directed IEP The Self-Advocacy Strategy Steps to Self-Determination	Could not be determined	The ARC's self-determination scale (SDS) The AIR self-determination scale Criterion referenced measures	Longitudinal/Randomized trial placebo control group	The results of this study suggest that implementing interventions to promote self-determination results in significant changes in student self-determination; Participants showed significantly

Researchers	Participants	Dependent Variable	Independent Variable	Frequency & Duration of Intervention	Instrument	Research Design	Results
*Wehmeyer, Palmer, Williams-Diehm, et al., 2011	194 high school students in multiple disability categories ID – 60 LD – 56 Not specified - 78 Age Range: 14 to 20	Self-determination Transition Empowerment	WebTrek w/audio prompting Decision Manager and AIMS Task Builder Whose Future is it Anyway? The NEXT STEP curriculum The Self-directed IEP The Self-Advocacy Strategy	Could not be determined	The ARC's Self-determination scale The AIR Self-determination scale The Transition Empowerment Scale	A randomized-trial control group design	The results from this study provide support for the relationship between student involvement in transition planning and enhanced self-determination and provide evidence of a causal relationship between efforts to promote such student involvement combined with technology use and enhanced self-determination.

*Studies with multiple independent variables.

Table B4

Intervention: The Self-Determined Learning Model of Instruction (SDLMI)

Researchers	Participants	Dependent Variable	Independent Variable	Frequency & Duration of Intervention	Instrument	Research Design	Results
Lee et al., 2008	42 high school students in various disability categories: Control group: ADD/ADHD-2 ED/BD – 1 OHI – 1 LD – 18 Experimental group: ADD/ADHD-2 ED/BD – 2 OHI – 1 LD – 14 AUT - 1 Mean Age: 16.41	Student self-determination Access to general education curriculum Attainment of educational goals	The Self-Determined Learning Model of Instruction (SDLMI)	The mean duration of the intervention – 9.1 weeks.	The ARC’s self-determination scale (SDS) The AIR self-determination scale Access CISSAR Goal Attainment Scale (GAS)	Pretest-posttest randomized trial control group design	The findings from this study provide limited but promising evidence of the relationship between and impact of self-determination on access to the general education curriculum. Student self-determination and self-regulation positively predicted student engagement and negatively correlated with competing behaviors. The study confirmed that students with disabilities can achieve educational goals linked to the general education curriculum through instruction to promote self-determination and student –directed learning.

Researchers	Participants	Dependent Variable	Independent Variable	Frequency & Duration of Intervention	Instrument	Research Design	Results
*Wehmeyer et al., 2010	371 high school students with ID (104) and LD (267) Age Range: 14 to 20 years	Self-determination	The Choicemaker Curriculum The Self-Directed IEP Self-Advocacy Strategy IPLAN Steps to Self-Determination Whose Future is it Anyway? The Self-determined Learning Model of Instruction (SDLMI)	Could not be determined	The ARC's self-determination scale (SDS) The AIR self-determination scale Criterion referenced measures	Longitudinal/Randomized trial placebo control group	The results of this study suggest that implementing interventions to promote self-determination results in significant changes in student self-determination; Participants showed significantly
Shogren et al., 2012	312 high school students with ID – 94 (30%) and LD - 218 (70%) Age Range: 16.3 to 16.6	Goal attainment Access to the general education curriculum	Self-Determined Learning Model of Instruction (SDLMI)	2 year study	Goal Attainment Scaling (GAS) Access CISSAR	Waitlist - Cluster or group-randomized trial control	The results of this study suggest that implementing the SDLMI led to significant changes in the goal attainment and access to the general education curriculum of students with ID and LD

Researchers	Participants	Dependent Variable	Independent Variable	Frequency & Duration of Intervention	Instrument	Research Design	Results
Wehmeyer et al., 2012	312 high school students with cognitive disabilities (ID – 94, LD – 218) Age Range : 13.5 to 21.3	Self-determination	Self-Determined Learning Model of Instruction (SDLMI)	2-year study	The ARC's Self-determination scale (SDS) The AIR Self-determination scale (AIR)	Waitlist control group - A group-randomized , modified equivalent control group time series design	The intervention group showed significant improvements on both the AIR and the SDS.

*Studies with multiple independent variables.

Table B5

Intervention: Take Charge for the Future

Researchers	Participants	Dependent Variable	Independent Variable	Frequency & Duration of Intervention	Instrument	Research Design	Results
Powers et al., 2001	43 high school students in various disability categories: LD – 18 Orth – 4 ED – 2 Pri/health – 1 OHI – 18 Age Range: 14 to 17	The overall level of youth involvement in transition planning Student /Parent transition awareness Overall youth empowerment Student participation in transition planning meetings	Take Charge for the Future	31.3 average sessions over 4 months Two-hour workshops monthly	Educational Planning Assessment (EPA) The Transition Awareness Survey The Family Empowerment Scale An observational coding system	An independent Wait list control group	The findings generally support the efficacy of the Take Charge For the Future model for promoting youth involvement in transition planning.

Researchers	Participants	Dependent Variable	Independent Variable	Frequency & Duration of Intervention	Instrument	Research Design	Results
Powers et al., 2012	69 high school students (16.5 to 17.5) in foster care and received SPED services (various disability categories not specified)	Self-determination Average number of accomplishment identified Average number of goals identified Quality of Life Questionnaire Transition Planning Assessment Average number of transition services used Average number of independent living activities	Take Charge for the Future	50.36 hours of instruction over 12 months	The ARC Self-determination scale The Quality of Life Questionnaire The Transition Planning Assessment The Outcome Survey	Longitudinal randomized trial	The results of this study revealed moderate to large effect sizes at postintervention and one year follow-up for the differences between groups in self-determination, quality of life, and utilization of community transition services. Youth in the intervention group also completed high school, were employed, and carried out independent living activities at notably higher rates than the comparison group.

*Studies with multiple independent variables.

Table B6

Other Interventions

Researchers	Participants	Dependent Variable	Independent Variable	Frequency & Duration of Intervention	Instrument	Research Design	Results
Durlak et al., 1994	8 high school students with LD Age Range: 15 to 17	Self-Awareness Scale Self-Advocacy Scale Assertiveness Scale for Adolescents (self-report) Piers-Harris Scale (self-report)	Instruction adapted from the direct instruction literature and the learning strategy literature	Twice per week for 30 minutes.	Self-Awareness Scale Self-Advocacy Scale Assertiveness Scale for Adolescents (self-report) Piers-Harris Scale (self-report)	A multiple-base line design across behaviors	The results of this study suggest that students with LD can acquire, maintain, and generalize skills that focus on the self-determination skills of self-advocacy and self-awareness.

Researchers	Participants	Dependent Variable	Independent Variable	Frequency & Duration of Intervention	Instrument	Research Design	Results
Van Reusen & Bos, 1994	21 high school students with LD Age Range: 16.3 to 16.6	Quantity of student goals Quantity and quality of student verbal contributions Evaluations of student performance during the IEP Conference length in minutes	The IEP participation strategy	Three 50-min sessions for three consecutive days.	Inventory Sheets (goals) Student participation evaluations	Control Group	The overall results of the study indicate that when high school students with LD were taught an IEP participation strategy, they systematically provided more goals and information during their conferences than did students who did not learn the strategy.
Abery et al., 1995	18 high school students (ages 14-20) with ID	Self-determination	The competency building curriculum	24 weekly sessions @90 minutes each for 7 months.	The Self-determination skills evaluation scale (SDSES) The Opportunity and Exercise of self-determination scale (OESDS)	No control group – pre/post research design	The results of this study provide preliminary support for the efficacy of providing instruction to students with mild cognitive disabilities in an effort to enhance the extent to which they are able to function as self-determined individuals and exercise control over their lives. Overall, the participants demonstrated enhanced choice-making, problem solving, self-regulation, and self-advocacy.

Researchers	Participants	Dependent Variable	Independent Variable	Frequency & Duration of Intervention	Instrument	Research Design	Results
Cross et al., 1999	10 high school students with ID Age Range: 15 to 20	Self-determination Knowledge of transition planning Personal preferences for postschool goals	The McGill Action Planning System (MAPS) ChoiceMaker Curriculum (choosing employment goals strand)	MAPS – 18 class sessions total of 830 minutes. Choicemaker – 16 class sessions total of 770 minutes.	The ARC's Self-determination scale: Adolescent Version ChoiceMaker Self-determination Assessment	A single-subject multiple-baseline design across goal areas	The results of this study indicated no differences between groups of students who participated in ChoiceMaker instruction and MAPS instruction in terms of scores on the ARC's self-determination, the ChoiceMaker self-determination assessment, oral responses to interview questions regarding transition goals, and expressing preferences at IEP meetings. Both interventions resulted in significant changes in the pre-post test scores on the student self-rating on the ARC and Choicemaker self-determination assessment.
German et al., 2000	Six high school students with mild to moderate ID Age Range: 16 to 18	The number of daily goals attained.	Take Action Intervention	Four sessions @90 mins. – intervention (study lasted for 12 weeks)	Take Action plan goal sheets	Multiple baseline design	The results suggest that the Take Action instructional program improved participants' daily goal attainment.

Researchers	Participants	Dependent Variable	Independent Variable	Frequency & Duration of Intervention	Instrument	Research Design	Results
Zhang, 2001	71 9 th grade students with LD Age Range: 14 to 19	Self-determination	Self-determination instruction	19 sessions @50 mins. each	The ARC's Self-Determination Scales (Adolescent Version) Researcher developed demographic information sheet	Untreated control group design with pretest and posttest.	Indicated that the treatment group gained significantly more on measures of self-determination skills than the control group.

Researchers	Participants	Dependent Variable	Independent Variable	Frequency & Duration of Intervention	Instrument	Research Design	Results
Eisenman & Tascione, 2002	22 high school students with LD Age Range: 17 to 19	Self-realization Self-determination	English curriculum w/intervention to promote self-realization, a fundamental component of self-determination	2 to 3 weeks for each composition; 90 minutes per class session.	Student interviews Student responses to writing prompts Teacher Journal Portfolio writing samples	Qualitative	Silence and misconceptions were prevalent in student experiences. Through the intervention, students acquired information that helped them make sense of their school experiences, redefined themselves in positive ways, and take small steps toward greater self-advocacy within their current school setting. The mediating influence of positive adult voices and concerns about social stigma were evident in students' responses. This study suggests that adult voices at school and home are rarely a part of students' limited conversations about disability and special education.

Researchers	Participants	Dependent Variable	Independent Variable	Frequency & Duration of Intervention	Instrument	Research Design	Results
Lancaster et al., 2002	22 high school students (grades 10-12) with high incidence disabilities (LD-14, BD-5, OHI-4) Age Range: 16.7 to 17.1	Self-advocacy	Interactive Hypermedia Program (IHP)	5 to 6 sessions @ 30 to 45 min. each.	Oral test SHARE Checklist PLAN Checklist	Multiple-probe across student A posttest only comparison group design A pretest/posttest comparison group design (mixed)	This study demonstrated that an interactive hypermedia program combined with a relatively small amount of teacher interaction (lasting approximately one hour) per student is as effective in teaching a complex self-advocacy strategy to students with disabilities as live instruction involving approximately three hours of teacher time per student.
Mazzotti et al., 2010	4 high school students with mild to moderate ID Age Range: 16 to 19	Knowledge of post school options in three areas (employment, education, independent living). A measure of setting/situation generalization	Computer-assisted instruction (CAI)	4 sessions @ 15 mins. 4 times per week	A laptop computer Microsoft PowerPoint	A multiple baseline across behaviors	The results showed a functional relationship between the independent variable and dependent variable indicating that CAI is an effective strategy for teaching students about their options for postschool life.

Researchers	Participants	Dependent Variable	Independent Variable	Frequency & Duration of Intervention	Instrument	Research Design	Results
Wood et al., 2010	4 high school seniors with mild disabilities (ADD-1, LD-2, & BD-1) Age Range: 17 to 20	Student knowledge of accommodations Student knowledge of their rights and responsibilities	Audio supported text Explicit instruction	8 to 10 mins. per session.	Audio supported text Explicit instruction	A simultaneous treatment design	The results indicated a functional relationship with explicit instruction producing higher scores compared to students' scores during the audio-supported condition for all students.
Woods et al., 2010	7 th – 12 th (35) grade students ages 14-20 in multiple disability categories with most students in the LD category. Other disability categories: EBD, ID, multiple disabilities, OHI, vision, TBI. HI was a secondary disability. Age Range: 14 to 20	Transition knowledge Self-efficacy	The Student-Directed Transition Planning instruction	6 to 22 hours of instruction for 2 to 3 weeks.	Two Researcher developed transition knowledge test Student self-efficacy scale	Control group/A pre-post experimental group design	Study results indicated that students receiving instruction in Student-Directed Transition Planning experienced a statistically significant increase in perceived self-efficacy of the transition planning process compared to the control group

Researchers	Participants	Dependent Variable	Independent Variable	Frequency & Duration of Intervention	Instrument	Research Design	Results
Cuenca-Sanchez et al., 2012	21 7 th grade students with EBD Average age: 13.1	Essay score Knowledge of parts of a persuasive essay Writing self-efficacy measure Self-determination measure	Self-regulated strategy development (SRSD) model with the mnemonic POW+TREE	30 minutes of instruction four times per week over 33 days, yielding a total of 16.5 hours of intervention	SPSS Researcher developed seven-item questionnaire to measure student self-efficacy Researcher developed criterion reference self-determination measure	A pre-post design with a control group	The results from this study reveal important improvements across all experimental students with EBD outperformed comparison group students' performance in their ability to write persuasive essays with respect to number of words, overall quality, number of sentences and paragraphs, transition words, and essay parts on post instruction.

Researchers	Participants	Dependent Variable	Independent Variable	Frequency & Duration of Intervention	Instrument	Research Design	Results
Doren et al., 2013	111 high school girls in multiple disability categories who receive SPED services or at risk for school failure LD – 63 AUT – 7 ID – 5 OHI – 2 Ortho – 1 Multiple - 4 Mean Age: 16.1	Vocational skills self-efficacy Vocational outcome expectations Social support and relevance of school Social efficacy Self-realization and autonomy Disability and gender-related knowledge Self-Advocacy	The PATHS curriculum intervention	50 min sessions over 18 weeks	Vocational Skills Self-Efficacy Scale Outcome Expectations Scale Student Engagement Inventory (SEI) College Self-Efficacy Inventory (CSEI) ARC Self-determination scale Researcher developed scale for Disability and gender related knowledge College Students with Disabilities Campus Climate (CSDCC) survey	A pre-post control group design	The results from this study suggest that participation in the curriculum resulted in significant and large gains in autonomy and in disability and gender-related knowledge. Meaningful gains were noted in perceptions of social support and relevance of school. Participants also made significant and large gains in vocational skills and self-efficacy and disability and gender – related knowledge. Meaningful improvements were noted in self-advocacy, autonomy, and vocational outcome expectations. The findings suggest that the curriculum can improve important indicators of positive career development and adjustment in high risk adolescent girls.

*Studies with multiple independent variables.

Appendix C

Target School Letter of Support

May 4, 2015

Dear Dr. Peggy King-Sears:

██████████ has agreed to participate in Doctoral Candidate, Mr. Dwannal W. McGahee's, study on "*The Effects of a Self-Advocacy Intervention on High School Students' Ability to Request Academic Accommodations*".

We look forward to supporting this research. If you require anything further, please do not hesitate to contact me at ██████████

Best Regards,

Katherine ██████████
Head of School
██████████

Appendix D

Recruitment Flyer

Seeking High School Sophomores, Juniors, or Seniors With A Learning Disability To Participate in a Research Study

This project is being conducted for a doctoral dissertation at George Mason University. The purpose of this project is to examine the effects of a self-advocacy intervention on students with learning disabilities. We are interested in providing students with the self-advocacy skills that will make them feel confident talking with their instructors about their academic accommodations.

Participation includes an interview and approximately 7-14 instructional sessions that will last approximately 60 to 90 minutes that will occur after school. In addition, participants will be asked to role-play requesting an accommodation with a teacher or administrator. At the end of the study, participants will be asked to complete a short survey. Participants who complete all sessions will receive a \$50 iTunes gift card. Participants who miss one or more scheduled sessions but complete the study will receive a \$25 iTunes gift card. Participants, who do not complete the study, will not be entitled to the iTunes gift card incentive.

To be eligible to participate you must:

- High School Student (sophomore, junior, or senior)
- Must have a learning disability
- Must have a minimum C grade point average
- Must be receiving special education support services
- Have had difficulties in the past requesting academic accommodations or have never requested academic accommodations

If interested, please contact:
Dwannal McGahee
xxxx@xxxx.xxx or xxx-xxx-xxxx

Your identity will remain confidential throughout the entire study

Appendix E

Recruitment Package

Cover Letter/Email

This project is being conducted for a doctoral dissertation at George Mason University. The purpose of this project is to examine the effects of a self-advocacy intervention on high school students' ability to request academic accommodations. This project will help researchers and educators understand the effects of using this approach with students with learning disabilities and hopefully assist your child in improving his/her self-advocacy skills.

Who is Eligible?

- High School Students (e.g., sophomore, junior, or senior)
- Must have a learning disability
- Must have at least a 2.0 grade point average on a 4.0 grading scale
- Must be receiving special education support services for a learning disability
- Has had problems in the past requesting academic accommodations from an instructor or has never requested accommodations from an instructor
- Students identified by the special education staff
- Must have accommodations on a current IEP
- Must have the intent on going to college.

What is involved?

- An interview with the researcher
- Instruction on self-advocacy (seven lessons) and role-play activities (20 to 30)
- Practice role-plays with teachers
- Post-study interview and survey

To participate or for more information, please contact Dwannal McGahee at xxx-xxx-xxxx or xxxx@xxxx.xxx.

PARENT INFORMED CONSENT FORM

The Effects of a Self-Advocacy Intervention on High School Students' Ability to Request Academic Accommodations

RESEARCH PROCEDURES

This research project is being conducted to determine the effects of a self-advocacy intervention on high school students with learning disabilities ability to request academic accommodations. The entire research project will last approximately a month and a half and consist of a pre-intervention interview and approximately 7-14 instructional sessions lasting from 60 to 90 minutes. Each session will be individually taught to your child and will occur after school. Additionally, your child will be asked to practice requesting academic accommodations in role-play scenarios (20 to 30 times with the researcher). It is anticipated that your child will complete 5-10 consecutive role-plays per sub-phase before reaching the established criteria to move on to the next phase. They will also be asked to role-play requesting academic accommodations with the special education coordinator and one of their current teachers and complete an interview and survey about their perception of the intervention.

We would also like to review your son or daughter's school record to acquire descriptive information about his or her characteristics (e.g., age, gender, ethnicity, grade, grade point average, socioeconomic status, achievement data, disability label, percentage of special education services, and accommodations that they receive).

RISKS

There is no foreseeable physical, emotional, or mental risk to your son or daughter for participating in this research study.

BENEFITS

The possible benefit to your son or daughter may be increased confidence in their ability to request academic accommodations.

CONFIDENTIALITY

Any information about your child's participation, including your child's identity is completely confidential. In order to ensure this confidentiality, a pseudonym will be used in place of your child's name on all data collected and in the final report of this study. The pseudonym used will only be linked to your son or daughter's identity and only the research project team members will have access to this information. All data will be kept in a locked cabinet in a locked room.

PARTICIPATION

Your son or daughter's participation is voluntary, and he or she may withdraw from the study at any time and for any reason. If your son or daughter decides not

to participate or if your son or daughter withdraws from the study, there is no penalty or loss of benefits to which your child is otherwise entitled. There are no costs to you or your son or daughter to participate. Participants who complete all sessions will receive a \$50 iTunes gift card. Participants who miss one or more scheduled sessions but complete the study will receive a \$25 iTunes gift card. Participants, who do not complete the study, will not be entitled to the iTunes gift card incentive.

VIDEO RECORDING

Your son or daughter will be video recorded during each role-play scenario. The purpose of the video recordings is to determine if the self-advocacy intervention was administered appropriately. The video recordings will only be accessible to the researcher and research assistants. The video recordings will be kept in a locked cabinet in a locked room and destroyed after five years.

CONTACT

This research is being conducted by Dwannal W. McGahee, a doctoral candidate at George Mason University and a Special Education Teacher at Falls Church High School, and Dr. Margaret King-Sears from the College of Education and Human Development at George Mason University. They may be reached at xxx-xxx-xxxx or xxxx@xxxx.xxx (Mr. McGahee), (703) 993-3916 or mkingsea@gmu.edu (Dr. King-Sears); for questions or to report a research-related problem. You may contact the George Mason University Office of Research Integrity & Assurance at (703) 993-4121 if you have any questions or comments regarding your child’s rights as a participant in the research.

This research has been reviewed according to George Mason University procedures governing your child’s participation in this research.

CONSENT

I have read this form, all of my questions have been answered by the research staff, and I agree that my son or daughter may participate in this study.

_____ I agree that my son or daughter may be video recorded.

_____ I do not agree that my son or daughter may be video recorded.

Parent's Signature

Print Child's Name

Parent's Printed Name

Date of Signature

Version date: June 25, 2015

STUDENT INFORMED ASSENT

The Effects of a Self-Advocacy Intervention on High School Students' Ability to Request Academic Accommodations

RESEARCH PROCEDURES

This research project is being conducted to determine the effects of a self-advocacy intervention on high school students with learning disabilities ability to request academic accommodations. The entire research project will last approximately a month and a half and consist of a pre-intervention interview and approximately 7-14 instructional sessions lasting from 60 to 90 minutes. Each session will be individually taught to you. Additionally, you will be asked to practice requesting academic accommodations in role-play scenarios (20 to 30 times with the researcher). It is anticipated that you will complete 5-10 consecutive role-plays per sub-phase before reaching the established criteria to move on to the next phase. You will also be asked to role-play requesting academic accommodations with the special education coordinator and one of your current teachers. Finally, you will be asked to complete an interview and survey about your perception of the intervention.

RISKS

There is no foreseeable physical, emotional, or mental risk to you for participating in this research study.

BENEFITS

The possible benefit to you may be increased confidence in your ability to request academic accommodations.

CONFIDENTIALITY

Any information about your participation, including your identity is completely confidential. In order to ensure this confidentiality, a pseudonym will be used in place of your name on all data collected and in the final report of this study. The pseudonym used will only be linked to your identity and only the researcher will have access to this information. All data will be kept in a locked cabinet in a locked room.

PARTICIPATION

Your participation is voluntary. If you choose not to participate or want to stop after we have started, we will not be upset with you. Participants who complete all sessions will receive a \$50 iTunes gift card. Participants who miss one or more scheduled sessions but complete the study will receive a \$25 iTunes gift card. Participants, who do not complete the study, will not be entitled to the iTunes gift card incentive.

VIDEO RECORDING

You will be video recorded during each role-play scenario and focus group discussion. The purpose of the video recordings is to determine if the self-advocacy intervention was administered appropriately. The video recordings will only be accessible to the researcher and research assistants. The video recordings will be kept in a locked cabinet in a locked room and destroyed after five years.

CONTACT

Our names are Mr. McGahee and Dr. King-Sears. Dr. King-Sears is a professor at George Mason University and may be reached at (703) 993-3916 or at mkingsea@gmu.edu. Mr. McGahee is a special education teacher at Falls Church High School and may be reached at xxx-xxx-xxxx or xxxx@xxxx.xxx. You can call us for questions or to report a research-related problem. George Mason University Office of Research Integrity & Assurance knows about this study and gave their approval. If you have any questions please call (703) 993-4121.

CONSENT: I have read this form and agree to participate in this study.

_____ I agree to be video recorded.

_____ I do not agree to be video recorded.

Student's Signature: _____

Date of Signature: _____

Version date: June 25, 2015

STUDENT INFORMED ASSENT (18 years of age or older)

The Effects of a Self-Advocacy Intervention on High School Students' Ability to Request Academic Accommodations

RESEARCH PROCEDURES

This research project is being conducted to determine the effects of a self-advocacy intervention on high school students with learning disabilities ability to request academic accommodations. The entire research project will last approximately a month and a half and consist of a pre-intervention interview and approximately 7-14 instructional sessions lasting from 60 to 90 minutes. Each session will be individually taught to you. Additionally, you will be asked to practice requesting academic accommodations in role-play scenarios (20 to 30 times with the researcher). It is anticipated that you will complete 5-10 consecutive role-plays per sub-phase before reaching the established criteria to move on to the next phase. You will also be asked to role-play requesting academic accommodations with the special education coordinator and one of your current teachers. Finally, you will be asked to complete an interview and survey about your perception of the intervention.

RISKS

There is no foreseeable physical, emotional, or mental risk to you for participating in this research study.

BENEFITS

The possible benefit to you may be increased confidence in your ability to request academic accommodations.

CONFIDENTIALITY

Any information about your participation, including your identity is completely confidential. In order to ensure this confidentiality, a pseudonym will be used in place of your name on all data collected and in the final report of this study. The pseudonym used will only be linked to your identity and only the researcher will have access to this information. All data will be kept in a locked cabinet in a locked room.

PARTICIPATION

Your participation is voluntary. If you choose not to participate or want to stop after we have started, we will not be upset with you. Participants who complete all sessions will receive a \$50 iTunes gift card. Participants who miss one or more scheduled sessions but complete the study will receive a \$25 iTunes gift card. Participants, who do not complete the study, will not be entitled to the iTunes gift card incentive.

VIDEO RECORDING

You will be video recorded during each role-play scenario and focus group discussion. The purpose of the video recordings is to determine if the self-advocacy intervention was administered appropriately. The video recordings will only be accessible to the researcher and research assistants. The video recordings will be kept in a locked cabinet in a locked room and destroyed after five years.

CONTACT

Our names are Mr. McGahee and Dr. King-Sears. Dr. King-Sears is a professor at George Mason University and may be reached at (703) 993-3916 or at mkingsea@gmu.edu. Mr. McGahee is a special education teacher at Falls Church High School and may be reached at xxx-xxx-xxxx or xxxx@xxxx.xxx. You can call us for questions or to report a research-related problem. George Mason University Office of Research Integrity & Assurance knows about this study and gave their approval. If you have any questions please call (703) 993-4121.

CONSENT: I am at least 18 years of age. I have read this form and agree to participate in this study.

_____ I agree to be video recorded.

_____ I do not agree to be video recorded.

Student's Signature: _____

Date of Signature: _____

Version date: June 25, 2015

Appendix F

Educator Informed Consent Form

The Effects of a Self-Advocacy Intervention on High School Students' Ability to Request Academic Accommodations

Research Procedures

This research project is being conducted to determine the effects of a self-advocacy intervention on high school students with learning disabilities ability to request academic accommodations. The entire research project will last approximately a month and a half. You may be selected to participate in this study if you are the Special Education Coordinator or if you teach a student who has been chosen to participate in this study, whose parents have signed the informed consent, and the participants have signed the informed assent. The participants chosen for this study will arrange a time to meet with you to role-play requesting an academic accommodation (15 minutes). These role-plays will be video recorded. You will be asked to complete a feedback form evaluating the participants' request for the accommodation. After the role-play is complete, I will meet with you briefly to review and collect the feedback forms (10 minutes).

Risks

There is no foreseeable physical, emotional, or mental risk to you or the students participating in this research study.

BENEFITS

There are no direct benefits to you as a participant in this study.

Confidentiality

Any information about your participation, including your identity, will be completely confidential. In order to ensure this confidentiality, I will use a pseudonym in the place of your name in the final report of this study. All data will be kept in a locked cabinet in a locked room.

Participation

You are a volunteer. The decision to participate in this study is completely up to you. If you decide to be in the study, you may stop at any time. You will not be treated any differently if you decide not to participate in the study or if you stop once you have started.

Video Recording

You will be video recorded during each role-play scenario. The purpose of the video recordings is to determine if the self-advocacy intervention was administered appropriately. The video recordings will only be accessible to the researcher and research assistants. The video recordings will be kept in a locked cabinet in a locked room and destroyed after five years.

Contact

This research is being conducted by Dwannal W. McGahee, a doctoral candidate at George Mason University and a Special Education Teacher at Falls Church High School, and Dr. Margaret King-Sears from the College of Education and Human Development at George Mason University. They may be reached at xxx-xxx-xxxx or xxxx@xxxx.xxx (Mr. McGahee), (703) 993-3916 or mkingsea@gmu.edu (Dr. King-Sears); for questions or to report a research-related problem. You may contact the George Mason University Office of Research Integrity & Assurance at (703) 993-4121 if you have any questions or comments regarding the rights as a participant in the research.

This research has been reviewed according to George Mason University procedures governing your participation in this research.

CONSENT

I have read the information in this consent form. I have had the chance to ask questions about this study, and those questions have been answered to my satisfaction. I am at least 18 years of age, and I agree to participate in this research project. I understand that I will receive a copy of this form once it is signed by me.

_____ I agree to be video recorded.

_____ I do not agree to be video recorded.

Educator's Signature

Educator's Printed Name

Date of Signature

Version date: June 25, 2015

Appendix G

Fidelity of Treatment Checklist

Instructions: Put a '+' on the space if you observed the step in the instruction process and a '-' for a step that was not followed during the instruction. The fidelity of treatment is calculated by dividing the number of steps completed by the number of steps planned.

_____ The researcher advance organized the lesson (e. g., the researcher activated prior knowledge by stating the objective of the lesson).

_____ The researcher stated the skill description (e. g., the researcher verbally described the skill).

_____ The researcher stated the goal of the skill (e. g., the researcher verbally said the goal of the skill).

_____ The researcher provided skill examples (e. g., the researcher verbally provided examples of the skill).

_____ The researcher modeled the skill (e. g., the researcher verbally modeled the skill).

_____ The researcher asked the participant to practice the skill (e. g., the researcher requested the participant to practice the skill).

_____ If the student did not master the skill, the researcher provided feedback, modeled the skill, or re-taught the skill, and then asked the student to practice the skill again (e. g., if the participant did not demonstrate

mastery, the skill he/she was asked by the researcher to practice the skill again).

_____ The researcher and the participant role-played the skill (e. g., the researcher and the participant role-played the skill until the participant demonstrated mastery).

_____ The researcher summarized the skill taught (e. g., the researcher made a brief statement summarizing the skill that was taught) .

Appendix H

Scripted Lesson Plans

Lesson 1 – Introducing Yourself to Instructors

Advance organizer:

“In today’s lesson, you will learn the first step in the advocacy process, introducing yourself to your instructors. By the end of this lesson, you will be able to ...

- 1. Greet the instructor,*
- 2. Introduce yourself, and*
- 3. Discuss your reason for talking to the instructor*

Skill Description: Introduction

3 aspects -- greeting the instructor, giving my name, and the class I am taking with the instructor.

- The introduction is a friendly greeting that starts the conversation about your request for an accommodation.
- It is helpful if you approach the conversation in a relaxed manner with a greeting such as good morning or good afternoon.
- Avoid fidgeting or verbal signs of nervousness such as “Uh,” or “Uhm.”
- Make eye contact. Extend your hand for a handshake if it seems appropriate.
- Smile and maintain a relaxed posture. For example, sit up or stand straight instead of slouching over.

Rumrill, P., Palmer, C., Roessler, R., & Brown, P. (1999). *Self-advocacy and conflict resolution training: Strategies for the classroom accommodation request*. University of Arkansas: Project Accommodations Planning Training (APT).

Goal of the Skill

The goal of the introduction is to:

1. Establish a friendly basis for interaction by making eye contact and smiling; and
2. Let the instructor know who you are and your relationship to him/her.

Skill Examples

First make a greeting statement such as

“Good morning,”

“Good afternoon,”

Or

“Hello.”

Then, state your name and the class you are taking.

Be specific as to class number and section.

For example, you might say something like:

“I’m John Doe, and I’m in your Algebra 1203 class, section four; the one that meets on Monday-Wednesday-Friday at 10:00am.”

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Or

“My name is Jane Doe. I’m taking English 1013 with you on Tuesdays and Thursdays at 1:30pm.”

Modeling

Let me give you an example of an effective introduction.

Instructor models an introduction for the students by saying, for example, *“My name is David Smith. I am in your Government class; section one that meets on Monday, Wednesday, and Friday, at 8:00am”*.

Notice the manner and tone of my remarks as well as the specific statements that I made.

I incorporated all three aspects of the introduction: greeting the instructor, giving my name, and the class I am taking with the instructor.

Also, I presented myself positively by speaking directly and maintaining good posture and eye contact.

Practice

Now, I would like for you to practice making introductions.

Student practices with instructor, making an introductory statement. If student does not do well initially, allow the student to repeat the introduction for practice.

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Role-play

The student then practices role-playing the introduction with the instructor.

Try different opening remarks so you can become comfortable with them rather than relying on just one.

Student practices until he/she becomes proficient with the introduction. Discuss the role-play activities before closing.

Summary

You have learned the first step in the advocacy process, introducing yourself to the instructor.

You can:

1. Successfully greet the instructor,
2. Introduce yourself, and
3. Refer to the reason for your discussion

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Lesson 2 – Disclosing Your Disability to Your Instructors

Advance organizer:

“In today’s lesson, you will learn how to disclose your disability to your instructors. By the end of this lesson, you will be able to ...

1. *Identify your disability, and*
2. *Explain your disability in functional terms*

Skill Description: Disclosure

2 aspects – identifying your disability and explaining your disability in functional terms.
--

- Disclosure is a brief explanation of your disability in specific terms.
- The key to successfully communicating your need for an accommodation is to focus on the functional areas that the accommodation will address.
- Merely saying that you have a learning disability does not fully communicate to the instructor how your disability affects your ability to function in the classroom.

Goal of the Skill

The goal of the disclosure is to:

1. Identify your disability, and
2. Explain your disability in functional terms.

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Skill Examples

First, make a general statement about your disability:

“I have a learning disability.”

Then, explain how the disability affects you.

“As a result, it is difficult for me to take notes as thoroughly as I need.”

or,

“It can take me longer to read and comprehend written material.”

This offers an explanation which defines your accommodation needs without focusing on the disability itself.

Remember, do not focus on the disability. Instead, state your disability, then, mention the functional limitations that need to be addressed.

Key: Be prepared. Know what you want to say and where you are going. Then you will have no need to hesitate or appear apologetic.

Modeling

Now let me show you how an introduction and disclosure sound together.

Rumrill, P., Palmer, C., Roessler, R., & Brown, P. (1999). *Self-advocacy & conflict resolution training: Strategies for the classroom accommodation request*. University of Arkansas: Project Accommodations Planning Training (APT).

Instructor models an introduction and disclosure for the student by saying, for example, *“My name is David Smith. I am in your Government class; section one that meets on Monday, Wednesday, and Friday, at 8:00am. I have a learning disability that affects my ability to take notes in class”*.

Notice how I used the introduction skills and then presented a disability and accommodation needs in this example.

I did not focus on the disability.

First, I stated the disability, then moved on to the specific functional limitations that needed to be addressed.

Because I was prepared and knew what I wanted to say, I did not hesitate or appear apologetic.

Practice

Now, I would like for you to practice making a disclosure statement about your disability.

Be sure to use functional terms.

Each student practices making a disclosure statement with the instructor. If more practice is needed, allow another turn.

Rumrill, P., Palmer, C., Roessler, R., & Brown, P. (1999). *Self-advocacy & conflict resolution training: Strategies for the classroom accommodation request*. University of Arkansas: Project Accommodations Planning Training (APT).

Role-play

The student then practices role-playing the disclosure with the instructor.

Try to make your opening disclosure statement sound like an introductory remark and move on to the point you want to make about accommodation needs.

Begin with an introduction and then make your disclosure statement

The student practices with each other until he/she is able to make comfortable and effective disclosure statements. Discuss role-play activities before closing.

Summary

Now you have learned the specific skills to effectively disclose your disability:

1. Identify the disability, and
2. Explain the disability in functional terms

You have also reviewed introductory skills.

Rumrill, P., Palmer, C., Roessler, R., & Brown, P. (1999). *Self-advocacy & conflict resolution training: Strategies for the classroom accommodation request*. University of Arkansas: Project Accommodations Planning Training (APT).

Lesson 3 – Offering a Solution to Your Accommodation Request

Advance organizer:

“In today’s lesson, you will learn how to offer a solution to your request for an accommodation. By the end of this lesson, you will be able to ...

- 1. State the accommodation (s) you have successfully used in similar classes,*
- 2. State the benefit (s) from using the accommodation (s), and*
- 3. Make a request in statement form to use the accommodation (s) in this class.*

Skill Description: Solution

3 aspects—state the accommodation, state the benefit, and make a request

- The solution statement includes an explanation of what you have identified that helped you function effectively in the past and a request to use a similar accommodation in this class.
- As in lesson 2, the first statement provides the basis for requesting the accommodation.
- It is important to request the accommodation in a statement, not in a question.
- Providing solutions rather than asking the instructor to come up with possibilities is key to successfully requesting an accommodation.

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Goal of the Skill

The goal of the solution is to:

1. Cite an accommodation you have identified as effective,
2. State the benefit to you, and
3. Make a request, in statement form, to use the accommodation in class.

Skill Examples

First, give an example of an accommodation.

“I have used a note taker in my other classes.”

“I have learned that using a tape recorder helps me review the lectures.”

or,

“In the past, I’ve used a reader and extended time when taking tests.”

Follow this with an explanation of the benefit to you in class.

“This helps me keep up with the lecture, and I can be more certain that I am reviewing accurate notes when I study.”

“This makes it easier for me to review what was discussed in class.”

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“I’ve found that this is a good way for me to handle testing situations.”

Complete the request by stating that you think the accommodation would be of help in this class.

“I think having a note taker would be helpful in your class as well.”

“I would like to use a tape recorder in your class.”

“Similar testing arrangements would work for me in this class.”

Note that you should mention an effective accommodation, give an example of why it is helpful, and suggest it as a solution.

Key: Without being aggressive, direct the conversation in a positive manner. You have not yet asked permission to use the accommodation; you have suggested it as an alternative.

Modeling

Let me give you an example of how the solution follows naturally after the introduction and disclosure

Instructor models an introduction, disclosure, and solution for the students by saying, for example, *“My name is David Smith. I am in your Government class; section one that meets on Monday, Wednesday, and Friday, at 8:00am. I have a learning disability that affects my ability to take notes in class. In the past, I have used a note taker in other classes. This helps me keep up with the lecture, and I can be more certain that I am reviewing accurate notes when I study. I think having a note taker would be helpful to me in your class as well”*.

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Noticed that I mentioned an effective accommodation, gave an example of why it was helpful, and then suggested it as a solution.

I was also able to direct the conversation in a positive manner.

Practice

Now, I would like for you to practice making a solution statement with a request to use an accommodation.

Be sure to avoid asking for the accommodation at this point. Suggest the accommodation as a solution for this class.

Student practices making a solution statement with the instructor. If more practice is needed, allow another turn.

Role-play

The student then practices role-playing making solution statements with the instructor. Remember to make your request in a form of a statement. Begin with the introduction.

Start with an introduction; make your disclosure statement, then suggest an accommodation with a suggestion that you use the accommodation in this class. Do not state your request in the form of a question.

Student practices with the instructor until he/she is able to make comfortable and effective solution statements. Discuss the role-play segment.

Rumrill, P., Palmer, C., Roessler, R., & Brown, P. (1999). *Self-advocacy & conflict resolution training: Strategies for the classroom accommodation request*. University of Arkansas: Project Accommodations Planning Training (APT).

Summary

You now know how to:

1. State the accommodation (s) you have successfully used in similar classes,
2. State the benefit (s) from using the accommodation (s), and
3. Make a request in statement form to use the accommodation (s) in this class.

You have also reviewed the skills for introduction and disclosure.

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Lesson 4 – Identifying Resources and Stating Your Responsibility

Advance organizer:

“In today’s lesson, you will learn how to explain what resources are available to you and state what your role will be in getting the resources that you need. By the end of this lesson, you will be able to...

- 1. State what resources are available to help with accommodations, and*
- 2. Specify what you will do to facilitate their implementation.*

Skill Description: Resources

2 aspects—stating the resources available and explaining your role to get the resources.

- At this point, you will want to mention the resources available to assist you and your instructor in arranging accommodations.
- If you can provide information about the solution, this will go a long way in helping the instructor understand that the accommodation will not present a hardship for him/her.
- You should provide an explanation of what persons, offices, or agencies can help you implement the accommodations and what your role will be in getting the accommodations in place.

Rumrill, P., Palmer, C., Roessler, R., & Brown, P. (1999). *Self-advocacy & conflict resolution training: Strategies for the classroom accommodation request*. University of Arkansas: Project Accommodations Planning Training (APT).

Goal of the Skill

The goal of explaining the resources is to:

1. Describe the resource (s) available to implement the accommodation, and
2. State what your role will be.

Skill Examples

First, state who (or what office) will be able to assist in providing an accommodation.

“The special education office assists students with disabilities with the accommodations they need. They can help me with specific arrangements for a reader and an accommodator.”

Or

“The special education office assists students with disabilities.”

Then, state your responsibility for implementing the accommodation.

“I will make arrangements for an accommodator to read the test questions, and I’ll have the reader meet me at the classroom on the day of the test.”

You should provide a description of the resource, then state what action you will take to contact the resource, and implement the accommodation.

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Modeling

Now let's take a look at how resources can be presented in an advocacy request.

Instructor models an introduction, disclosure, solution, and resources for the student by saying, for example, *“My name is David Smith. I am in your Government class; section one that meets on Monday, Wednesday, and Friday, at 8:00am. I have a learning disability that affects my ability to take notes in class. In the past, I have used a note taker in other classes. This helps me keep up with the lecture, and I can be more certain that I am reviewing accurate notes when I study. I think having a note taker would be helpful to me in your class as well. The special education office assists students with getting the accommodations that they need. I will contact them about assisting me in identifying a note taker for your class”*.

Note that I provided information about the resources in addition to identifying it by name. I described the resources and then stated what action I would take to implement the accommodation.

Practice

Now, I would like for you to practice providing information about resources available to help you implement an accommodation.

Student practices giving resource information and stating his/her role in implementation. If more practice is needed, allow another turn.

Rumrill, P., Palmer, C., Roessler, R., & Brown, P. (1999). *Self-advocacy & conflict resolution training: Strategies for the classroom accommodation request*. University of Arkansas: Project Accommodations Planning Training (APT).

Role-play

The student then practices identifying resources and explaining their role to get the resources with the instructor.

Make your statement about the resource and what you will do.

Remember to start with the introduction, make a disclosure statement, and suggest an accommodation that you think will help in the class, along with a statement about using the accommodation in class.

Then, present information about the resources available to help with the accommodation and explain what you will do to get the accommodation in place.

Student practices with each other until they are able to effectively present information about the resource and fully explain their role in the implementation of the accommodation. Discuss the role-play activities before summarizing.

Summary

In this lesson, you have learned to:

1. State what resources are available to help with accommodations, and
2. Specify what you will do to facilitate their implementation.

In addition, you have reviewed skills for the introduction, disclosure, and solution.

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Lesson 5 – Asking for Agreement to Your Accommodation Request

Advance organizer:

“In today’s lesson, you will learn how to ask your instructor for agreement to your accommodation request. By the end of this lesson, you will be able to...

- 1. Ask for confirmation or agreement to use the accommodation, and*
- 2. Make an affirming or acknowledgement statement.*

Skill Description: Agreement

2 aspects—ask for agreement and make an affirming statement

- Agreement is the step in which you ask the instructor if the accommodations and arrangements would be acceptable to use in class.
- By this point, you have provided sufficient information about your disability, the accommodation needs it poses, the accommodations you believe will be helpful to you, and the resources and procedure for implementing the accommodations in his/her class.
- Now you are ready to ask for confirmation of what you feel will allow you to do well in class.

Rumrill, P., Palmer, C., Roessler, R., & Brown, P. (1999). *Self-advocacy & conflict resolution training: Strategies for the classroom accommodation request*. University of Arkansas: Project Accommodations Planning Training (APT).

Goal of the Skill

The goal of the agreement is to:

1. Ask for agreement from the instructor, and
2. Confirm the agreement with an affirming statement.

Skill Examples

First, you would ask if the accommodation plan sounds agreeable. You might ask a question like:

“Do these suggestions sound alright to you?”

“Does this seem like a workable plan to you?”

“Will this fit into the class activities okay?”

Then, you would respond to the instructor’s agreement with an affirmative statement such as:

“Good.”

“Okay.”

or,

“Thanks.”

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Be sure to notice that you state the question in a positive tone, as if expecting a positive answer, and make an affirming statement in response.

Key: This confident attitude is helpful in an advocacy setting as it helps keep the focus on the solution, not the problem.

Modeling

I'll give you an example of how to ask for agreement as part of the self-advocacy process.

Instructor models an introduction, disclosure, solution, resources, and agreement by saying, for example, *“My name is David Smith. I am in your Government class; section one that meets on Monday, Wednesday, and Friday, at 8:00am. I have a learning disability that affects my ability to take notes in class. In the past, I have used a note taker in other classes. This helps me keep up with the lecture, and I can be more certain that I am reviewing accurate notes when I study. I think having a note taker would be helpful to me in your class as well. The special education office assists students with getting the accommodations that they need. I will contact them about assisting me in identifying a note taker for your class. Does this suggestion sound okay to you? Good”.*

Notice that I used a positive tone of voice in asking for and confirming an agreement.

By using a positive tone, I set the stage for a positive answer from the instructor.

This confident attitude is helpful in an advocacy setting as it helps keep the focus on the solution, not the problem.

Rumrill, P., Palmer, C., Roessler, R., & Brown, P. (1999). *Self-advocacy & conflict resolution training: Strategies for the classroom accommodation request*. University of Arkansas: Project Accommodations Planning Training (APT).

Practice

Now, I would like for you to practice asking for agreement for your accommodations plan and then affirming the agreement.

Student practices asking for agreement with the instructor. If more practice is needed, allow another turn.

Role-play

The student then practices asking for the agreement and confirming the agreement with the instructor.

Try to ask your question in a positive tone.

Remember to practice through the introduction, disclosure, solution, and resources

Then, confirm the agreement with an affirming statement.

Student practices until he/she is able to effectively ask for agreement and confirm with a positive remark. Discuss the role-play activities before summarizing.

Rumrill, P., Palmer, C., Roessler, R., & Brown, P. (1999). *Self-advocacy & conflict resolution training: Strategies for the classroom accommodation request*. University of Arkansas: Project Accommodations Planning Training (APT).

Summary

Agreement is the fifth skill you have learned in successfully advocating for use of accommodations in the classroom.

Specifically, the skill involves:

1. Asking for confirmation or agreement to use the accommodation, and
2. Making an affirming or acknowledging statement.

We have also reviewed the skills for introduction, disclosure, solution, and resources.

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Lesson 6 – Summarizing the Accommodation Request

Advance organizer:

“In today’s lesson, you will learn how to summarize your accommodation request and how to clarify your role and your instructor’s role in implementing your request. By the end of this lesson, you will be able to...

1. *Restate the accommodation (s) to be used in the class,*
2. *State what your role will be in implementing the accommodation (s), and*
3. *State what your instructor’s involvement or responsibility will be.*

Skill Description: Summary

3 aspects – restate the accommodation, state your role, and state your instructor’s role
--

- The summary statement restates what has been agreed upon and who will be responsible for implementation.
- It is important to clarify what accommodation (s) will be used and who will be responsible for each part of the implementation process.
- This review allows for any misunderstandings to be clarified and both parties to be aware of their responsibility.

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Goal of the Skill

The goal of the summary is to:

1. Restate the accommodation (s) to be used in the class,
2. State what you will do to implement the accommodation (s), and
3. State what the instructor's involvement or responsibility will be.

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Skill Examples

Begin by restating the solution.

“Good. I’ll plan to use a note taker in class and a reader when I take a test.”

“Great. I will plan to use a reader on test days.”

“Okay, I’ll plan to tape-record the classes.”

Follow by stating what you will do to arrange for the note taker or reader.

“I will contact the Special Education Office and take care of scheduling a reader for test days. I’ll also have them contact you about a note taker.”

Then, specify what action the instructor needs to take. For example:

“You will help me identify a student in the class who will let me make copies of class notes.”

“You will let me know what room we can use to take tests so I can notify the accommodator.”

If the instructor does not need to do anything more, you can say:

“I guess that will take care of everything. I don’t think it will be necessary for you to be involved further.”

Or

“I will let you know if there are any problems but I guess that’s all for now.”

Remember:

Summarize the accommodations you will use in the classroom and mention your responsibility as well as that of the resource and the instructor.

Rumrill, P., Palmer, C., Roessler, R., & Brown, P. (1999). *Self-advocacy & conflict resolution training: Strategies for the classroom accommodation request*. University of Arkansas: Project Accommodations Planning Training (APT).

Modeling

I'll demonstrate a summary statement for you.

Instructor models an introduction, disclosure, solution, resources, agreement, and summary for the students by saying, for example, *“My name is David Smith. I am in your Government class; section one that meets on Monday, Wednesday, and Friday, at 8:00am. I have a learning disability that affects my ability to take notes in class. In the past, I have used a note taker in other classes. This helps me keep up with the lecture, and I can be more certain that I am reviewing accurate notes when I study. I think having a note taker would be helpful to me in your class as well. The special education office assists students with getting the accommodations that they need. I will contact them about assisting me in identifying a note taker for your class. Does this suggestion sound okay to you? Good”. I will plan to use a note taker in class and I will contact the Special Education department to assist me in identifying the note taker for your class. There isn't anything that you will need to do”.*

Notice that I included all parts of the solution and mentioned each person's responsibility. I summarized the accommodations I would use in the class and mentioned my responsibility as well as that of the resource and the instructor.

Practice

Now, I would like for you to practice making a summary statement with an identification of each person's responsibility.

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Students practice making a summary statement with the instructor. If more practice is needed, allow another turn.

Role-play

The student then practices making summary statements with the instructor.

Start with an introduction, make your disclosure statement, suggests an accommodation with a stated request to use it in class.

Then explain the resources available to help, ask if the plan is agreeable, and summarize the arrangements and the individual responsibilities.

Student practices until he/she is able to make an accommodation request, complete with summary statements. Discuss role-play activities before moving to the summary.

Rumrill, P., Palmer, C., Roessler, R., & Brown, P. (1999). *Self-advocacy & conflict resolution training: Strategies for the classroom accommodation request*. University of Arkansas: Project Accommodations Planning Training (APT).

Summary

You have learned the essential components in the self-advocacy process.

You have successfully learned to:

1. Restate the accommodation (s),
2. State what your role will be in implementing them, and
3. State what, if any, action will be required by the instructor.

You have also learned the skills for introduction, disclosure, solution, resource, and agreement.

Rumrill, P., Palmer, C., Roessler, R., & Brown, P. (1999). *Self-advocacy & conflict resolution training: Strategies for the classroom accommodation request*. University of Arkansas: Project Accommodations Planning Training (APT).

Lesson 7 – Closing the Discussion

Advance organizer:

“In today’s lesson, you will learn how to bring the discussion to a close. By the end of this lesson, you will be able to close the discussion by...

- 1. Making a positive statement which suggests closure, and*
- 2. Express your appreciation.*

Skill Description: Closure

2 aspects – making a positive statement and expressing appreciation

- The closure is a generally positive statement indicating a close to the conversation that contains an expression of appreciation.
- The closure should be made in a comfortable, unhurried manner.
- It is important to continue the feeling of confidence, avoiding any sense of hurry or apology.
- Just as in the introduction, it is helpful if you approach the conversation in a relaxed manner without verbal nervousness such as “Uh,” or “Uhm.”
- It is important to maintain eye contact and extend your hand for a handshake if it seems appropriate.
- And smile!

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Goal of the Skill

The goal of the closure is to:

1. Make a positive statement about the class or the accommodation arrangements, and
2. Express your appreciation for the instructor's time, attention, and assistance.

Skill Examples

First make a general statement such as:

“I’m looking forward to your class.”

“I’m pleased we were able to get these arrangements made.”

Then express your appreciation by saying:

“Thanks for your help.”

“I appreciate your help.”

or some other similar acknowledgement.

Be sure you incorporate a positive statement, and an expression of appreciation.

Key: Demonstrate good non-verbal communication by speaking directly, using good posture, and maintaining eye contact.

Note: Become familiar with different closing remarks so you can become comfortable with more than just one.

Rumrill, P., Palmer, C., Roessler, R., & Brown, P. (1999). *Self-advocacy & conflict resolution training: Strategies for the classroom accommodation request*. University of Arkansas: Project Accommodations Planning Training (APT).

Modeling

Let me demonstrate how the closure works into the accommodation request process.

Instructor models an introduction, disclosure, solution, resources, agreement, summary, and closure by saying, for example, *“My name is David Smith. I am in your Government class; section one that meets on Monday, Wednesday, and Friday, at 8:00am. I have a learning disability that affects my ability to take notes in class. In the past, I have used a note taker in other classes. This helps me keep up with the lecture, and I can be more certain that I am reviewing accurate notes when I study. I think having a note taker would be helpful to me in your class as well. The special education office assists students with getting the accommodations that they need. I will contact them about assisting me in identifying a note taker for your class. Does this suggestion sound okay to you? Good”. I will plan to use a note taker in class and I will contact the Special Education department to assist me in identifying the note taker for your class. There isn’t anything that you will need to do. I’m looking forward to your class. Thank you so much for your time”.*

Notice that I included a positive statement and an expression of appreciation in my closure.

I also used good non-verbal communication by speaking directly, using good posture, and maintaining eye contact.

Rumrill, P., Palmer, C., Roessler, R., & Brown, P. (1999). *Self-advocacy & conflict resolution training: Strategies for the classroom accommodation request*. University of Arkansas: Project Accommodations Planning Training (APT).

Practice

Now, I would like for you to practice the closure of the conversation.

Student practices with instructor, making an introduction, a disclosure explanation, a solution statement, resource explanation, an agreement request, a summary statement, and a closure. If the student does not do well initially, have him/her repeat the advocacy presentation for practice.

Role-play

The student then practices making closure statements with the instructor.

Try using different closing remarks so you can become comfortable with more than one.

Start at the introduction and go through the entire accommodation request process, ending the conversation with a positive reference to the class and an expression of appreciation.

Student practices with until they become proficient with the accommodation process including the closure. Allow additional practice if the student is having difficulty with any areas. Discuss role-play activity before summarizing.

Rumrill, P., Palmer, C., Roessler, R., & Brown, P. (1999). *Self-advocacy & conflict resolution training: Strategies for the classroom accommodation request*. University of Arkansas: Project Accommodations Planning Training (APT).

Summary

This last lesson has provided you with two important skills needed to conclude an advocacy discussion, e.g., how to:

1. Make a positive statement which suggests closure, and
2. Express your appreciation.

You have also reviewed the skills for introduction, disclosure, solution, resource, agreement, and summary statement.

Rumrill, P., Palmer, C., Roessler, R., & Brown, P. (1999). *Self-advocacy & conflict resolution training: Strategies for the classroom accommodation request*. University of Arkansas: Project Accommodations Planning Training (APT).

Appendix I

PowerPoint Presentation

Self-Advocacy and Disability Disclosure

BY
DWANNAL W. MCGAHEE, RESEARCHER

Objectives

By the end of this training, you will:

- Be able to request academic accommodations.
- Know the 17 targeted self-advocacy behaviors that are important in requesting classroom accommodations.
- Understand the 17 targeted self-advocacy behaviors
- Practice these behaviors with the researcher, the special education coordinator, and your teachers.

Lesson 1 – Skill Description - INTRODUCTION

- The introduction is a friendly greeting that tells the instructor who you are and opens the conversation.
- It is helpful if you approach the conversation in a relaxed manner.
- Avoid fidgeting or verbal signs of nervousness such as "Uh" or "Uhm".
- Establish eye contact and extend your hand for a handshake if it seems appropriate.
- Smile and maintain a relaxed posture.

Goal of the Skill

The goal of the introduction is to:

1. Establish a friendly basis for interaction; and
2. Let the instructor know who you are and your relationship to the instructor.

Skill Examples

First make a greeting statement such as:

"Good Morning"

"Good Afternoon"

Or

"Hello"

Skill Examples (Cont)

Then, state your name (**First and Last**) and the class you are taking.

Be specific as to the class number and section.

And

State the reason for the discussion

For example, you might say something like:

Skill Examples (Cont)

"I'm John Smith and I am in your English 101 class, section four; the one that meets on Monday, Wednesday, and Friday at 11:00am. I am here today to discuss accommodations that I need in your class."

Or

"My name is John Smith. I'm taking Algebra I with you on Tuesdays and Thursdays at 1:00pm. I would like to discuss the accommodations that I need in your class."

Modeling

- What went well?
- What could I have done differently?

Practice, Practice, Practice !!!



You can...

- Successfully greet your instructor
- Introduce yourself, and
- Refer to the reason for your discussion.

Lesson 2 – Skill Description – DISCLOSURE

- Disclosure is a brief explanation of your disability in specific terms.
- The key to successfully communicating your need for an accommodation is to focus on the functional areas that the accommodations will address.
- Merely saying that you have a learning disability does not fully communicate to the instructor how your disability affects your ability to function in the classroom.

Goal of the Skill

The goal of the disclosure is to:

1. Identify your disability, and
2. Explain your disability in functional terms

Skill Examples

First, make a general statement about your disability:

"I have a learning disability"

Then explain how the disability affects you.

Skill Examples (Cont)

"As a result of my disability, I need an accommodation for note-taking."

Or

"As a result of my disability, I need an accommodation for taking tests."

This offers an explanation which defines your accommodation needs without focusing on the disability itself.

Modeling

- What went well?
- What could I have done differently?

Practice, Practice, Practice !!!



Summary

Now you have learned the specific skills to effectively disclose your disability:

1. Identify the disability, and
2. Define the disability in functional terms.

You have also reviewed introductory skills.

Lesson 3 – Skill Description - SOLUTION

- The solution statement includes an explanation of what you have identified that helped you function effectively in the past and a request to use a similar accommodation in this class.
- As in lesson 2, the first statement provides the basis for requesting the accommodation.
- It is important to request the accommodation in a statement, not in a question.
- Providing solutions rather than asking the instructor to come up with possibilities is a key to successful advocacy.

Goal of the Skill

The goal of the solution is to:

1. Cite an accommodation you have identified as effective,
2. State the benefit to you, and
3. Make a request, in statement form, to use the accommodation in class.

Skill Examples

First, give an example of an accommodation.

"I have used a note-taker in my other classes."

Or

"In the past, I've used a reader and extended time when taking tests."

Follow this with an explanation of the benefit to you in class

Skill Examples (Cont)

"Having a note taker enabled me to listen carefully during the lecture and I was more certain I had accurate and clear notes when I studied."

or

"Having a note taker enables me to review good notes more than one time after the class session, which helps me learn the content."

or

"Using a recorder in this class enables me to listen to class content after the class session, which helps me learn the content."

Skill Examples (Cont)

or

"This helps me keep up with the lecture and I can be more certain that I am reviewing accurate notes when I study."

or

"I have learned that using a recorder helps me review lectures."

or

Skill Examples (Cont)

"This makes it easier for me to review what was discussed in class."

or

"I've found that this is a good way for me to handle testing situations."

Skill Examples (Cont)

Complete the request by stating that the accommodation would be of help in this class:

"Having a note-taker would be helpful in your class as well."

"I would like to use a recorder in your class."

"Similar testing arrangements would work for me in this class."

Modeling

- What went well?
- What could I have done differently?

Practice, Practice, Practice !!!



Summary

You now know how to:

1. State the accommodation (s) you have successfully used in similar classes,
2. State the benefit (s) from using the accommodation (s), and
3. Make a request in statement form to use the accommodation (s) in this class.

You have also reviewed the skills for introduction and disclosure.

Lesson 4 – Skill Description - RESOURCES

- At this point, you should mention the resources available to assist you and the instructor in arranging accommodations.
- If you can provide information about the solution, this will go a long way in helping the instructor understand that the accommodation will not present a hardship for him/her.
- You should offer an explanation of what persons, offices, or agencies can help you implement the accommodations and what your role will be in getting the accommodations in place.

Goal of the Skill

The goal of explaining resources is to:

1. Describe the resource (s) available to implement the accommodation, and
2. State what your role will be.

Skill Examples

First, state who (or what office) will be able to assist in providing an accommodation:

"The Special Education Office assists students with disabilities with accommodations they need. They can help me with specific arrangements for a reader and a note-taker."

or

"I am registered with the Special Education Office, an office of student services that assist students with disabilities."

Skill Examples (Cont)

Then state your responsibility for implementing the accommodations:

"I will go to Special Education Office to use the reader."

Or

"I will make arrangements for the reader to meet me at the classroom on the day of the test."

Modeling

- What went well?
- What could I have done differently?

Practice, Practice, Practice !!!



Summary

In this lesson, you have learned to:

1. State what resources are available to help with accommodations, and
2. Specify what you will do to facilitate their implementation.

In addition, you have reviewed skills for introduction, disclosure, and solution.

Lesson 5 – Skill Description - AGREEMENT

- Agreement is the step in which you ask the instructor if the accommodations and arrangements would be acceptable to use in class.
- By this point, you have provided sufficient information about your disability, the accommodations needs it poses, the accommodations you believe will be helpful to you, and the resources and procedures for implementing the accommodations in his/her class.
- Now you are ready to ask for confirmation of what you think will allow you to do well in class.

Goal of the Skill

The goal of the agreement is to:

1. Ask for agreement from the instructor, and
2. Confirm the agreement with an affirming statement.

Skill Examples

First, you would ask if the accommodation plan sounds agreeable. You might ask a question like:

"Do these suggestions sound alright to you?"
or
"Does this seem like a workable plan to you?"
or
"Will this fit into the class activities okay?"

Skill Examples (Cont)

Then you would respond to the instructor's agreement with an affirmative statement such as:

"Good"
"Okay"
or
"Thanks"

Modeling

- What went well?
- What could I have done differently?

Practice, Practice, Practice !!!



Summary

Agreement is a skill you have learned in successfully advocating for use of accommodations in the classroom.

Specifically, the skill involves:

1. Asking for confirmation or agreement to use the accommodation, and
2. Making an affirming or acknowledging statement

We have also reviewed the skills for introduction, disclosure, solution, and resources

Lesson 6 – Skill Description - SUMMARY

- The summary statement restates what has been agreed upon and who will be responsible for implementation.
- It is important to clarify what accommodation (s) will be used and who will be responsible for each part of the implementation process.
- This review allows for any misunderstanding to be clarified and both parties to be aware of their responsibility.

Goal of the Skill

The goal of the summary is to:

1. Restate the accommodation (s) to be used in the class.
2. State what you will do to implement the accommodation (s), and
3. State what the instructor's involvement or responsibility will be.

Skill Examples

Begin by restating the solution:

"Good. I'll plan to use a note-taker in class and a reader when I take a test."

or

"Great. I will plan to use a reader on test days."

or

"Okay, I'll plan to record the classes."

Skill Examples (Cont)

Followed by stating what you would do to arrange for the note-taker or reader:

"I will contact the Special Education Office and take care of scheduling a reader for test days. I'll also have them contact you about a note-taker."

Skill Examples (Cont)

Then, specify what action the instructor needs to take. For example:

"You will help me identify a student in the class who will let me make copies of class notes."

or

"You will let me know what room we can use to take tests so I can notify the reader."

Skill Examples (Cont)

If the instructor does not need to do anything more, you could say:

"I believe that will take care of everything. I don't think it will be necessary for you to be involved further."

or

"I will let you know if there are any problems. That will be all for now."

Modeling

What went well?

What could I have done differently?

Practice, Practice, Practice !!!



Summary

You have learned the essential components in the self-advocacy process.

You have successfully learned to:

1. Restate the accommodation (s)
2. State what your role will be in implementing them, and
3. State what, if any action will be required of the instructor.

You have also learned the skills for introduction, disclosure, solution, resource, and agreement.

Lesson 7 – Skill Description - CLOSURE

- The closure is generally a positive statement indicating a close to the conversation that contains an expression of appreciation.
- The closure should be made in a comfortable unhurried manner.
- It is important to continue the feeling of confidence, avoiding any sense of hurry or apology.

Lesson 7 – Skill Description - Closure

- Just as in the introduction, it is helpful if you approach the conversation in a relaxed manner without verbal nervousness such as "Uh" or "Uhm".
- It is important to maintain eye contact and extend your hand for a handshake if it seems appropriate.
- Smile!

Goal of the Skill

The goal of the closure is to:

1. Make a positive statement about the class or the accommodation arrangements and
2. Express your appreciation for the instructor's time, attention, and assistance.

Skill Examples

First make a general statement such as:

**"I'm looking forward to your class."
"I'm pleased we were able to get these arrangements made."**

Then express your appreciation by saying:

**"Thanks for your help."
"I appreciate your support."**

Modeling

- What went well?
- What could I have done differently?

Practice, Practice, Practice !!!



Summary

This last session has provided you with two important skills needed to conclude an advocacy discussion:

1. Make a positive statement which suggests closure, and
2. Express your appreciation.

You have also reviewed skills for introduction, disclosure, solution, resource, agreement, and summary statement.



Appendix J

Participant Workbook

★ ★ ★ **Self-Advocacy** ★ ★ ★

Participant workbook



**Dwannal W. McGahee, Researcher
George Mason University**

What does it mean to have a Learning Disability?

The Individuals with Disabilities Education Act (IDEA) defines a student with a specific learning disability (LD) as having “a disorder in one or more basic psychological processes involved in understanding or in using language, spoken or written, that may manifest itself in the imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations” (34 C.F.R. § 300.8 (c) (10) (i), 2006).

What is Self-Advocacy?

Self-advocacy is defined as the ability to speak on one's own behalf and explain one's disability, personal needs, and interests in a clear and concise manner (Kallio & Owens, 2004; Kotzer & Margalit, 2007).



Tips for Self-Advocacy

- Know and understand your rights and responsibilities.
- Learn all you can about your disability, needs, strengths, and weaknesses.
- Know what accommodations you need as well as why you need them.
- Know how to effectively/assertively communicate your needs and preferences.
- Find out who the key people are and how to contact them if necessary.
- Be willing to ask questions when you are unclear or you need clarification about something.

OBJECTIVES

By the end of this training, you will:

- Be able to request academic accommodations.
- Know the 17 targeted self-advocacy behaviors that are important in requesting classroom accommodations.
- Understand the 17 targeted self-advocacy behaviors.
- Practice these behaviors with the researcher, the special education coordinator, and your teachers.

Lesson 1 – Skill Description – INTRODUCTION

- The introduction is a friendly greeting that tells the instructor who you are and opens the conversation.
- It is helpful if you approach the conversation in a relaxed manner.
- Avoid fidgeting or verbal signs of nervousness such as “Uh” or “Uhm.”
- Establish eye contact and extend your hand for a handshake if it seems appropriate.
- Smile and maintain a relaxed posture

Goal of the Skill

The goal of the introduction is to:

1. Establish a friendly basis for interaction, and

2. Let the instructor know who you are and your relationship to the instructor.

Skill Examples

First make a greeting statement such as:

“Hello”

“Good Morning”

or

“Good Afternoon”

Then, state your name (**first and last**) and the class you are taking.

Be specific as to the class number and section.

and

State the reason for your discussion.

For example, you might say something like:

“I’m John Smith and I am in your English 101 class, section four; the one that meets on Monday, Wednesday, and Friday at 11:00am. I am here today to discuss accommodations that I need in your class.”

OR

“My name is John Smith. I’m taking Algebra I with you on Tuesdays and Thursdays at 1:00pm. I would like to discuss the accommodations that I need in your class.”

Modeling

What went well?

What could I have done differently?





You Can...

- Successfully greet your instructor
- Introduce yourself, and
- Refer to the reason for your discussion



Lesson 2 – Skill Description – DISCLOSURE

- Disclosure is a brief explanation of your disability in specific terms.
- The key to successfully communicating your need for an accommodation is to focus on the functional areas that the accommodations will address.
- Merely saying that you have a learning disability does not fully communicate to the instructor how your disability affects your ability to function in the classroom.

Goal of the Skill

The goal of the disclosure is to:

1. Identify your disability, and
2. Explain your disability in functional terms

Skill Examples

First, make a general statement about your disability:

“I have a learning disability.”

Then explain how the disability affects you.

“As a result of my disability, I need an accommodation for note-taking.”

or

“As a result of my disability, I need an accommodation for taking tests.”

This offers an explanation which defines your accommodation needs without focusing on the disability itself.

Modeling

- What went well?
- What could I have done differently?





Summary

Now you have learned the specific skills to effectively disclose your disability:

1. Identify the disability, and
2. Define the disability in functional terms.

You have also reviewed introductory skills.



Lesson 3 – Skill Description – SOLUTION

- The solution statement includes an explanation of what you have identified that helped you function effectively in the past, and a request to use a similar accommodation in this class.
- As in lesson 2, the first statement provides the basis for requesting the accommodation.
- It is important to request the accommodation in a statement, not in a question.
- Providing solutions rather than asking the instructor to come up with possibilities is a key to successful advocacy.

Goal of the Skill

The goal of the solution is to:

1. Cite an accommodation you have identified as effective,
2. State the benefit to you, and
3. Make a request, in statement form, to use the accommodation in class.

Skill Examples

First, give an example of an accommodation.

“I have used a note-taker in my other classes.”

or

“In the past, I’ve used a reader and extended time when taking tests.”

*Follow this with an explanation of the benefit to you in
class*

“Having a note taker enabled me to listen carefully during the lecture and I was more certain I had accurate and clear notes when I studied.”

OR

“Having a note taker enables me to review good notes more than one time after the class session, which helps me learn the content.”

OR

“Using a recorder in this class enables me to listen to class content after the class session, which helps me learn the content.”

OR

“This helps me keep up with the lecture and I can be more certain that I am reviewing accurate notes when I study.”

OR

“I have learned that using a recorder helps me review lectures.”

OR

“This makes it easier for me to review what was discussed in class.”

OR

“I’ve found that this is a good way for me to handle testing situations.”

Complete the request by stating that the accommodation would be of help in this class:

“Having a note-taker would be helpful in your class as well.”

OR

“I would like to use a recorder in your class.”

OR

“Similar testing arrangements would work for me in this class.”

Modeling

- What went well?
- What could I have done differently?





Summary

You now know how to:

1. State the accommodation (s) you have successfully used in similar classes,
2. State the benefit(s) from using the accommodation(s),
and
3. Make a request in statement form to use the accommodation(s) in this class.

You have also reviewed the skills for introduction and disclosure.

Lesson 4 – Skill Description - RESOURCES

- At this point, you should mention the resources available to assist you and the instructor in arranging accommodations.
- If you can provide information about the solution, this will go a long way in helping the instructor understand that the accommodation will not present a hardship for him/her.
- You should offer an explanation of what persons, offices, or agencies can help you implement the accommodations and what your role will be in getting the accommodations in place.

Goal of the Skill

The goal of explaining resources is to:

1. Describe the resource(s) available to implement the accommodation, and
2. State what your role will be.

Skill Examples

First, state who (or what office) will be able to assist in providing an accommodation:

“The Special Education Office assists students with disabilities with accommodations they need. They can help me with specific arrangements for a reader and a note-taker.”

or

“I am registered with the Special Education Office, an office of student services that assist students with disabilities.”

Then state your responsibility for implementing the accommodations:

“I will go to Special Education Office to use the reader.”

or

“I will make arrangements for the reader to meet me at the classroom on the day of the test.”

Modeling

- What went well?
- What could I have done differently?





Summary

In this lesson, you have learned to:

1. State what resources are available to help with accommodations, and
2. Specify what you will do to facilitate their implementation.

In addition, you have reviewed skills for introduction, disclosure, and solution.



Lesson 5 – Skill Description - AGREEMENT

- Agreement is the step in which you ask the instructor if the accommodations and arrangements would be acceptable to use in class.
- By this point, you have provided sufficient information about your disability, the accommodations needs it poses, the accommodations you believe will be helpful to you, and the resources and procedures for implementing the accommodations in his/her class.
- Now you are ready to ask for confirmation of what you think will allow you to do well in class.

Goal of the Skill

The goal of the agreement is to:

1. Ask for agreement from the instructor, and

2. Confirm the agreement with an affirming statement.

Skill Examples

First, you would ask if the accommodation plan sounds agreeable. You might ask a question like:

“Do these suggestions sound alright to you?”

OR

“Does this seem like a workable plan to you?”

OR

“Will this fit into the class activities okay?”

Then you would respond to the instructor’s agreement with an affirmative statement such as:

“Good”

“Okay”

or

“Thanks”

Modeling

- What went well?
- What could I have done differently?





Summary

Agreement is a skill you have learned in successfully advocating for use of accommodations in the classroom.

Specifically, the skill involves:

1. Asking for confirmation or agreement to use the accommodation, and
2. Making an affirming or acknowledging statement.

We have also reviewed the skills for introduction, disclosure, solution, and resources.



Lesson 6 – Skill Description – SUMMARY

- The summary statement restates what has been agreed upon and who will be responsible for implementation.
- It is important to clarify what accommodation(s) will be used and who will be responsible for each part of the implementation process.
- This review allows for any misunderstanding to be clarified and both parties to be aware of their responsibility.

Goal of the Skill

The goal of the summary is to:

1. Restate the accommodation(s) to be used in the class.
2. State what you will do to implement the accommodation(s), and

3. State what the instructor's involvement or responsibility will be.

Skill Examples

Begin by restating the solution:

“Good. I’ll plan to use a note-taker in class and a reader when I take a test.”

OR

“Great. I will plan to use a reader on test days.”

OR

“Okay, I’ll plan to record the classes.”

Followed by stating what you would do to arrange for the note-taker or reader:

“I will contact the Special Education Office and take care of scheduling a reader for test days. I’ll also have them contact you about a note-taker.”

Then, specify what action the instructor needs to take. For example:

“You will help me identify a student in the class who will let me make copies of class notes.”

OR

“You will let me know what room we can use to take tests so I can notify the reader.”

If the instructor does not need to do anything more, you could say:

“I believe that will take care of everything. I don’t think it will be necessary for you to be involved further.”

or

“I will let you know if there are any problems. That will be all for now.”

Modeling

What went well?

What could I have done differently?





Summary

You have learned the essential components in the self-advocacy process.

You have successfully learned to:

1. Restate the accommodation(s)
2. State what your role will be in implementing them,
and
3. State what, if any action will be required of the instructor.

You have also learned the skills for introduction, disclosure, solution, resource, and agreement.



Lesson 7 – Skill Description – CLOSURE

- The closure is generally a positive statement indicating a close to the conversation that contains an expression of appreciation.
- The closure should be made in a comfortable unhurried manner.
- It is important to continue the feeling of confidence, avoiding any sense of hurry or apology.
- Just as in the introduction, it is helpful if you approach the conversation in a relaxed manner without verbal nervousness such as “Uh” or “Uhm.”
- It is important to maintain eye contact and extend your hand for a hand shake if it seems appropriate.
- Smile!

Goal of the Skill

The goal of the closure is to:

1. Make a positive statement about the class or the accommodation arrangements and
2. Express your appreciation for the instructor's time, attention, and assistance.

Skill Examples

First make a general statement such as:

“I’m looking forward to your class.”

“I’m pleased we were able to get these arrangements made.”

Then express your appreciation by saying:

“Thanks for your help.”

“I appreciate your support.”

Modeling

- What went well?
- What could I have done differently?





Summary

This last session has provided you with two important skills needed to conclude an advocacy discussion:

1. Make a positive statement which suggests closure, and
2. Express your appreciation.

You have also reviewed skills for introduction, disclosure, solution, resource, agreement, and summary statement.

Seventeen Targets

1 - 8

- Greet Instructor
- Introduce Self
- Tell Reason for Discussion
- Identify Disability Status
- Explain Needs in Functional Terms
- Identify Previous Accommodations
- Explain Benefits of Past Accommodations
- Rationale for Requesting Use of Accommodations

9 - 12

- Identify Resources
- Explain Student's Responsibility
- Ask for Agreement
- Affirm Agreement

13 - 17

- Re-state Accommodations
- Clarify His/Her Role
- Clarify Instructor's Role
- Close with Positive Statement
- Express Appreciation

Appendix K

Social Validity Survey

Student Name	School
Date	Grade

In this survey, the researchers are asking for feedback from you about how well you liked and learned from the Self-Advocacy instruction. Researchers also want to know ways you feel the instruction could be better.

Your feedback helps researchers and teachers improve self-advocacy instruction for students like you!

If you need any part of this survey read aloud or explained to you, please ask for that at any point when you are completing this survey.

There are two parts ...

Part 1: IEP Accommodations and Self-Advocacy Intervention

Directions: For each statement, put an X in the box that best matches your level of agreement with the statement.

Statement	1	2	3	4
	Strongly Disagree	Disagree	Agree	Strongly Agree
1. I know what is meant by accommodations on my IEP.	Strongly Disagree	Disagree	Agree	Strongly Agree
2. This self-advocacy intervention is the first time I've learned about how to request accommodations that are on my Individualized Education Program (IEP).	Strongly Disagree	Disagree	Agree	Strongly Agree
3. Through learning this self-advocacy intervention, I increased my awareness of accommodations on my IEP.	Strongly Disagree	Disagree	Agree	Strongly Agree
4. After learning this self-advocacy intervention, I have a clearer understanding about why I have accommodations identified on my IEP.	Strongly Disagree	Disagree	Agree	Strongly Agree
5. Prior to learning this self-advocacy intervention, I was already talking with my instructors about accommodations from my IEP and using them.	Strongly Disagree	Disagree	Agree	Strongly Agree

Statement	1	2	3	4
6. Prior to this self-advocacy intervention, I was not sure about what accommodations were on my IEP.	Strongly Disagree	Disagree	Agree	Strongly Agree
7. Prior to this self-advocacy intervention, I had a good way to talk with my instructors about accommodations for me in their class.	Strongly Disagree	Disagree	Agree	Strongly Agree
8. After learning this self-advocacy intervention, I believe I will be more effective in talking with instructors about accommodations I need in their classes.	Strongly Disagree	Disagree	Agree	Strongly Agree
9. After learning this self-advocacy intervention, I believe I can explain my disability and academic needs.	Strongly Disagree	Disagree	Agree	Strongly Agree
10. After learning this self-advocacy intervention, I am confident advocating for my academic needs.	Strongly Disagree	Disagree	Agree	Strongly Agree
11. After learning this self-advocacy intervention, I am more comfortable requesting academic accommodations than I did before I learned this intervention.	Strongly Disagree	Disagree	Agree	Strongly Agree
12. After learning this self-advocacy intervention, I am more likely to request academic accommodations.	Strongly Disagree	Disagree	Agree	Strongly Agree

Part 2: Importance of Self-Advocacy Behaviors

Directions: Rate the importance of each behavior you learned in the self-advocacy intervention.

	1	2	3	4	5
	Not Important	Slightly Important	Moderately Important	Important	Very Important
<i>Greet instructor?</i> – Student verbally states a greeting such as “hello, good morning or good afternoon.”					
<i>Introduce self?</i> - Student introduces self by name (student verbally states first and last name) and identifies the specific class he/she has with instructor (e.g., the name of the class, class number, and section).					

<p><i>Tells reason for discussion?</i></p> <p>Student states the reason for the discussion.</p>					
<p><i>Identify disability status?</i> – Student identifies his or her disability (e.g., “I have a learning disability.”)</p>					
<p><i>Explain needs in functional terms?</i> – Student makes a verbal statement that explains how the disability affects him/her (e.g., “As a result of my disability, I need an accommodation for note-taking.”)</p>					

<p><i>Identifies previous accommodations? –</i></p> <p>Student makes a verbal statement identifying the accommodation (s) used in one or more previous courses (e.g., “I have used a note taker in my other classes or I have learned that using a tape recorder helps me review lectures.”)</p>					
<p><i>Explain benefits of past accommodations? –</i></p> <p>Student explains the benefit of the accommodations used in the past (e.g.,</p>					

<p>“Having a note taker enabled me to listen carefully during the lecture and I was more certain I had accurate and clear notes when I studied.” or “The tape recorder allows me to review what was discussed in class.”)</p>					
<p><i>Rationale for requesting use of accommodation? –</i> Student states the accommodation he/she needs to be successful in this class (e.g., Having a note taker enables me to review good notes</p>					

<p>more than one time after class session, which helps me learn the content.” or “Using a tape recorder in this class enables me to listen to class content after the class session, which helps me learn the content.”)</p>					
<p><i>Identify resources (people)?</i> Student verbally states who or what office will assist in providing an accommodation (e.g., the Special Education Office).</p>					
<p><i>Explain student’s responsibility?</i> – Student verbally</p>					

<p>states what his/her responsibility is for implementing the accommodation (e.g., “I will make arrangements for the reader to meet me at the classroom on the day of the test.”)</p>					
<p><i>Ask for agreement?</i> – Student asks the instructor if the accommodation plan sounds agreeable (e.g., “Do these suggestions sound alright to you?” or “Does this seem like a workable plan to you?”)</p>					
<p><i>Affirm agreement?</i> – Student verbally</p>					

<p>responds to the instructor's agreement with an affirmative statement (e.g., "good" or "okay")</p>					
<p><i>Restate accommodations?</i> – Student verbally states the solution (accommodation). (e.g., "Good, I'll plan to use a note taker in class and a reader when I take a test." or "Great! I will plan to use a reader on test days.")</p>					
<p><i>Clarify his/her role?</i> – Student verbally states what he/she will do to arrange for</p>					

<p>the accommodations (e.g., “I will contact the Special Education Department and take care of scheduling a reader on test days. I’ll also have them contact you about a note taker.”)</p>					
<p><i>Clarify instructor’s role?</i> – Student specifically states what action the teacher needs to take (e.g., “You will help me identify a student in the class who will let me make copies of class notes.”) <i>If the teacher does not need to do anything</i></p>					

<p><i>more, student makes a statement such as:</i></p> <p>“Based on what we’ve discussed about my accommodations, I don’t think it’s necessary for you to be further involved at this time. Do you agree?”</p>					
<p><i>Close with positive statement?</i> – Student makes a general positive statement (e.g., “I’m looking forward to your class.”)</p>					
<p><i>Express appreciation?</i> – Student makes a verbal statement</p>					

expressing his or her appreciation (e.g., “Thanks for your help” or “I appreciate your help.”)					
--	--	--	--	--	--

Which of the target behaviors did you like best?

Which of the target behaviors did you like the least?

Which of the target behaviors would you change?

Would you recommend this intervention to other students? Why or Why not?

Appendix L

Educator Feedback on Role-Play Form

Directions: Please provide feedback on the participant's role-plays by completing the entire form.

Role Play #1

1. The student was polite when he/she approached to request accommodations.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
------------------------------	-----------------	----------------	--------------	---------------------------

1	2	3	4	5
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Comments:

2. The student clearly explained his/her disability and the accommodations that were needed.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
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1	2	3	4	5
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Comments:

3. Based on the students approach and explanation, I would grant the accommodation request.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
------------------------------	-----------------	----------------	--------------	---------------------------

1	2	3	4	5
----------	----------	----------	----------	----------

Comments:

Role-play #2

1. The student was polite when he/she approached to request accommodations.

Strongly Disagree **Disagree** **Neutral** **Agree** **Strongly Agree**

1 **2** **3** **4** **5**

Comments:

2. The student clearly explained his/her disability and the accommodations that were needed.

Strongly Disagree **Disagree** **Neutral** **Agree** **Strongly Agree**

1 **2** **3** **4** **5**

Comments:

3. Based on the students approach and explanation, I would grant the accommodation request.

Strongly Disagree **Disagree** **Neutral** **Agree** **Strongly Agree**

1 **2** **3** **4** **5**

Comments:

Appendix M

Interobserver Agreement

Target Behaviors	IRR A	IRR B	Agreements (Y/N)
1. Greet Instructor? – Student verbally states a greeting such as “hello, good morning or good afternoon.”			
2. Introduce Self? - Student introduces self by name (student verbally states first and last name) and identifies the specific class he/she has with instructor (e.g., the name of the class, class number, and section).			
3. Tell Reason for Discussion? - Student states the reason for the discussion.			
4. Identify Disability Status? - Student identifies his or her disability (e.g., “I have a learning disability.”)			
5. Explain Needs in Functional Terms? - Student makes a verbal statement that explains how the disability affects him/her (e.g., “As a result of my disability, I need an accommodation for note-taking.”)			
6. Identifies Previous Accommodations? - Student makes a verbal statement identifying the accommodation (s) used in one or more previous courses (e.g., “I have used a note taker in my other classes or I have learned that using a tape recorder helps me review lectures.”)			
7. Explain Benefits of Past Accommodations? - Student explains the benefit of the accommodations used in the past (e.g., “Having a note taker enabled me to listen carefully during the lecture and I was more certain I had accurate and clear notes when I studied.” or “The tape recorder allows me to review what was discussed in class.”)			
8. Rationale for Requesting Use of Accommodations? - Student states the accommodation he/she needs to be successful in this class (e.g., Having a note taker enables me to review good notes more than one time after class session, which helps me learn the content.” or “Using a tape recorder in this class enables me to listen to class content after the class session, which helps me learn the content.”)			

9. Identify Resources (people?) - Student verbally states who or what office will assist in providing an accommodation (e.g., the Special Education Office).			
10. Explain Student's Responsibility? - Student verbally states what his/her responsibility is for implementing the accommodation (e.g., "I will make arrangements for the reader to meet me at the classroom on the day of the test.")			
Target Behaviors	IRR A	IRR B	Agreements (Y/N)
11. Ask for Agreement? - Student asks the instructor if the accommodation plan sounds agreeable (e.g., "Do these suggestions sound alright to you?" or "Does this seem like a workable plan to you?")			
12. Affirm Agreement? - Student verbally responds to the instructor's agreement with an affirmative statement (e.g., "good" or "okay")			
13. Re-state Accommodations? - Student verbally states the solution (accommodation). (e.g., "Good, I'll plan to use a note taker in class and a reader when I take a test." Or "Great! I will plan to use a reader on test days.")			
14. Clarify His/Her Role? - Student verbally states what he/she will do to arrange for the accommodations (e.g., "I will contact the Special Education Department and take care of scheduling a reader on test days. I'll also have them contact you about a note taker.")			
15. Clarify Instructor's Role? - Student specifically states what action the teacher needs to take (e.g., "You will help me identify a student in the class who will let me make copies of class notes.") If the teacher does not need to do anything more, student makes a statement such as: "Based on what we've discussed about my accommodations, I don't think it's necessary for you to be further involved at this time. Do you agree?"			
16. Close with Positive Statement? - Student makes a general positive statement (e.g., "I'm looking forward to your class.")			

17. Express Appreciation? - Student makes a verbal statement expressing his or her appreciation (e.g., “Thanks for your help” or “I appreciate your help.”)			
--	--	--	--

To calculate interobserver agreement (IOA):

$$\frac{\text{Agreements}}{\text{Agreements} + \text{Disagreement}} \times 100 = \text{Percent of Agreement}$$

Appendix N

Data Collection Form

Participant's Name: _____ Intervention Phase: _____

Probe #: _____ Length of the Probe (Minutes): _____

Requesting Academic Accommodations

Target Behavior	Demonstrated			
<p>1. Greet instructor - ✓ Participant verbally stated a greeting such as "hello, good morning, or good afternoon".</p> <p>Comments: _____ _____ _____</p>	Detailed Response 3	Acceptable Response 2	Unacceptable Response 1	No Response 0
<p>2. Introduce yourself ✓ Participant introduced self by name (participant verbally stated first and last name). and ✓ Refer to specific class- Student verbally stated the name of the class, class number, and section.</p> <p>Comments: _____ _____ _____</p>	Detailed Response 3	Acceptable Response 2	Unacceptable Response 1	No Response 0

	<p>No Response – participant did not verbally respond or demonstrate the target behavior.</p>								
<p>3. Reference discussion</p> <p>✓ Participant refers to the reason for the discussion</p> <p>Comments:</p> <hr/> <hr/> <hr/> <hr/>	<table border="0"> <tr> <td>Detailed Response</td> <td>Acceptable Response</td> <td>Unacceptable Response</td> <td>No Response</td> </tr> <tr> <td>3</td> <td>2</td> <td>1</td> <td>0</td> </tr> </table> <p>Detailed Response – participant verbally makes reference to the reason for the discussion.</p> <p>Acceptable Response – participant initiates the discussion but does not verbally make reference to the reason for the discussion.</p> <p>Unacceptable Response - participant does not reference the reason for the discussion or uses inappropriate language, gestures, or slang.</p> <p>No Response – participant did not verbally respond or demonstrate the target behavior.</p>	Detailed Response	Acceptable Response	Unacceptable Response	No Response	3	2	1	0
Detailed Response	Acceptable Response	Unacceptable Response	No Response						
3	2	1	0						
<p>4. Identify disability status -</p> <p>✓ Participant makes a general statement about his or her disability (e.g., I have a learning disability or I have attention deficit disorder).</p> <p>Comments:</p> <hr/> <hr/> <hr/> <hr/>	<table border="0"> <tr> <td>Detailed Response</td> <td>Acceptable Response</td> <td>Unacceptable Response</td> <td>No Response</td> </tr> <tr> <td>3</td> <td>2</td> <td>1</td> <td>0</td> </tr> </table> <p>Detailed Response – participant verbally makes a general statement identifying the proper name of the disability (e. g., I have a learning disability).</p> <p>Acceptable Response – participant verbally makes a general statement but identifies the disability by using an acronym (e. g., I have LD).</p> <p>Unacceptable Response – participant verbally makes a general statement but does not clearly identify the disability status or uses inappropriate language, gestures, or slang.</p> <p>No Response – participant does not verbally respond or demonstrate the target behavior.</p>	Detailed Response	Acceptable Response	Unacceptable Response	No Response	3	2	1	0
Detailed Response	Acceptable Response	Unacceptable Response	No Response						
3	2	1	0						

<p>5. Explain needs in functional terms -</p> <p>✓ Participant makes a verbal statement that explains how the disability affects him/her (e.g., As a result of my disability, it is difficult for me to take notes as thoroughly as I need).</p> <p>Comment:</p> <hr/> <hr/> <hr/> <hr/>	<table border="0"> <tr> <td>Detailed Response</td> <td>Acceptable Response</td> <td>Unacceptable Response</td> <td>No Response</td> </tr> <tr> <td>3</td> <td>2</td> <td>1</td> <td>0</td> </tr> </table> <p>Detailed Response – participant verbally explains how the disability affects him or her.</p> <p>Acceptable Response – participant verbally makes a general statement about his or her needs but does not explain needs in functional terms.</p> <p>Unacceptable Response – participant does not verbally make a general statement nor explain needs in functional terms or uses inappropriate language, gestures, or slang.</p> <p>No Response – participant does not verbally respond or demonstrate the target behavior.</p>	Detailed Response	Acceptable Response	Unacceptable Response	No Response	3	2	1	0
Detailed Response	Acceptable Response	Unacceptable Response	No Response						
3	2	1	0						
<p>6. Mentions previous accommodations -</p> <p>✓ Participant makes a verbal statement identifying the accommodation (s) used in a previous course (e.g., I have used a note taker in my other classes or I have learned that using a tape recorder helps me review the lectures).</p> <p><i>If the participant did not receive an academic accommodation in the past, he/she makes a comment such as:</i></p> <p>✓ If I had the opportunity to receive an accommodation, I think having a note taker would have helped me.</p> <p>Comment:</p> <hr/> <hr/> <hr/> <hr/>	<table border="0"> <tr> <td>Detailed Response</td> <td>Acceptable Response</td> <td>Unacceptable Response</td> <td>No Response</td> </tr> <tr> <td>3</td> <td>2</td> <td>1</td> <td>0</td> </tr> </table> <p>Detailed Response – participant makes a verbal statement identifying the previous accommodations and the specific course where the accommodations were used.</p> <p>Acceptable Response – participant verbally mentions the accommodations but does not mention the specific course but makes a general reference to the course where the accommodations were used.</p> <p>Unacceptable Response – participant does not mention the use of previous accommodations nor the course where the accommodations were used or uses inappropriate language, gestures, or slang.</p> <p>No Response – participant does not verbally respond or demonstrate the target behavior.</p>	Detailed Response	Acceptable Response	Unacceptable Response	No Response	3	2	1	0
Detailed Response	Acceptable Response	Unacceptable Response	No Response						
3	2	1	0						

<p>5. Explain benefits of past accommodations -</p> <p>✓ Participant explains the benefit of the accommodation in class (e. g., This [note taker] helped me keep up with the lecture, and I was more certain that I am receiving accurate notes when I study or This [tape recorder] makes it easier for me to review what was discussed in class).</p> <p><i>If the participant did not receive an academic accommodation in the past, he/she makes a comment such as:</i></p> <p>If I had a note taker, I think it would have helped me score better on my tests and quizzes.</p> <p>Comment:</p> <hr/> <hr/> <hr/> <hr/>	<table border="0"> <tr> <td>Detailed Response</td> <td>Acceptable Response</td> <td>Unacceptable Response</td> <td>No Response</td> </tr> <tr> <td>3</td> <td>2</td> <td>1</td> <td>0</td> </tr> </table> <p>Detailed Response – participant verbally mentions the specific accommodation and explains how he/she benefited from the accommodation.</p> <p>Acceptable Response – participant verbally explained the benefit but does not specifically mention the accommodation.</p> <p>Unacceptable Response – participant does not verbally explain the benefit of the accommodation or uses inappropriate language, gestures, or slang.</p> <p>No Response – participant does not verbally respond or demonstrate the target behavior.</p>	Detailed Response	Acceptable Response	Unacceptable Response	No Response	3	2	1	0
Detailed Response	Acceptable Response	Unacceptable Response	No Response						
3	2	1	0						
<p>6. Request use of accommodation -</p> <p>✓ Participant states that he/she thinks the accommodation would be helpful in this class (e.g., I think having a note taker would be helpful as well or I would like to use a tape recorder in your class).</p> <p>Comment:</p> <hr/> <hr/> <hr/> <hr/>	<table border="0"> <tr> <td>Detailed Response</td> <td>Acceptable Response</td> <td>Unacceptable Response</td> <td>No Response</td> </tr> <tr> <td>3</td> <td>2</td> <td>1</td> <td>0</td> </tr> </table> <p>Detailed Response – participant verbally requests the use of a specific accommodation.</p> <p>Acceptable Response – participant verbally makes a general request for the use of an accommodation but does not mention a specific accommodation.</p> <p>Unacceptable Response – participant does not verbally request an accommodation or uses inappropriate language, gestures, or slang.</p> <p>No Response – participant does not verbally respond or demonstrate the target behavior.</p>	Detailed Response	Acceptable Response	Unacceptable Response	No Response	3	2	1	0
Detailed Response	Acceptable Response	Unacceptable Response	No Response						
3	2	1	0						
<p>7. Identify resources and how they help -</p> <p>✓ Participant verbally states who or what office</p>	<table border="0"> <tr> <td>Detailed Response</td> <td>Acceptable Response</td> <td>Unacceptable Response</td> <td>No Response</td> </tr> <tr> <td>3</td> <td>2</td> <td>1</td> <td>0</td> </tr> </table>	Detailed Response	Acceptable Response	Unacceptable Response	No Response	3	2	1	0
Detailed Response	Acceptable Response	Unacceptable Response	No Response						
3	2	1	0						

<p>will be able to assist in providing an accommodation (e.g., The Special Education Office).</p> <p>Comment:</p> <hr/> <hr/> <hr/>	<p style="text-align: center;">3 2 1 0</p> <p>Detailed Response – participant verbally identifies resources and states how the specific resources would be a benefit.</p> <p>Acceptable Response – participant verbally identifies resources but does not state how the resources would be a benefit.</p> <p>Unacceptable Response – participant’s verbal statement about resources is vague or the benefits of the resources are not clearly communicated or use inappropriate language, gestures, or slang.</p> <p>No Response – participant does not verbally respond or demonstrate the target behavior.</p>
<p>8. Explain what you will do -</p> <p>✓ Participant verbally states what his/her responsibility for implementing the accommodation (e.g., I will make arrangements for the reader to meet me at the classroom on the day of the test).</p> <p>Comment:</p> <hr/> <hr/> <hr/>	<p style="text-align: center;">Detailed Acceptable Unacceptable No Response Response Response Response</p> <p style="text-align: center;">Response</p> <p style="text-align: center;">3 2 1 0</p> <p>Detailed Response – participant makes a specific verbal statement outlining his/her responsibility for the accommodation implementation.</p> <p>Acceptable Response – participant makes a verbal statement about his or her responsibility for implementing the accommodation but is not specific about the accommodation implementation.</p> <p>Unacceptable Response – participant makes a verbal statement but the explanation of the accommodation implementation is not clear or uses inappropriate language, gestures, or slang.</p> <p>No Response – participant does not verbally respond or demonstrate the target behavior.</p>
<p>9. Ask for agreement -</p> <p>✓ Participant asks the instructor if the accommodation plan sounds agreeable (e.g., Do these suggestions sound alright to you? or</p>	<p style="text-align: center;">Detailed Acceptable Unacceptable No Response Response Response Response</p> <p style="text-align: center;">Response</p> <p style="text-align: center;">3 2 1 0</p>

<p>Does this seem like a workable plan to you?).</p> <p>Comment:</p> <hr/> <hr/> <hr/> <hr/>	<p>Detailed Response – participant verbally asks the instructor for agreement to the accommodation plan.</p> <p>Acceptable Response – participant verbally asks the instructor for agreement but does not reference the accommodation plan.</p> <p>Unacceptable Response – participant makes a general statement but does not specifically ask for agreement to the accommodation plan or uses inappropriate language, gestures, or slang.</p> <p>No Response – participant does not verbally respond or demonstrate the target behavior.</p>								
<p>10. Affirm agreement -</p> <p>✓ Participant verbally responds to the instructor’s agreement with an affirmative statement (e.g., good or okay).</p> <p>Comment:</p> <hr/> <hr/> <hr/> <hr/>	<table border="0"> <tr> <td>Detailed Response</td> <td>Acceptable Response</td> <td>Unacceptable Response</td> <td>No Response</td> </tr> <tr> <td>3</td> <td>2</td> <td>1</td> <td>0</td> </tr> </table> <p>Detailed Response – participant makes a verbal statement affirming agreement to the instructor’s statement.</p> <p>Acceptable Response – participant affirms agreement with body language (e. g., nodding head).</p> <p>Unacceptable Response – participant makes a vague statement or uses inappropriate language, gestures, or slang.</p> <p>No Response – participant does not verbally respond or demonstrate the target behavior.</p>	Detailed Response	Acceptable Response	Unacceptable Response	No Response	3	2	1	0
Detailed Response	Acceptable Response	Unacceptable Response	No Response						
3	2	1	0						
<p>11. Restate accommodations -</p> <p>✓ Participant verbally states the solution (accommodation). (e.g., Good, I’ll plan to use a note taker in class and a reader when I take a test or great, I will plan to use a reader on test days).</p> <p>Comment:</p> <hr/> <hr/> <hr/> <hr/>	<table border="0"> <tr> <td>Detailed Response</td> <td>Acceptable Response</td> <td>Unacceptable Response</td> <td>No Response</td> </tr> <tr> <td>3</td> <td>2</td> <td>1</td> <td>0</td> </tr> </table> <p>Detailed Response – participant verbally restates the accommodation and states when or how the accommodation will be used.</p> <p>Acceptable Response – participant verbally</p>	Detailed Response	Acceptable Response	Unacceptable Response	No Response	3	2	1	0
Detailed Response	Acceptable Response	Unacceptable Response	No Response						
3	2	1	0						

<hr/>	<p>restates the accommodation but does not state when or how the accommodation will be used.</p> <p>Unacceptable Response – participant makes a vague statement about the accommodation and does not state when or how the accommodation will be used or uses inappropriate language, gestures, or slang.</p> <p>No Response – participant does not verbally respond or demonstrate the target behavior.</p>								
<p>12. Clarify your role -</p> <p>✓ Participant verbally states what he/she will do to arrange for the accommodations to take place (e.g., I will contact the Special Education Department and take care of scheduling a reader on test days. I'll also have them contact you about a note taker).</p> <p>Comment:</p> <hr/> <hr/> <hr/>	<table border="0"> <tr> <td>Detailed Response</td> <td>Acceptable Response</td> <td>Unacceptable Response</td> <td>No Response</td> </tr> <tr> <td>3</td> <td>2</td> <td>1</td> <td>0</td> </tr> </table> <p>Detailed Response – participant verbally clarifies his/her role and clarifies instructor's role.</p> <p>Acceptable Response – participant verbally clarifies his role or the instructor's role.</p> <p>Unacceptable Response – participant verbally makes a general statement but does not clarify the student or instructor's role or uses inappropriate language, gestures, or slang.</p> <p>No Response – participant does not verbally respond or demonstrate the target behavior.</p>	Detailed Response	Acceptable Response	Unacceptable Response	No Response	3	2	1	0
Detailed Response	Acceptable Response	Unacceptable Response	No Response						
3	2	1	0						
<p>13. Clarify instructor's role</p> <p>✓ Participant specifically states what action the teacher needs to take (e. g., you will help me identify a student in the class who will let me make copies of class notes).</p> <p style="padding-left: 40px;">If the teacher does not need to do anything more, student makes a statement such as:</p> <p style="padding-left: 40px;">I guess that will take care of everything, I don't think that it will be necessary for you to be involved further or I will let you know if there are any problems but I guess that is all for now.</p> <p>Comments:</p>	<table border="0"> <tr> <td>Detailed Response</td> <td>Acceptable Response</td> <td>Unacceptable Response</td> <td>No Response</td> </tr> <tr> <td>3</td> <td>2</td> <td>1</td> <td>0</td> </tr> </table> <p>Detailed Response – participant specifically states what action the teacher will take or if no action is required of the teacher then the participant verbally states that no action is required.</p> <p>Acceptable Response – participant verbally states what action is required of the teacher</p>	Detailed Response	Acceptable Response	Unacceptable Response	No Response	3	2	1	0
Detailed Response	Acceptable Response	Unacceptable Response	No Response						
3	2	1	0						

<hr/> <hr/> <hr/>	<p>but is not specific.</p> <p>Unacceptable Response – participant uses inappropriate, language, gestures, or slang.</p> <p>No Response – participant does not verbally respond or demonstrate the target behavior.</p>												
<p>14. Close with positive statement -</p> <p>✓ Student makes a general statement (e.g., I'm looking forward to your class).</p> <p>Comment:</p> <hr/> <hr/> <hr/> <hr/>	<table border="0"> <tr> <td>Detailed Response</td> <td>Acceptable Response</td> <td>Unacceptable Response</td> <td>No Response</td> </tr> <tr> <td>Response</td> <td></td> <td></td> <td></td> </tr> <tr> <td>3</td> <td>2</td> <td>1</td> <td>0</td> </tr> </table> <p>Detailed Response – participant verbally makes a general positive statement.</p> <p>Acceptable Response – participant's body language is positive (e. g., smiles, nods affirmatively) but does not verbally make a general positive statement.</p> <p>Unacceptable Response – participant makes a negative statement or uses inappropriate language, gestures, or slang.</p> <p>No Response – participant did not answer, reply, or demonstrate the target behavior.</p>	Detailed Response	Acceptable Response	Unacceptable Response	No Response	Response				3	2	1	0
Detailed Response	Acceptable Response	Unacceptable Response	No Response										
Response													
3	2	1	0										
<p>15. Express appreciation</p> <p>✓ Participant makes a verbal statement expressing his or her appreciation (e. g., thanks for your help or I appreciate your help).</p> <p>Comment:</p> <hr/> <hr/> <hr/> <hr/> <p>Number of Correctly Demonstrated Steps: _____</p> <p>Total Steps in Intervention Phase: _____</p>	<table border="0"> <tr> <td>Detailed Response</td> <td>Acceptable Response</td> <td>Unacceptable Response</td> <td>No Response</td> </tr> <tr> <td>Response</td> <td></td> <td></td> <td></td> </tr> <tr> <td>3</td> <td>2</td> <td>1</td> <td>0</td> </tr> </table> <p>Detailed Response – participant verbally makes a statement expressing appreciation.</p> <p>Acceptable Response – participant's bodily language express appreciation (e. g., smiles, nods affirmatively) but does not verbally express appreciation.</p> <p>Unacceptable Response – participant does not express appreciation or uses inappropriate language, gestures, or slang.</p> <p>No Response – participant does not verbally respond or demonstrate the target behavior.</p>	Detailed Response	Acceptable Response	Unacceptable Response	No Response	Response				3	2	1	0
Detailed Response	Acceptable Response	Unacceptable Response	No Response										
Response													
3	2	1	0										

Appendix O

Role-Play Scenarios

Alejandro Role Plays

Accommodation – Extended time on Tests

Role-play #1:

You are a student at the _____ School who has a specific learning disability. An accommodation on your Individualized Education Program (IEP) is that you receive **extended time** on tests. You approach **Mr. Wilson** your **TV Production I** teacher and request an accommodation of extend time for your upcoming test in your **TV Production I** class.

Accommodation – Use of a Calculator

Role-play #2:

You are a student at the _____ School who has a specific learning disability. An accommodation on your Individualized Education Program (IEP) is that you are allowed to use a calculator to complete class assignments. You approach **Ms. Johnson** your **Algebra II** teacher and request an accommodation to use a calculator for your class assignments in your **Algebra II** class.

Accommodation – Note-Taker

Role-play #3:

You are a student at the _____ School who has a specific learning disability. An accommodation on your Individualized Education Program (IEP) is that you receive note-taking support in class as needed. You approach **Mr. Patrick** your **English** teacher and request an accommodation for note-taking support in your **English** class.

Accommodation – Multiple or Frequent Breaks

Role-play #4:

You are a student at the _____ School who has a specific learning disability. An accommodation on your Individualized Education Program (IEP) is that you receive **breaks** in class as needed. You approach **Mr. Wilson** your **TV Production I** teacher and request an accommodation for breaks in your **TV Production I** class.

Carlos Role Plays

Accommodation – Note-Taker

Role-play #1:

You are a student at the _____ School who has a specific learning disability. An accommodation on your Individualized Education Program (IEP) is that you receive note-taking support in class as needed. You approach **Mr. Wilson** your **TV Production** teacher and request an accommodation for note-taking support in your **TV Production** class.

Accommodation – Access to a Human Reader (read on demand)

Role-play #2:

You are a student at the _____ School who has a specific learning disability. An accommodation on your Individualized Education Program (IEP) is that you have access to a human reader (read on demand accommodation). You approach **Mr. Wilson** your **TV Production** teacher and request the read on demand accommodation for tests in your **TV Production** class.

Accommodation – Graphic Organizer

Role-play #3:

You are a student at the _____ School who has a specific learning disability. An accommodation on your Individualized Education Program (IEP) is that you will be provided access to graphic organizers to assist you with organization. You approach **Mr. Patrick** your English 12 teacher and request an accommodation for a graphic organizer for class assignments in your **English 12** class.

Accommodation – Multiple or Frequent Breaks

Role-play #4:

You are a student at the _____ School who has a specific learning disability. An accommodation on your Individualized Education Program (IEP) is that you receive **breaks** in class as needed. You approach **Mr. Wilson** your **TV Production** teacher and request an accommodation for breaks in your **TV Production** class.

Elvis Role Plays

Accommodation – Use of a Calculator

Role-play #1:

You are a student at the _____ School who has a specific learning disability. An accommodation on your Individualized Education Program (IEP) is that you can use a calculator in class. You approach **Mr. Bembridge** your **Probability and Statistics** teacher and request an accommodation for the use of a calculator in your **Probability and Statistics** class.

Accommodation – Access to a Human Reader (read on demand)

Role-play #2:

You are a student at the _____ School who has a specific learning disability. An accommodation on your Individualized Education Program (IEP) is that you have access to a human reader (read on demand accommodation). You approach **Mr. Bembridge** your **Probability and Statistics** teacher and request the read on demand accommodation for tests in your **Probability and Statistics** class.

Accommodation – Graphic Organizer

Role-play #3:

You are a student at the _____ School who has a specific learning disability. An accommodation on your Individualized Education Program (IEP) is that you will be provided access to graphic organizers to assist you with organization. You approach **Mr. Patrick** your English 12 teacher and request an accommodation for a graphic organizer for class assignments in your **English 12** class.

Accommodation – Preferential Seating

Role-play #4:

You are a student at the _____ School who has a specific learning disability. An accommodation on your Individualized Education Program (IEP) is that you receive **preferential seating** in class. You approach **Mr. Bembridge** your **Probability and Statistics** teacher and request an accommodation for preferential seating in your **Probability and Statistics** class.

India Role Plays

Accommodation – Use of a Calculator

Role-play #1:

You are a student at the _____ School who has a specific learning disability. An accommodation on your Individualized Education Program (IEP) is that you are allowed to use a calculator to complete class assignments. You approach **Ms. Johnson** your **Algebra II** teacher and request an accommodation to use a calculator for your class assignments in your **Algebra II** class.

Accommodation – Access to a Human Reader (read on demand)

Role-play #2:

You are a student at the _____ School who has a specific learning disability. An accommodation on your Individualized Education Program (IEP) is that you have access to a human reader (read on demand accommodation). You approach **Ms. Johnson** your **Algebra II** teacher and request the read on demand accommodation for assignments or tests in your **Algebra II** class.

Accommodation – Text-to-speech-software

Role-play #3:

You are a student at the _____ School who has a specific learning disability. An accommodation on your Individualized Education Program (IEP) is that you have access to text-to-speech-software for class assignments. You approach **Mr. Patrick** your **English 12** teacher and request to use the text-to-speech software for your class assignments in your **English 12** class.

Accommodation – Reduced Distractions

Role-play #4:

You are a student at the _____ School who has a specific learning disability. An accommodation on your Individualized Education Program (IEP) is that you have reduced distractions in class. You approach **Mr. Patrick** your **English 12** teacher and request an accommodation for reduced distractions in your **English 12** class.

Jay Role Plays

Accommodation – Extended time on Assignments

Role-play #1:

You are a student at the _____ School who has a specific learning disability. An accommodation on your Individualized Education Program (IEP) is that you receive **extended time** on class assignments. You approach **Mr. Goldman** your **Information Systems Management** teacher and request an accommodation of extend time for your class assignments in your **Information Systems Management** class.

Accommodation – Extended time on Tests

Role-play #2:

You are a student at the _____ School who has a specific learning disability. An accommodation on your Individualized Education Program (IEP) is that you receive **extended time** on tests. You approach **Mr. Goldman** your **Information Systems Management** teacher and request an accommodation of extend time for your upcoming test in your **Information Systems Management** class.

Accommodation – Multiple or Frequent Breaks

Role-play #3:

You are a student at the _____ School who has a specific learning disability. An accommodation on your Individualized Education Program (IEP) is that you receive **breaks in** class as needed. You approach **Mr. Goldman** your **Information Systems Management** teacher and request an accommodation for breaks in your **Information Systems Management** class.

Accommodation – Preferential Seating

Role-play #4:

You are a student at the _____ School who has a specific learning disability. An accommodation on your Individualized Education Program (IEP) is that you receive **preferential seating** in class. You approach **Mr. Goldman** your **Information Systems Management** teacher and request an accommodation for **preferential seating** in your **Information Systems Management** class.

Appendix P

Interview Questions

Name: _____ **Date:** _____

1. What is your grade level (must be a sophomore, junior, or senior to participate in this study)?
2. What is your disability (must have a specific learning disability to participate in this study)?
3. What is your grade point average (must have at least a 2.0 grade point average on a 4.0 scale in order to participate in this study)?
4. Do you have an individualized education plan (IEP)?
5. What have been your experience requesting academic accommodations?
6. What are your plans after high school (must have the intent on going to college in order to participate in this study)?
7. What college or university do you plan to attend?
8. What do you plan to study?

Appendix Q

Social Validity Data Collected from Teachers

Carlos

APPENDIX E: Teacher Feedback on Role-Play Form

Directions: Please provide feedback on the participant's role-plays by completing the entire form.

Role-play #1

1. The student was polite when he/she approached to request accommodations or modifications.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

2. The student clearly explained his/her disability and the accommodations or modifications that were needed.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

was hesitant and had difficulty with ~~the~~ explaining needs but got better as he went along

3. Based on the students approach and explanation, I would grant the accommodation or modification request.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

Role-play #2

1. The student was polite when he/she approached to request accommodations or modifications.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

2. The student clearly explained his/her disability and the accommodations or modifications that were needed.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

3. Based on the students approach and explanation, I would grant the accommodation or modification request.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

Modified from Walker, 2007

Alexandro

APPENDIX E: Teacher Feedback on Role-Play Form

Directions: Please provide feedback on the participant's role-plays by completing the entire form.

Role-play #1

1. The student was polite when he/she approached to request accommodations or modifications.

Strongly Disagree Disagree Neutral Agree Strongly Agree

1 2 3 4 5

Comments:

Forgot to say name

2. The student clearly explained his/her disability and the accommodations or modifications that were needed.

Strongly Disagree Disagree Neutral Agree Strongly Agree

1 2 3 4 5

Comments:

3. Based on the students approach and explanation, I would grant the accommodation or modification request.

Strongly Disagree Disagree Neutral Agree Strongly Agree

1 2 3 4 5

Comments:

Role-play #2

1. The student was polite when he/she approached to request accommodations or modifications.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

2. The student clearly explained his/her disability and the accommodations or modifications that were needed.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

Did a good job explaining how the use of a calculator would be beneficial

3. Based on the students approach and explanation, I would grant the accommodation or modification request.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

Did much better the second time

Modified from Walker, 2007

India

APPENDIX E: Teacher Feedback on Role-Play Form

Directions: Please provide feedback on the participant's role-plays by completing the entire form.

Role-play #1

1. The student was polite when he/she approached to request accommodations or modifications.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

2. The student clearly explained his/her disability and the accommodations or modifications that were needed.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

3. Based on the students approach and explanation, I would grant the accommodation or modification request.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

Role-play #2

1. The student was polite when he/she approached to request accommodations or modifications.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

2. The student clearly explained his/her disability and the accommodations or modifications that were needed.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

Further clarification needed on how to provide this accommodation.

3. Based on the students approach and explanation, I would grant the accommodation or modification request.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

Modified from Walker, 2007

Teacher

Jay

APPENDIX D: Special Education Coordinator Feedback on Role-Play Form

Directions: Please provide feedback on the participant's role-plays by completing the entire form.

Role Play #1

- 1. The student was polite when he/she approached to request accommodations or modifications.

Strongly Disagree 1 2 3 4 5 Strongly Agree

Comments:

- 2. The student clearly explained his/her disability and the accommodations or modifications that were needed.

Strongly Disagree 1 2 3 4 5 Strongly Agree

Comments:

- 3. Based on the students approach and explanation, I would grant the accommodation or modification request.

Strongly Disagree 1 2 3 4 5 Strongly Agree

Comments:

Role-play #2

1. The student was polite when he/she approached to request accommodations or modifications.

Strongly Disagree Disagree Neutral Agree Strongly Agree

1 2 3 4 5

Comments:

2. The student clearly explained his/her disability and the accommodations or modifications that were needed.

Strongly Disagree Disagree Neutral Agree Strongly Agree

1 2 3 4 5

Comments:

3. Based on the students approach and explanation, I would grant the accommodation or modification request.

Strongly Disagree Disagree Neutral Agree Strongly Agree

1 2 3 4 5

Comments:

Modified from Walker, 2007

Elvis

APPENDIX E: Teacher Feedback on Role-Play Form

Directions: Please provide feedback on the participant's role-plays by completing the entire form.

Role-play #1

1. The student was polite when he/she approached to request accommodations or modifications.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments: Forgot handshake.

2. The student clearly explained his/her disability and the accommodations or modifications that were needed.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments: Got a little confused.

3. Based on the students approach and explanation, I would grant the accommodation or modification request.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments: Explained it but not quite well.

Role-play #2

1. The student was polite when he/she approached to request accommodations or modifications.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments: Forgot handshake.

2. The student clearly explained his/her disability and the accommodations or modifications that were needed.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments: Had some trouble but did better.

3. Based on the students approach and explanation, I would grant the accommodation or modification request.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments: Did better this time, but had trouble knowing where to correct

Modified from Walker, 2007

Appendix R

Social Validity Data Collected from Administrator

Carlos

APPENDIX D: Special Education Coordinator Feedback on Role-Play Form

Directions: Please provide feedback on the participant's role-plays by completing the entire form.

Role Play #1

1. The student was polite when he/she approached to request accommodations or modifications.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

2. The student clearly explained his/her disability and the accommodations or modifications that were needed.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

He struggled with the 1st role play w/ remembering the steps in self-advocating about his accommodations. He did better on the second round.

3. Based on the student's approach and explanation, I would grant the accommodation or modification request.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

I would grant the accommodations.

Role-play #2

1. The student was polite when he/she approached to request accommodations or modifications.

Strongly Disagree Disagree Neutral Agree Strongly Agree

1 2 3 4 5

Comments:

2. The student clearly explained his/her disability and the accommodations or modifications that were needed.

Strongly Disagree Disagree Neutral Agree Strongly Agree

1 2 3 4 5

Comments:

3. Based on the students approach and explanation, I would grant the accommodation or modification request.

Strongly Disagree Disagree Neutral Agree Strongly Agree

1 2 3 4 5

Comments:

Modified from Walker, 2007

Alejandro

APPENDIX D: Special Education Coordinator Feedback on Role-Play Form

Directions: Please provide feedback on the participant's role-plays by completing the entire form.

Role Play #1

1. The student was polite when he/she approached to request accommodations or modifications.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

2. The student clearly explained his/her disability and the accommodations or modifications that were needed.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

3. Based on the students approach and explanation, I would grant the accommodation or modification request.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

Role-play #2

1. The student was polite when he/she approached to request accommodations or modifications.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

2. The student clearly explained his/her disability and the accommodations or modifications that were needed.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

3. Based on the students approach and explanation, I would grant the accommodation or modification request.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

Modified from Walker, 2007

India

APPENDIX D: Special Education Coordinator Feedback on Role-Play Form

Directions: Please provide feedback on the participant's role-plays by completing the entire form.

Role Play #1

1. The student was polite when he/she approached to request accommodations or modifications.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

2. The student clearly explained his/her disability and the accommodations or modifications that were needed.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

3. Based on the students approach and explanation, I would grant the accommodation or modification request.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

Role-play #2

1. The student was polite when he/she approached to request accommodations or modifications.

Strongly Disagree Disagree Neutral Agree Strongly Agree

1 2 3 4 5

Comments:

2. The student clearly explained his/her disability and the accommodations or modifications that were needed.

Strongly Disagree Disagree Neutral Agree Strongly Agree

1 2 3 4 5

Comments:

3. Based on the students approach and explanation, I would grant the accommodation or modification request.

Strongly Disagree Disagree Neutral Agree Strongly Agree

1 2 3 4 5

Comments:

Modified from Walker, 2007

Jay

SPED CORV

APPENDIX E: ~~Teacher~~ Feedback on Role-Play Form

Directions: Please provide feedback on the participant's role-plays by completing the entire form.

Role-play #1

- 1. The student was polite when he/she approached to request accommodations or modifications.

Strongly Disagree Disagree Neutral Agree Strongly Agree

1 2 3 4 5

Comments:

- 2. The student clearly explained his/her disability and the accommodations or modifications that were needed.

Strongly Disagree Disagree Neutral Agree Strongly Agree

1 2 3 4 5

Comments:

- 3. Based on the students approach and explanation, I would grant the accommodation or modification request.

Strongly Disagree Disagree Neutral Agree Strongly Agree

1 2 3 4 5

Comments:

Role-play #2

1. The student was polite when he/she approached to request accommodations or modifications.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

2. The student clearly explained his/her disability and the accommodations or modifications that were needed.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

3. Based on the students approach and explanation, I would grant the accommodation or modification request.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

Modified from Walker, 2007

ELVIS

APPENDIX D: Special Education Coordinator Feedback on Role-Play Form

Directions: Please provide feedback on the participant's role-plays by completing the entire form.

Role Play #1

1. The student was polite when he/she approached to request accommodations or modifications.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

2. The student clearly explained his/her disability and the accommodations or modifications that were needed.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

3. Based on the students approach and explanation, I would grant the accommodation or modification request.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Comments:

Role-play #2

1. The student was polite when he/she approached to request accommodations or modifications.

Strongly Disagree Disagree Neutral Agree Strongly Agree

1 2 3 4 5

Comments:

2. The student clearly explained his/her disability and the accommodations or modifications that were needed.

Strongly Disagree Disagree Neutral Agree Strongly Agree

1 2 3 4 5

Comments:

3. Based on the students approach and explanation, I would grant the accommodation or modification request.

Strongly Disagree Disagree Neutral Agree Strongly Agree

1 2 3 4 5

Comments:

Modified from Walker, 2007

Appendix S

Social Validity Data Collected from Participants

APPENDIX F: Social Validity Feedback and Interview Form Survey

Student Name <u>Carlos</u>	School _____
Date <u>12/2/15</u>	Grade <u>12</u>

In this survey, the researchers are asking for feedback from you about how well you liked and learned from the Self-Advocacy instruction. Researchers also want to know ways you feel the instruction could be better.

Your feedback helps researchers and teachers improve self-advocacy instruction for students like you!

If you need any part of this survey read aloud or explained to you, please ask for that at any point when you are completing this survey.

There are four parts ...

Part 1: IEP Accommodations and Self-Advocacy Intervention

Directions: For each statement, put an X in the box that best matches your level of agreement with the statement.

Statement	1	2	3	4
	Strongly Disagree	Disagree	Agree	Strongly Agree
1. I know what is meant by accommodations on my IEP.	Strongly Disagree	Disagree	Agree	Strongly Agree
2. This self-advocacy intervention is the first time I've learned about how to request accommodations that are on my Individualized Education Program (IEP).	Strongly Disagree	Disagree	Agree	Strongly Agree
3. Through learning this self-advocacy intervention, I increased my awareness of accommodations on my IEP.	Strongly Disagree	Disagree	Agree	Strongly Agree
4. After learning this self-advocacy intervention, I have a clearer understanding about why I have accommodations identified on my IEP.	Strongly Disagree	Disagree	Agree	Strongly Agree
5. Prior to learning this self-advocacy intervention, I was already talking with my	Strongly Disagree	Disagree	Agree	Strongly Agree

instructors about accommodations from my IEP and using them.				
6. Prior to this self-advocacy intervention, I was not sure about what accommodations were on my IEP.	Strongly Disagree	Disagree	Agree	Strongly Agree
7. Prior to this self-advocacy intervention, I had a good way to talk with my instructors about accommodations for me in their class.	Strongly Disagree	Disagree	Agree	Strongly Agree
8. After learning this self-advocacy intervention, I believe I will be more effective in talking with instructors about accommodations I need in their classes.	Strongly Disagree	Disagree	Agree	Strongly Agree
9. After learning this self-advocacy intervention, I believe I can explain my disability and academic needs.	Strongly Disagree	Disagree	Agree	Strongly Agree
10. After learning this self-advocacy intervention, I am confident advocating for my academic needs.	Strongly Disagree	Disagree	Agree	Strongly Agree
11. After learning this self-advocacy intervention, I am more comfortable requesting academic accommodations than I did before I learned this intervention.	Strongly Disagree	Disagree	Agree	Strongly Agree
12. After learning this self-advocacy intervention, I am more likely to request academic accommodations.	Strongly Disagree	Disagree	Agree	Strongly Agree

Modified from Walker, 2007

Part 2: Importance of Self-Advocacy Behaviors

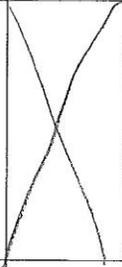
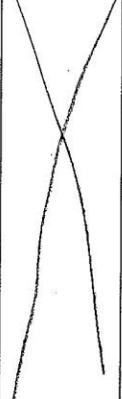
Directions: Rate the importance of each behavior you learned in the self-advocacy intervention.

	1	2	3	4	5
	Not Important	Slightly Important	M oderately Important	Important	Very Important
<i>Greet instructor?</i> – Student verbally states a greeting such as “hello, good morning or good afternoon.”				X	
<i>Introduce self?</i> - Student introduces self by name (student verbally states first and last name) and identifies the specific class he/she has with instructor (e.g., the name of the class, class number, and section).					X
<i>Tells reason for discussion?</i> Student states the reason for the discussion.					X
<i>Identify disability status?</i> – Student identifies his or her					X

disability (e.g., "I have a learning disability.")					
Explain needs in functional terms? – Student makes a verbal statement that explains how the disability affects him/her (e.g., "As a result of my disability, I need an accommodation for note-taking.")					
Identifies previous accommodations? – Student makes a verbal statement identifying the accommodation (s) used in one or more previous courses (e.g., "I have used a note taker in my other classes or I have learned that using a tape recorder helps me review lectures.")					
Explain benefits of past accommodations? – Student					

<p>explains the benefit of the accommodations used in the past (e.g., "Having a note taker enabled me to listen carefully during the lecture and I was more certain I had accurate and clear notes when I studied." or "The tape recorder allows me to review what was discussed in class.")</p>			
<p><i>Rationale for requesting use of accommodation?</i> – Student states the accommodation he/she needs to be successful in this class (e.g., Having a note taker enables me to review good notes more than one time after class session, which helps me learn the content." or "Using a tape recorder in this class enables me to listen</p>			

<p>to class content after the class session, which helps me learn the content.”)</p>					
<p>Identify resources (people)? Student verbally states who or what office will assist in providing an accommodation (e.g., the Special Education Office).</p>			X		
<p>Explain student's responsibility? – Student verbally states what his/her responsibility is for implementing the accommodation (e.g., “I will make arrangements for the reader to meet me at the classroom on the day of the test.”)</p>				X	
<p>Ask for agreement? – Student asks the instructor if the accommodation plan sounds agreeable (e.g., “Do</p>				X	

these suggestions sound alright to you?" or "Does this seem like a workable plan to you?")					
<i>Affirm agreement?</i> – Student verbally responds to the instructor’s agreement with an affirmative statement (e.g., “good” or “okay”)					
<i>Restate accommodations?</i> – Student verbally states the solution (accommodation). (e.g., “Good, I’ll plan to use a note taker in class and a reader when I take a test.” or “Great! I will plan to use a reader on test days.”)					
<i>Clarify his/her role?</i> – Student verbally states what he/she will do to arrange for the accommodations (e.g., “I will contact the Special Education Department and					

<p>take care of scheduling a reader on test days. I'll also have them contact you about a note taker.")</p>					
<p>Clarify instructor's role? – Student specifically states what action the teacher needs to take (e.g., "You will help me identify a student in the class who will let me make copies of class notes.") <i>If the teacher does not need to do anything more, student makes a statement such as:</i> "Based on what we've discussed about my accommodations, I don't think it's necessary for you to be further involved at this time. Do you agree?"</p>					
<p>Close with positive statement? – Student makes a general positive statement (e.g., "I'm looking forward to</p>					

your class.”)					
<i>Express appreciation?</i> – Student makes a verbal statement expressing his or her appreciation (e.g., “Thanks for your help” or “I appreciate your help.”)					

Which of the target behaviors did you like best?

tell them who I am because it the most important step

Which of the target behaviors did you like the least?

I didn't like the Restating Accommodation

Which of the target behaviors would you change?

Restating accommodation

Would you recommend this intervention to other students? Why or Why not?

yes, It is a good think to do while you in college.

APPENDIX F: Social Validity Feedback and Interview Form Survey

Student Name <i>Alejandro</i>	School _____
Date <i>12/2/15</i>	Grade <i>11th</i>

In this survey, the researchers are asking for feedback from you about how well you liked and learned from the Self-Advocacy instruction. Researchers also want to know ways you feel the instruction could be better.

Your feedback helps researchers and teachers improve self-advocacy instruction for students like you!

If you need any part of this survey read aloud or explained to you, please ask for that at any point when you are completing this survey.

There are four parts ...

Part 1: IEP Accommodations and Self-Advocacy Intervention

Directions: For each statement, put an X in the box that best matches your level of agreement with the statement.

Statement	1	2	3	4
	Strongly Disagree	Disagree	Agree	Strongly Agree
1. I know what is meant by accommodations on my IEP.	Strongly Disagree	Disagree	Agree	Strongly Agree
2. This self-advocacy intervention is the first time I've learned about how to request accommodations that are on my Individualized Education Program (IEP).	Strongly Disagree	Disagree	Agree	Strongly Agree
3. Through learning this self-advocacy intervention, I increased my awareness of accommodations on my IEP.	Strongly Disagree	Disagree	Agree	Strongly Agree
4. After learning this self-advocacy intervention, I have a clearer understanding about why I have accommodations identified on my IEP.	Strongly Disagree	Disagree	Agree	Strongly Agree
5. Prior to learning this self-advocacy intervention, I was already talking with my	Strongly Disagree	Disagree	Agree	Strongly Agree

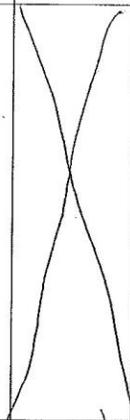
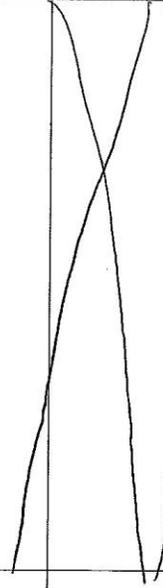
instructors about accommodations from my IEP and using them.				
6. Prior to this self-advocacy intervention, I was not sure about what accommodations were on my IEP.	Strongly Disagree	Disagree	Agree	Strongly Agree
7. Prior to this self-advocacy intervention, I had a good way to talk with my instructors about accommodations for me in their class.	Strongly Disagree	Disagree	Agree	Strongly Agree
8. After learning this self-advocacy intervention, I believe I will be more effective in talking with instructors about accommodations I need in their classes.	Strongly Disagree	Disagree	Agree	Strongly Agree
9. After learning this self-advocacy intervention, I believe I can explain my disability and academic needs.	Strongly Disagree	Disagree	Agree	Strongly Agree
10. After learning this self-advocacy intervention, I am confident advocating for my academic needs.	Strongly Disagree	Disagree	Agree	Strongly Agree
11. After learning this self-advocacy intervention, I am more comfortable requesting academic accommodations than I did before I learned this intervention.	Strongly Disagree	Disagree	Agree	Strongly Agree
12. After learning this self-advocacy intervention, I am more likely to request academic accommodations.	Strongly Disagree	Disagree	Agree	Strongly Agree

Modified from Walker, 2007

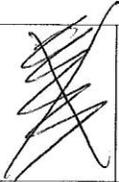
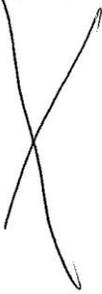
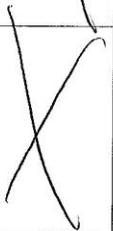
Part 2: Importance of Self-Advocacy Behaviors

Directions: Rate the importance of each behavior you learned in the self-advocacy intervention.

	1	2	3	4	5
	Not Important	Slightly Important	M oderately Important	Important	Very Important
<i>Greet instructor?</i> – Student verbally states a greeting such as “hello, good morning or good afternoon.”				X	
<i>Introduce self?</i> - Student introduces self by name (student verbally states first and last name) and identifies the specific class he/she has with instructor (e.g., the name of the class, class number, and section).					X
<i>Tells reason for discussion?</i> Student states the reason for the discussion.					X
<i>Identify disability status?</i> – Student identifies his or her					X

disability (e.g., "I have a learning disability.")					
<i>Explain needs in functional terms?</i> – Student makes a verbal statement that explains how the disability affects him/her (e.g., "As a result of my disability, I need an accommodation for note-taking.")					
<i>Identifies previous accommodations?</i> – Student makes a verbal statement identifying the accommodation (s) used in one or more previous courses (e.g., "I have used a note taker in my other classes or I have learned that using a tape recorder helps me review lectures.")					
<i>Explain benefits of past accommodations?</i> – Student					

<p>explains the benefit of the accommodations used in the past (e.g., "Having a note taker enabled me to listen carefully during the lecture and I was more certain I had accurate and clear notes when I studied." or "The tape recorder allows me to review what was discussed in class.")</p>					
<p><i>Rationale for requesting use of accommodation? –</i> Student states the accommodation he/she needs to be successful in this class (e.g., Having a note taker enables me to review good notes more than one time after class session, which helps me learn the content." or "Using a tape recorder in this class enables me to listen</p>					

to class content after the class session, which helps me learn the content.”)					
Identify resources (people)? Student verbally states who or what office will assist in providing an accommodation (e.g., the Special Education Office).					
Explain student's responsibility? – Student verbally states what his/her responsibility is for implementing the accommodation (e.g., “I will make arrangements for the reader to meet me at the classroom on the day of the test.”)					
Ask for agreement? – Student asks the instructor if the accommodation plan sounds agreeable (e.g., “Do					

these suggestions sound alright to you?" or "Does this seem like a workable plan to you?")					
<i>Affirm agreement?</i> – Student verbally responds to the instructor’s agreement with an affirmative statement (e.g., “good” or “okay”)			X		
<i>Restate accommodations?</i> – Student verbally states the solution (accommodation). (e.g., “Good, I’ll plan to use a note taker in class and a reader when I take a test.” or “Great! I will plan to use a reader on test days.”)					X
<i>Clarify his/her role?</i> – Student verbally states what he/she will do to arrange for the accommodations (e.g., “I will contact the Special Education Department and					X

these suggestions sound alright to you?" or "Does this seem like a workable plan to you?")					
<i>Affirm agreement?</i> – Student verbally responds to the instructor’s agreement with an affirmative statement (e.g., “good” or “okay”)			X		
<i>Restate accommodations?</i> – Student verbally states the solution (accommodation). (e.g., “Good, I’ll plan to use a note taker in class and a reader when I take a test.” or “Great! I will plan to use a reader on test days.”)					X
<i>Clarify his/her role?</i> – Student verbally states what he/she will do to arrange for the accommodations (e.g., “I will contact the Special Education Department and					X

your class.”)					
Express appreciation? – Student makes a verbal statement expressing his or her appreciation (e.g., “Thanks for your help” or “I appreciate your help.”)				X	

Which of the target behaviors did you like best?

The part where you explain why
you are here.

Which of the target behaviors did you like the least?

Which of the target behaviors would you change?

~~having to say you have~~ say once im
registered with the Special Education
Department.

Would you recommend this intervention to other students? Why or Why not?

Yes because you should have these
skills in life, you will always need them.
And this really helps you learn them

APPENDIX F: Social Validity Feedback and Interview Form Survey

Student Name <i>J. Medina</i>	School _____
Date <i>11/24/15</i>	Grade <i>12</i>

In this survey, the researchers are asking for feedback from you about how well you liked and learned from the Self-Advocacy instruction. Researchers also want to know ways you feel the instruction could be better.

Your feedback helps researchers and teachers improve self-advocacy instruction for students like you!

If you need any part of this survey read aloud or explained to you, please ask for that at any point when you are completing this survey.

There are four parts ...

Part 1: IEP Accommodations and Self-Advocacy Intervention

Directions: For each statement, put an X in the box that best matches your level of agreement with the statement.

Statement	1	2	3	4
	Strongly Disagree	Disagree	Agree	Strongly Agree
1. I know what is meant by accommodations on my IEP.	Strongly Disagree	Disagree	Agree	Strongly Agree
2. This self-advocacy intervention is the first time I've learned about how to request accommodations that are on my Individualized Education Program (IEP).	Strongly Disagree	Disagree	Agree	Strongly Agree
3. Through learning this self-advocacy intervention, I increased my awareness of accommodations on my IEP.	Strongly Disagree	Disagree	Agree	Strongly Agree
4. After learning this self-advocacy intervention, I have a clearer understanding about why I have accommodations identified on my IEP.	Strongly Disagree	Disagree	Agree	Strongly Agree
5. Prior to learning this self-advocacy intervention, I was already talking with my	Strongly Disagree	Disagree	Agree	Strongly Agree

instructors about accommodations from my IEP and using them.		X		
6. Prior to this self-advocacy intervention, I was not sure about what accommodations were on my IEP.	Strongly Disagree	Disagree	Agree	Strongly Agree
7. Prior to this self-advocacy intervention, I had a good way to talk with my instructors about accommodations for me in their class.	Strongly Disagree	X	Agree ED AM	Strongly Agree
8. After learning this self-advocacy intervention, I believe I will be more effective in talking with instructors about accommodations I need in their classes.	Strongly Disagree	Disagree	Agree	Strongly Agree
9. After learning this self-advocacy intervention, I believe I can explain my disability and academic needs.	Strongly Disagree	Disagree	Agree	Strongly Agree
10. After learning this self-advocacy intervention, I am confident advocating for my academic needs.	Strongly Disagree	Disagree	Agree	Strongly Agree
11. After learning this self-advocacy intervention, I am more comfortable requesting academic accommodations than I did before I learned this intervention.	Strongly Disagree	Disagree	Agree	Strongly Agree
12. After learning this self-advocacy intervention, I am more likely to request academic accommodations.	Strongly Disagree	Disagree	Agree	Strongly Agree

Modified from Walker, 2007

Part 2: Importance of Self-Advocacy Behaviors

Directions: Rate the importance of each behavior you learned in the self-advocacy intervention.

	1	2	3	4	5
	Not Important	Slightly Important	M oderately Important	Important	Very Important
<i>Greet instructor?</i> – Student verbally states a greeting such as “hello, good morning or good afternoon.”					X
<i>Introduce self?</i> - Student introduces self by name (student verbally states first and last name) and identifies the specific class he/she has with instructor (e.g., the name of the class, class number, and section).		X			
<i>Tells reason for discussion?</i> Student states the reason for the discussion.					X
<i>Identify disability status?</i> – Student identifies his or her					X

disability (e.g., "I have a learning disability.")					
Explain needs in functional terms? – Student makes a verbal statement that explains how the disability affects him/her (e.g., "As a result of my disability, I need an accommodation for note-taking.")			X		
Identifies previous accommodations? – Student makes a verbal statement identifying the accommodation (s) used in one or more previous courses (e.g., "I have used a note taker in my other classes or I have learned that using a tape recorder helps me review lectures.")		X			
Explain benefits of past accommodations? – Student		X			

<p>explains the benefit of the accommodations used in the past (e.g., "Having a note taker enabled me to listen carefully during the lecture and I was more certain I had accurate and clear notes when I studied." or "The tape recorder allows me to review what was discussed in class.")</p>					
<p><i>Rationale for requesting use of accommodation? –</i> Student states the accommodation he/she needs to be successful in this class (e.g., Having a note taker enables me to review good notes more than one time after class session, which helps me learn the content." or "Using a tape recorder in this class enables me to listen</p>				<p>X</p>	

to class content after the class session, which helps me learn the content.”)					
Identify resources (people)? Student verbally states who or what office will assist in providing an accommodation (e.g., the Special Education Office).			X		
Explain student's responsibility? – Student verbally states what his/her responsibility is for implementing the accommodation (e.g., “I will make arrangements for the reader to meet me at the classroom on the day of the test.”)					X
Ask for agreement? – Student asks the instructor if the accommodation plan sounds agreeable (e.g., “Do				X	

these suggestions sound alright to you?" or "Does this seem like a workable plan to you?")					
<i>Affirm agreement?</i> – Student verbally responds to the instructor’s agreement with an affirmative statement (e.g., “good” or “okay”)				X	
<i>Restate accommodations?</i> – Student verbally states the solution (accommodation). (e.g., “Good, I’ll plan to use a note taker in class and a reader when I take a test.” or “Great! I will plan to use a reader on test days.”)					X
<i>Clarify his/her role?</i> – Student verbally states what he/she will do to arrange for the accommodations (e.g., “I will contact the Special Education Department and					X

<p>take care of scheduling a reader on test days. I'll also have them contact you about a note taker.")</p>					
<p>Clarify instructor's role? – Student specifically states what action the teacher needs to take (e.g., "You will help me identify a student in the class who will let me make copies of class notes.") <i>If the teacher does not need to do anything more, student makes a statement such as:</i> "Based on what we've discussed about my accommodations, I don't think it's necessary for you to be further involved at this time. Do you agree?"</p>			X		
<p>Close with positive statement? – Student makes a general positive statement (e.g., "I'm looking forward to</p>		X			

your class.”)					
<i>Express appreciation?</i> – Student makes a verbal statement expressing his or her appreciation (e.g., “Thanks for your help” or “I appreciate your help.”)				X	

Which of the target behaviors did you like best?

I liked the stating ~~why~~ reason of discussion.

Which of the target behaviors did you like the least?

I dis liked telling the teacher if the needed to be involved or not.

Which of the target behaviors would you change?

I would change ~~using the~~ Using accomodation in the past.

Would you recommend this intervention to other students? Why or Why not?

Yes, I would recommend this to another student if they had trouble ~~showing~~ showing confidence.

APPENDIX F: Social Validity Feedback and Interview Form Survey

Student Name	Jay	School	
Date	11/24/15	Grade	12th

In this survey, the researchers are asking for feedback from you about how well you liked and learned from the Self-Advocacy instruction. Researchers also want to know ways you feel the instruction could be better.

Your feedback helps researchers and teachers improve self-advocacy instruction for students like you!

If you need any part of this survey read aloud or explained to you, please ask for that at any point when you are completing this survey.

There are four parts ...

Part 1: IEP Accommodations and Self-Advocacy Intervention

Directions: For each statement, put an X in the box that best matches your level of agreement with the statement.

Statement	1	2	3	4
	Strongly Disagree	Disagree	Agree	Strongly Agree
1. I know what is meant by accommodations on my IEP.	Strongly Disagree	Disagree	Agree	Strongly Agree
2. This self-advocacy intervention is the first time I've learned about how to request accommodations that are on my Individualized Education Program (IEP).	Strongly Disagree	Disagree	Agree	Strongly Agree
3. Through learning this self-advocacy intervention, I increased my awareness of accommodations on my IEP.	Strongly Disagree	Disagree	Agree	Strongly Agree
4. After learning this self-advocacy intervention, I have a clearer understanding about why I have accommodations identified on my IEP.	Strongly Disagree	Disagree	Agree	Strongly Agree
5. Prior to learning this self-advocacy intervention, I was already talking with my	Strongly Disagree	Disagree	Agree	Strongly Agree

instructors about accommodations from my IEP and using them.				
6. Prior to this self-advocacy intervention, I was not sure about what accommodations were on my IEP.	Strongly Disagree	Disagree	Agree	Strongly Agree
7. Prior to this self-advocacy intervention, I had a good way to talk with my instructors about accommodations for me in their class.	Strongly Disagree	Disagree	Agree	Strongly Agree
8. After learning this self-advocacy intervention, I believe I will be more effective in talking with instructors about accommodations I need in their classes.	Strongly Disagree	Disagree	Agree	Strongly Agree
9. After learning this self-advocacy intervention, I believe I can explain my disability and academic needs.	Strongly Disagree	Disagree	Agree	Strongly Agree
10. After learning this self-advocacy intervention, I am confident advocating for my academic needs.	Strongly Disagree	Disagree	Agree	Strongly Agree
11. After learning this self-advocacy intervention, I am more comfortable requesting academic accommodations than I did before I learned this intervention.	Strongly Disagree	Disagree	Agree	Strongly Agree
12. After learning this self-advocacy intervention, I am more likely to request academic accommodations.	Strongly Disagree	Disagree	Agree	Strongly Agree

Modified from Walker, 2007

Part 2: Importance of Self-Advocacy Behaviors

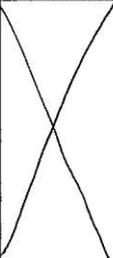
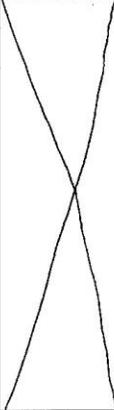
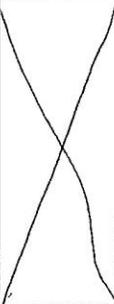
Directions: Rate the importance of each behavior you learned in the self-advocacy intervention.

	1	2	3	4	5
	Not Important	Slightly Important	M oderately Important	Important	Very Important
<i>Greet instructor?</i> – Student verbally states a greeting such as “hello, good morning or good afternoon.”					
<i>Introduce self?</i> - Student introduces self by name (student verbally states first and last name) and identifies the specific class he/she has with instructor (e.g., the name of the class, class number, and section).					
<i>Tells reason for discussion?</i> Student states the reason for the discussion.					
<i>Identify disability status?</i> – Student identifies his or her					

disability (e.g., "I have a learning disability.")					
<i>Explain needs in functional terms?</i> – Student makes a verbal statement that explains how the disability affects him/her (e.g., "As a result of my disability, I need an accommodation for note-taking.")					
<i>Identifies previous accommodations?</i> – Student makes a verbal statement identifying the accommodation (s) used in one or more previous courses (e.g., "I have used a note taker in my other classes or I have learned that using a tape recorder helps me review lectures.")					
<i>Explain benefits of past accommodations?</i> – Student					

<p>explains the benefit of the accommodations used in the past (e.g., "Having a note taker enabled me to listen carefully during the lecture and I was more certain I had accurate and clear notes when I studied." or "The tape recorder allows me to review what was discussed in class.")</p>					
<p><i>Rationale for requesting use of accommodation? –</i> Student states the accommodation he/she needs to be successful in this class (e.g., Having a note taker enables me to review good notes more than one time after class session, which helps me learn the content." or "Using a tape recorder in this class enables me to listen</p>					

to class content after the class session, which helps me learn the content.”)					
Identify resources (people)? Student verbally states who or what office will assist in providing an accommodation (e.g., the Special Education Office).					
Explain student's responsibility? – Student verbally states what his/her responsibility is for implementing the accommodation (e.g., “I will make arrangements for the reader to meet me at the classroom on the day of the test.”)					
Ask for agreement? – Student asks the instructor if the accommodation plan sounds agreeable (e.g., “Do					

these suggestions sound alright to you?" or "Does this seem like a workable plan to you?")					
<i>Affirm agreement?</i> – Student verbally responds to the instructor’s agreement with an affirmative statement (e.g., “good” or “okay”)					
<i>Restate accommodations?</i> – Student verbally states the solution (accommodation). (e.g., “Good, I’ll plan to use a note taker in class and a reader when I take a test.” or “Great! I will plan to use a reader on test days.”)					
<i>Clarify his/her role?</i> – Student verbally states what he/she will do to arrange for the accommodations (e.g., “I will contact the Special Education Department and					

<p>take care of scheduling a reader on test days. I'll also have them contact you about a note taker.")</p>					
<p>Clarify instructor's role? – Student specifically states what action the teacher needs to take (e.g., "You will help me identify a student in the class who will let me make copies of class notes.") <i>If the teacher does not need to do anything more, student makes a statement such as:</i> "Based on what we've discussed about my accommodations, I don't think it's necessary for you to be further involved at this time. Do you agree?"</p>					
<p>Close with positive statement? – Student makes a general positive statement (e.g., "I'm looking forward to</p>					

your class.”)					
<i>Express appreciation?</i> – Student makes a verbal statement expressing his or her appreciation (e.g., “Thanks for your help” or “I appreciate your help.”)			X		

Which of the target behaviors did you like best?

Identifying my learning disability and what are the accommodations I need.

Which of the target behaviors did you like the least?

Explaining the benefits and pass on my accommodations.

Which of the target behaviors would you change?

Explaining the benefits and pass on my accommodations.

Would you recommend this intervention to other students? Why or Why not?

Yes because if students graduate from high school they would need some tips and advice on doing well in college.

APPENDIX F: Social Validity Feedback and Interview Form Survey

Student Name <u>EVIS</u>	School _____
Date _____	Grade <u>17</u>

In this survey, the researchers are asking for feedback from you about how well you liked and learned from the Self-Advocacy instruction. Researchers also want to know ways you feel the instruction could be better.

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If you need any part of this survey read aloud or explained to you, please ask for that at any point when you are completing this survey.

There are four parts ...

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Directions: For each statement, put an X in the box that best matches your level of agreement with the statement.

Statement	1	2	3	4
	Strongly Disagree	Disagree	Agree	Strongly Agree
1. I know what is meant by accommodations on my IEP.	Strongly Disagree	Disagree	Agree	Strongly Agree X
2. This self-advocacy intervention is the first time I've learned about how to request accommodations that are on my Individualized Education Program (IEP).	Strongly Disagree	Disagree	Agree	Strongly Agree X
3. Through learning this self-advocacy intervention, I increased my awareness of accommodations on my IEP.	Strongly Disagree	Disagree	Agree	Strongly Agree X
4. After learning this self-advocacy intervention, I have a clearer understanding about why I have accommodations identified on my IEP.	Strongly Disagree	Disagree	Agree X	Strongly Agree
5. Prior to learning this self-advocacy intervention, I was already talking with my	Strongly Disagree	Disagree	Agree	Strongly Agree

instructors about accommodations from my IEP and using them.		X		
6. Prior to this self-advocacy intervention, I was not sure about what accommodations were on my IEP.	Strongly Disagree	Disagree	Agree	Strongly Agree
7. Prior to this self-advocacy intervention, I had a good way to talk with my instructors about accommodations for me in their class.	Strongly Disagree	Disagree	Agree	Strongly Agree
8. After learning this self-advocacy intervention, I believe I will be more effective in talking with instructors about accommodations I need in their classes.	Strongly Disagree	Disagree	Agree	Strongly Agree
9. After learning this self-advocacy intervention, I believe I can explain my disability and academic needs.	Strongly Disagree	Disagree	Agree	Strongly Agree
10. After learning this self-advocacy intervention, I am confident advocating for my academic needs.	Strongly Disagree	Disagree	Agree	Strongly Agree
11. After learning this self-advocacy intervention, I am more comfortable requesting academic accommodations than I did before I learned this intervention.	Strongly Disagree	Disagree	Agree	Strongly Agree
12. After learning this self-advocacy intervention, I am more likely to request academic accommodations.	Strongly Disagree	Disagree	Agree	Strongly Agree

Modified from Walker, 2007

Part 2: Importance of Self-Advocacy Behaviors

Directions: Rate the importance of each behavior you learned in the self-advocacy intervention.

	1	2	3	4	5
	Not Important	Slightly Important	M oderately Important	Important	Very Important
<i>Greet instructor?</i> – Student verbally states a greeting such as “hello, good morning or good afternoon.”				X	
<i>Introduce self?</i> - Student introduces self by name (student verbally states first and last name) and identifies the specific class he/she has with instructor (e.g., the name of the class, class number, and section).					X
<i>Tells reason for discussion?</i> Student states the reason for the discussion.					X
<i>Identify disability status?</i> – Student identifies his or her					X

disability (e.g., "I have a learning disability.")					
<i>Explain needs in functional terms?</i> – Student makes a verbal statement that explains how the disability affects him/her (e.g., "As a result of my disability, I need an accommodation for note-taking.")					X
<i>Identifies previous accommodations?</i> – Student makes a verbal statement identifying the accommodation (s) used in one or more previous courses (e.g., "I have used a note taker in my other classes or I have learned that using a tape recorder helps me review lectures.")					X
<i>Explain benefits of past accommodations?</i> – Student					X

<p>explains the benefit of the accommodations used in the past (e.g., “Having a note taker enabled me to listen carefully during the lecture and I was more certain I had accurate and clear notes when I studied.” or “The tape recorder allows me to review what was discussed in class.”)</p>				X	
<p><i>Rationale for requesting use of accommodation? –</i> Student states the accommodation he/she needs to be successful in this class (e.g., Having a note taker enables me to review good notes more than one time after class session, which helps me learn the content.” or “Using a tape recorder in this class enables me to listen</p>				X	

<p>to class content after the class session, which helps me learn the content.”)</p>					
<p>Identify resources (people)? Student verbally states who or what office will assist in providing an accommodation (e.g., the Special Education Office).</p>					
<p>Explain student's responsibility? – Student verbally states what his/her responsibility is for implementing the accommodation (e.g., “I will make arrangements for the reader to meet me at the classroom on the day of the test.”)</p>					
<p>Ask for agreement? – Student asks the instructor if the accommodation plan sounds agreeable (e.g., “Do</p>					

these suggestions sound alright to you?" or "Does this seem like a workable plan to you?")					X
<i>Affirm agreement?</i> – Student verbally responds to the instructor’s agreement with an affirmative statement (e.g., “good” or “okay”)					X
<i>Restate accommodations?</i> – Student verbally states the solution (accommodation). (e.g., “Good, I’ll plan to use a note taker in class and a reader when I take a test.” or “Great! I will plan to use a reader on test days.”)					X
<i>Clarify his/her role?</i> – Student verbally states what he/she will do to arrange for the accommodations (e.g., “I will contact the Special Education Department and					X

<p>take care of scheduling a reader on test days. I'll also have them contact you about a note taker.")</p>					X
<p>Clarify instructor's role? – Student specifically states what action the teacher needs to take (e.g., "You will help me identify a student in the class who will let me make copies of class notes.") <i>If the teacher does not need to do anything more, student makes a statement such as:</i> "Based on what we've discussed about my accommodations, I don't think it's necessary for you to be further involved at this time. Do you agree?"</p>					X
<p>Close with positive statement? – Student makes a general positive statement (e.g., "I'm looking forward to</p>					X

your class.”)					
Express appreciation? – Student makes a verbal statement expressing his or her appreciation (e.g., “Thanks for your help” or “I appreciate your help.”)					X

Which of the target behaviors did you like best?

I liked explaining my accommodations.

Which of the target behaviors did you like the least?

I liked them all.

Which of the target behaviors would you change?

I would not change any behaviors.

Would you recommend this intervention to other students? Why or Why not?

I would recommend this intervention to other students because it helps them get on the right path to succeed in college.

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Biography

Dwannal Wade McGahee has more than 12 years of experience in providing educational services to students with learning disabilities in classroom and work settings. He also has three years of experience as a secondary-transition teacher, providing transition support services to students with high- and low-incidence disabilities. He has taught students in multiple disability categories in both team-taught and special education self-contained classes. He has also taught general education courses. Dwannal graduated from Abbeville High School in Abbeville, AL, in 1983. He completed his Bachelor of Science degree in Journalism at Florida A&M University in Tallahassee, FL, and obtained his Master of Arts degree in Human Resource Management from Marymount University in Arlington, VA, and a Master of Arts degree in Teaching from Trinity University, in Washington, DC. Dwannal completed his doctoral studies in Special Education and Education Policy at George Mason University in Fairfax, VA, in December 2017. He is currently employed as a special education teacher with Fairfax County Public Schools, VA. He has also served as an adjunct instructor at Stratford University, Falls Church, VA. His research interests are in special education transition and the achievement gap.