## School Administrator Survey Protocol

### Survey Participant Background

1. **What is your gender?**
[ ] Male
[ ] Female
[ ] Do not wish to indicate
2. **What is your age group?**
[ ] 20 or younger
[ ] 21-30
[ ] 31-40
[ ] 41-50
[ ] 51-60
[ ] 61+
3. **What is your current position at this school? (Check all that apply)**

[ ] General education teacher

[ ] Special education teacher

[ ] Headmaster/principal

[ ] Physical education teacher

[ ] Counselor

[ ] Special education assistant

[ ] Other (Please specify)

*(Source: UMASS Boston Liason Survey)*

1. **How long have you been in this position at this school?
­­**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [MONTHS and/or YEARS]

*(Source: UMASS Boston Liason Survey)*

1. **Are there any students with intellectual disabilities in your school?**
[ ] Yes
[ ] No

*(Source: UMASS Boston Liason Survey)*

1. **Approximately how many students with intellectual disabilities are enrolled in this school?**
[INSERT NUMBER]

*(Source: UMASS Boston Liason Survey)*

1. **Are there any students with intellectual disabilities in mainstream class(es) at your school?**
[ ] Yes
[ ] No

*(Adapted from Source: UMASS Boston Liaison Survey)*

1. **Approximately how many students with intellectual disabilities are in mainstream class(es)?**
[INSERT NUMBER]

*(Adapted from Source: UMASS Boston Liaison Survey)*

1. **During this school year, how often did you see students with intellectual disabilities in the following places?**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Never** | **Some days** | **Most days** | **Every day** | **I don’t know** |
| In the hallway  |  |  |  |  |  |
| In the cafeteria  |  |  |  |  |  |
| In academic classes (such as English, math, or history)  |  |  |  |  |  |
| In non-academic classes (such as study hall, gym, art, or music)  |  |  |  |  |  |
| In the Special Education classroom(s)  |  |  |  |  |  |
| Playing on a sports team  |  |  |  |  |  |
| During extracurricular activities (such as club meetings)  |  |  |  |  |  |

*(Source: The Special Olympics Unified Champion Schools Program: Unified Schools Intervention Study Final Report)*

### Special Olympics Unified Schools Activities and Key Partners

1. **What Unified Schools activities are implemented in your school (check all that apply)?**[ ] Unified Sports
[ ] Inclusive Youth Leadership
[ ] Whole School Engagement

*(Source: Developing self-report measures on social inclusion for people with intellectual disabilities and for sports coaches: A transnational study)*

1. **How have you been involved in Unified Sports? (Check all that apply)**[ ] Coach
[ ] Other volunteer
[ ] Family member of an athlete
[ ] Other (Specify)

*(Source: Developing self-report measures on social inclusion for people with intellectual disabilities and for sports coaches: A transnational study)*

1. **How long have you been involved with Unified Sports?**\_\_\_\_\_\_\_ [MONTHS and/or YEARS]

*(Source: Developing self-report measures on social inclusion for people with intellectual disabilities and for sports coaches: A transnational study)*

1. **How have you been involved in Inclusive Youth Leadership activities? (Check all that apply)**[ ] Led an activity
[ ] Member
[ ] Other volunteer
[ ] Family member of a participant
[ ] Other (Specify)

*(Source: Adapted by American Institutes for Research)*

1. **How long have you been involved with any of the Inclusive Youth Leadership** **activities?**\_\_\_\_\_\_\_ [MONTHS and/or YEARS]

*(Source: Developing self-report measures on social inclusion for people with intellectual disabilities and for sports coaches: A transnational study)*

1. **How have you been involved in these Whole School Engagement activities? (Check all that apply)**[ ] Leader of an activity
[ ] Member
[ ] Other volunteer
[ ] Family member of a participant
[ ] Other (Specify)

*(Source: Adapted by American Institutes for Research)*

1. **How long have you been involved with any of the Whole School Engagement activities?**\_\_\_\_\_\_\_ [MONTHS and/or YEARS]

*(Source: The Special Olympics Unified Champion Schools Program: Unified Schools Intervention Study Final Report)*

1. **Do you have any key partners within Special Olympics (For example, education authorities, disability organizations, parent groups, sports federations, etc.)?**
[ ] Yes, please specify\_\_\_\_\_\_\_
[ ] No
[ ] Not applicable

*(Source: UMASS Boston Liaison Survey)*

1. **Do these key partners assist you with setting up activities for any of the following:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Yes** | **No** | **Not Applicable** |
| Unified Sports Activities |  |  |  |
| Inclusive Youth Leadership Activities |  |  |  |
| Whole School Engagement Activities |  |  |  |

*(Source: Adapted by American Institutes for Research)*

#### **Unified Sports – Participation and Experience**

1. **During this school year, did you organize/participate any Unified Sports activities to raise awareness about how athletes with intellectual disabilities AND without intellectual disabilities can train and compete together? *(E.g. Special Olympics Sports Day or Unified Sports Day)***[ ] Yes
[ ] No
[ ] Not applicable

*(Adapted from Source: UMASS Boston Liaison Survey)*

1. **How many students participated in the Unified Sports activities in the previous school** **year?**
# of students with intellectual disabilities participating as ATHLETES \_\_\_\_\_\_
# of students without intellectual disabilities participating as PARTNERS \_\_\_\_\_
# of students without intellectual disability participating in other capacities (NOT as Partners) \_\_\_\_\_

*(Adapted from Source: UMASS Boston Liaison Survey)*

1. **How many students overall participated in Unified Sports in this school year in your school?**Unified Sports: \_\_\_\_\_ [NUMBER OF STUDENTS)

*(Adapted from Source: UMASS Boston Liaison Survey)*

1. **How many students with intellectual disabilities participated in Unified Sports activities in this school year?**\_\_\_\_\_ [NUMBER OF STUDENTS]

*(Adapted from Source: UMASS Boston Liaison Survey)*

1. **During this school year, have there been opportunities or trainings for you to learn more about Unified Sports and how to *implement* the activities or events that take place in your school?**[ ] Yes
[ ] No
[ ] Not Applicable

*(Adapted from Source: UMASS Boston Liaison Survey)*

1. **Did you participate in any of these trainings?**
[ ] Yes
[ ] No
[ ] Not Applicable

*(Adapted from Source: UMASS Boston Liaison Survey)*

1. **What topics did the trainings cover?**

|  |
| --- |
|  |

*(Adapted from Source: UMASS Boston Liaison Survey)*

1. **How helpful were these trainings to you in implementing Unified Sports activities at your (school/community program) this year?**
[ ] Very helpful
[ ] Somewhat helpful
[ ] Neutral
[ ] A little helpful
[ ] Not helpful at all

*(Source: Adapted by American Institutes for Research)*

#### **Unified Sports – Perception of events/quality**

1. **Please check if the following difficulties have been experienced with Unified Sports by ticking the appropriate column. Add in a comment to explain each response.**

1. No difficulty – this has not been a problem for any teams

2. Some difficulty – a problem for some teams

3. Mostly a difficulty – nearly all teams have experienced this problem

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Difficulty** | **1 No** | **2 Some** | **3 Most** | **Comment** |
| Finding suitable coaches |  |  |  |  |
| Attendance of partners at training |  |  |  |  |
| Attendance of athletes at training |  |  |  |  |
| Attendance of coaches at training |  |  |  |  |
| Arranging competitions |  |  |  |  |
| Athletes travelling to/from home for training and competitions |  |  |  |  |
| Finding suitable training and competition facilities  |  |  |  |  |

*(Source: Appendices to the Report on Methodological Approaches and Procedures)*

1. **For coaches:
Do you feel sufficiently prepared by Special Olympics to coach** **Unified Sports?**[ ] Yes
[ ] No
[ ] Not applicable

*(Adapted from Source: Appendices to the Report on Methodological Approaches and Procedures)*

1. **For school administrators (principals, teachers, other school staff):
Do you feel sufficiently prepared by Special Olympics to lead or participate in** **Unified Sports?**[ ] Yes
[ ] No
[ ] Not applicable

*(Source: Adapted by American Institutes for Research)*

1. **Compared to other activities in the school, how would you rate the visibility of Unified Sports activities at your school?**
[ ] A lot more visible than other activities at the school
[ ] A little more visible than other activities at the school
[ ] About the same level of visibility compared to other activities at the school
[ ] A little less visible than other activities at the school
[ ] A lot less visible than other activities at the school

*(Source: Adapted by American Institutes for Research)*

1. **We would like to find out how people at your school found out about what was happening with the Unified Sports within the school. How were activities publicized or promoted to students and staff at your school?**[ ] School newspaper
[ ] Bulletin board
[ ] School events or assemblies
[ ] School website
[ ] Public announcements/PSAs
[ ] Posters/Banners
[ ] Newsletters or other mailings
[ ] Word of Mouth

*(Adapted from Source: UMASS Boston Liaison Survey)*

1. **Overall, how would you rate the involvement in the Unified Sports activities of each of the following groups of people?**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Much less than you wanted** | **A little less than you wanted** | **About as much as you wanted** | **A little more than you wanted** | **Much more than you wanted** | **Not Applicable** |
| Students **with** intellectualdisabilities |  |  |  |  |  |  |
| Students **without**intellectual disabilities |  |  |  |  |  |  |
| Special education teachersat your school |  |  |  |  |  |  |
| General education teachersat your school |  |  |  |  |  |  |
| Administrators at yourschool |  |  |  |  |  |  |

*(Source: UMASS Boston High School Experience Survey)*

#### **Unified Sports – Suggestions for improvements for events**

1. **Do you think that some of the activities in Unified Sports at your school could be improved?**[ ] Yes
[ ] No
[ ] Not applicable

*(Source: Adapted by American Institutes for Research)*

1. **Do you think there could be an increase in the *engagement* of students (with or without disabilities) in Unified Sports at your school?**
[ ] Yes
[ ] No
[ ] Not applicable

*(Source: Adapted by American Institutes for Research)*

1. **Do you think there could be an increase in the *participation* of students (with or without disabilities) in Unified Sports at your school?**
[ ] Yes
[ ] No
[ ] Not applicable

*(Source: Adapted by American Institutes for Research)*

#### **Inclusive Youth Leadership – Participation and Experience**

1. **How many students overall participated in Inclusive Youth Leadership activities in this school year?**
\_\_\_\_\_ [NUMBER OF STUDENTS]

*(Adapted from Source: Promoting Social Inclusion in High Schools Using a Schoolwide Approach)*

1. **Which students participated in Inclusive Youth Leadership activities this year?**[ ] Students with disabilities
[ ] Students without disabilities
[ ] I don’t know

*(Adapted from Source: Promoting Social Inclusion in High Schools Using a Schoolwide Approach)*

1. **How many students with intellectual disabilities participated in Inclusive Youth Leadership activities in this school year?**
\_\_\_\_\_ [NUMBER OF STUDENTS]

*(Adapted from Source: Promoting Social Inclusion in High Schools Using a Schoolwide Approach)*

1. **During this school year, have there been opportunities or trainings for you to learn more about the Inclusive Youth Leadership program and how to *implement* the activities or events that take place in your (school/community program)?**[ ] Yes
[ ] No
[ ] Not Applicable

*(Adapted from Source: Promoting Social Inclusion in High Schools Using a Schoolwide Approach)*

1. **Did you participate in any of these trainings?**
[ ] Yes
[ ] No
[ ] Not Applicable

*(Adapted from Source: Promoting Social Inclusion in High Schools Using a Schoolwide Approach)*

1. **What topics did the trainings cover?**

|  |
| --- |
|  |

*(Adapted from Source: Promoting Social Inclusion in High Schools Using a Schoolwide Approach)*

1. **How helpful were these trainings to you in implementing Inclusive Youth Leadership activities at your (school/community program) this year?**
[ ] Very helpful
[ ] Somewhat helpful
[ ] Neutral
[ ] A little helpful
[ ] Not helpful at all

*(Source: Adapted by American Institutes for Research)*

1. **Overall, how would you rate the involvement in the Inclusive Youth Leadership activities of each of the following groups of people?**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Much less than you wanted** | **A little less than you wanted** | **About as much as you wanted** | **A little more than you wanted** | **Much more than you wanted** | **Not Applicable** |
| Students **with** intellectualdisabilities |  |  |  |  |  |  |
| Students **without**intellectual disabilities |  |  |  |  |  |  |
| Special education teachersat your school |  |  |  |  |  |  |
| General education teachersat your school |  |  |  |  |  |  |
| Administrators at yourschool |  |  |  |  |  |  |

*(Adapted from Source: UMASS Boston Liason Survey)*

#### **Inclusive Youth Leadership – Perception of events/quality**

1. **We would like to find out how people at your school found out about what was happening with the Inclusive Youth Leadership activities within the school. How were activities publicized or promoted to students and staff at your school?**[ ] School newspaper
[ ] Bulletin board
[ ] School events or assemblies
[ ] School website
[ ] Public announcements/PSAs
[ ] Posters/Banners
[ ] Newsletters or other mailings
[ ] Word of Mouth

*(Adapted from Source: UMASS Boston Liaison Survey)*

#### **Inclusive Youth Leadership – Suggestions for improvements for events**

1. **Do you think that some of the Inclusive Youth Leadership activities at your school could be improved?**[ ] Yes
[ ] No
[ ] Not applicable

*(Adapted from Source: Promoting Social Inclusion in High Schools Using a Schoolwide Approach)*

1. **Do you think there could be an increase in the *engagement* of students (with or without disabilities) in Inclusive Youth Leadership activities at your school?**
[ ] Yes
[ ] No
[ ] Not applicable

*(Adapted from Source: Promoting Social Inclusion in High Schools Using a Schoolwide Approach)*

1. **Do you think there could be an increase in the *participation* of students (with or without disabilities) in Inclusive Youth Leadership activities at your school?**
[ ] Yes
[ ] No
[ ] Not applicable

*(Adapted from Source: Promoting Social Inclusion in High Schools Using a Schoolwide Approach)*

#### **Whole School Engagement – Participation and Experience**

1. **How many students overall participated in the Whole School Engagement activities in this school year?** \_\_\_\_\_ [NUMBER OF STUDENTS]

*(Adapted from Source: The Special Olympics Unified Champion Schools Program: Unified Schools Intervention Study Final Report)*

1. **What type of Whole School Engagement activities did your school participate in this year?**

[ ] Spread the Word or Respect Campaign
[ ] Special Olympics assembly
[ ] Disability Day or Awareness Day

[ ] Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Adapted from Source: The Special Olympics Unified Champion Schools Program: Unified Schools Intervention Study Final Report)*

1. **How many students with intellectual disabilities participated in Whole School Engagement activities in this school year?** \_\_\_\_\_ [NUMBER OF STUDENTS]

*(Adapted from Source: The Special Olympics Unified Champion Schools Program: Unified Schools Intervention Study Final Report)*

1. **During this school year, have there been opportunities or trainings for you to learn more about Whole School Engagement and how to *implement* the activities or events that take place in your school?**[ ] Yes
[ ] No
[ ] Not Applicable

*(Adapted from Source: The Special Olympics Unified Champion Schools Program: Unified Schools Intervention Study Final Report)*

1. **Did you participate in any of these opportunities or trainings?**
[ ] Yes
[ ] No
[ ] Not Applicable

*(Adapted from Source: The Special Olympics Unified Champion Schools Program: Unified Schools Intervention Study Final Report)*

1. **What topics did the trainings cover?**

|  |
| --- |
|  |

*(Adapted from Source: The Special Olympics Unified Champion Schools Program: Unified Schools Intervention Study Final Report)*

1. **How helpful were these trainings to you in implementing Whole School Engagement activities at your school this year?**
[ ] Very helpful
[ ] Somewhat helpful
[ ] Neutral
[ ] A little helpful
[ ] Not helpful at all

*(Source: Adapted by American Institutes for Research)*

#### **Whole School Engagement – Perception of events/quality**

1. **We would like to find out how people at your school found out about what was happening with the Whole School Engagement** **activities within the school. How were activities publicized or promoted to students and staff at your school?**[ ] School newspaper
[ ] Bulletin board
[ ] School events or assemblies
[ ] School website
[ ] Public announcements/PSAs
[ ] Posters/Banners
[ ] Newsletters or other mailings
[ ] Word of Mouth

*(Adapted from Source: UMASS Boston Liaison Survey)*

1. **Overall, how would you rate the involvement in the Whole School Engagement activities of each of the following groups of people?**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Much less than you wanted** | **A little less than you wanted** | **About as much as you wanted** | **A little more than you wanted** | **Much more than you wanted** | **Not Applicable** |
| Students **with** intellectualdisabilities |  |  |  |  |  |  |
| Students **without**intellectual disabilities |  |  |  |  |  |  |
| Special education teachersat your school |  |  |  |  |  |  |
| General education teachersat your school |  |  |  |  |  |  |
| Administrators at yourschool |  |  |  |  |  |  |

*(Adapted from Source: UMASS Boston Liason Survey)*

#### **Whole School Engagement – Suggestions for improvements for events**

1. **Do you think that some of the Whole School Engagement activities at your school could be improved?**[ ] Yes
[ ] No
[ ] Not applicable

*(Source: Adapted by American Institutes for Research)*

1. **Do you think there could be an increase in the *engagement* of students (with or without disabilities) in Whole School Engagement activities at your school?**
[ ] Yes
[ ] No
[ ] Not applicable

*(Source: Adapted by American Institutes for Research)*

1. **Do you think there could be an increase in the *participation* of students (with or without disabilities) in Whole School Engagement activities at your school?**
[ ] Yes
[ ] No
[ ] Not applicable

*(Source: Adapted by American Institutes for Research)*

### Outcomes/Impacts

#### **Perceived effects on school**

##### *Social Inclusion*

1. **Please check whether the students in your school who have participated in Unified Sports activities/Inclusive Youth Leadership activities/Whole School Engagement activities have benefited in the following ways:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Yes** | **No** | **I don’t know** |
| Students are being better team members in sports |  |  |  |
| Students’ sports skills have increased |  |  |  |
| Students are meeting partners outside of training sessions |  |  |  |
| Students are visiting each other at home |  |  |  |
| Students’ friendships have developed |  |  |  |
| Students’ self-confidence has increased |  |  |  |
| Students are making more use of the community facilities |  |  |  |
| Students have become better communicators |  |  |  |
| Students’ families are proud of their achievements |  |  |  |

*(Source: Appendices to the Report on Methodological Approaches and Procedures)*

##### *Attitudes and Knowledge Towards Intellectual Disabilities*

1. **From a scale of 1 to 5 with 1 being no difference and 5 being a big difference, please mark how much of a difference do you think Unified Sports activities/Inclusive Youth Leadership activities/Whole School Engagement activities have made in your school in each of the following areas?**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **1 – No difference** | **2 – Very little difference** | **3 – Neutral** | **4 – Moderate difference** | **5 – Big difference** |
| Raising awareness of students about people with intellectual disabilities  |  |  |  |  |  |
| Changing students’ attitudes and behaviors towards people with intellectual disabilities |  |  |  |  |  |
| Improving students’ behavior towards people with intellectual disabilities |  |  |  |  |  |
| Raising awareness of teachers about what students with intellectual disabilities can contribute to the school  |  |  |  |  |  |

*(Source: Adapted from UMASS Boston Liaison Survey)*

##### *School Climate*

1. **From a scale of 1 to 5 with 1 being no difference and 5 being a big difference, please mark how much of a difference do you think** **Unified Sports activities/Inclusive Youth Leadership activities/Whole School Engagement activities have made in your school in each of the following areas?**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **1 – No difference** | **2 – Very little difference** | **3 – Neutral** | **4 – Moderate difference** | **5 – Big difference** |
| Creating a more inclusive climate in the school  |  |  |  |  |  |
| Reducing bullying, teasing or use of offensive language  |  |  |  |  |  |
| Increasing the sense of community in the school  |  |  |  |  |  |
| Helping different student groups get along better  |  |  |  |  |  |

*(Source: UMASS Boston Liason Survey)*

##### *Academic Climate*

1. **Do you think the Unified Sports activities/Inclusive Youth Leadership activities/Whole School Engagement activities provided more opportunities for general and special educators to work together?**[ ] Yes
[ ] No
[ ] Not applicable

*(Source: Adapted by American Institutes for Research)*

#### **Perceived effects on students**

##### *Social Inclusion and School Engagement*

1. **Since the implementation of Unified Sports activities/Inclusive Youth Leadership activities/Whole School Engagement activities, how has the number of opportunities for students with and without intellectual disabilities to work together on classroom activities changed?**
[ ] Increased a lot
[ ] Increased a little
[ ] Stayed the same
[ ] Decreased a little
[ ] Decreased a lot

*(Source: Adapted from UMASS Boston Liaison Survey)*

1. **Now think about student interaction in the lunchroom, hallways, and other non-classroom settings. Since the implementation of Unified Sports activities/Inclusive Youth Leadership activities/Whole School Engagement activities, how has the amount of interaction between students with and without intellectual disabilities in non-classroom settings changed?**[ ] Increased a lot
[ ] Increased a little
[ ] Stayed the same
[ ] Decreased a little
[ ] Decreased a lot

*(Source: Adapted from UMASS Boston Liaison Survey)*

1. **Since the implementation of Unified Sports activities/Inclusive Youth Leadership activities/Whole School Engagement activities, how has the number of opportunities for students with and without intellectual disabilities to work together on extracurricular/afterschool activities changed?**[ ] Increased a lot
[ ] Increased a little
[ ] Stayed the same
[ ] Decreased a little
[ ] Decreased a lot

*(Source: Adapted from UMASS Boston Liaison Survey)*

1. **From a scale of 1 to 5 with 1 being no difference and 5 being a big difference, please mark how much of a difference do you think Unified Sports activities/Inclusive Youth Leadership activities/Whole School Engagement activities have made in your students in each of the following areas?**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **1 – No difference** | **2 – Very little difference** | **3 – Neutral** | **4 – Moderate difference** | **5 – Big difference** |
| Providing more sports opportunities for students with intellectual disabilities  |  |  |  |  |  |
| Helping promote leadership and advocacy skills among students with intellectual disabilities  |  |  |  |  |  |
| Increasing participation of students with intellectual disabilities in school activities  |  |  |  |  |  |
| Increasing confidence for students with intellectual disabilities  |  |  |  |  |  |
| Helping promote leadership and advocacy skills among students **without intellectual disabilities**  |  |  |  |  |  |
| Increasing participation of students **without intellectual disabilities** in school activities  |  |  |  |  |  |

*(Adapted from Source: Appendices to the Report on Methodological Approaches and Procedures)*

##### *Attitudes and Knowledge Towards Intellectual Disability*

1. **Do you see any impact of the Unified Sports activities/Inclusive Youth Leadership activities/Whole School Engagement activities on the social inclusion of the students with ID in your school?**[ ] Yes, there is a major impact
[ ] Yes, to some degree
[ ] No, not really
[ ] No, not at all
[ ] I don’t know

(*Adapted from Source: UMASS Boston Liaison Survey)*

1. **From a scale of 1 to 5 with 1 being almost never true and 5 being almost always true, please mark how true these statements are for the students in your school?**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **1 – Almost never true** | **2 – Usually not true** | **3 – Occasionally true** | **4 – Usually true**  | **5 – Almost always true** |
| A student would feel comfortable carrying on a conversation with a student with an intellectual disability at school  |  |  |  |  |  |
| A student wouldn’t know how to act around a student with an intellectual disability  |  |  |  |  |  |
| A student would try to avoid talking to a student with an intellectual disability in the hallway  |  |  |  |  |  |
| A student would exchange their contact information (e.g. their phone number) with a student with an intellectual disability  |  |  |  |  |  |
| A student would feel uncomfortable if a student with an intellectual disability was in their class  |  |  |  |  |  |
| A student wouldn’t know how to respond if a student with an intellectual disability started to talk to them  |  |  |  |  |  |
| A student would feel comfortable working on a school project with a student with an intellectual disability  |  |  |  |  |  |
| A student would feel uncomfortable introducing a student with an intellectual disability to their friends  |  |  |  |  |  |
| A student would feel uncomfortable spending time one-on-one with a student with an intellectual disability  |  |  |  |  |  |
| A student would feel comfortable if a student with an intellectual disability were to ask them to sit together during lunch  |  |  |  |  |  |
| A student would feel uncomfortable if a student with an intellectual disability hung out with them and their friends  |  |  |  |  |  |

*(Source: The Special Olympics Unified Champion Schools Program: Unified Schools Intervention Study Final Report)*

1. **Do you think that most students with intellectual disabilities who participate in Unified Sports activities/Inclusive Youth Leadership activities/Whole School Engagement activities are capable of doing the following things?**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Definitely Yes** | **Probably Yes** | **Neutral** | **Probably****No** | **Definitely No** |
| Learning academic subjects in a class with students without intellectual disabilities  |  |  |  |  |  |
| Making new friends  |  |  |  |  |  |
| Doing physical activities like running, riding a bike, skateboarding, or skiing  |  |  |  |  |  |
| Playing on a sports team with other players with intellectual disabilities  |  |  |  |  |  |
| Playing on a sports team with other players without intellectual disabilities  |  |  |  |  |  |
| Understanding the rules of a competitive sports game  |  |  |  |  |  |

*(Adapted from Source: UMASS Boston Liaison Survey)*

##### *Health Outcomes*

1. **The following questions are about specific changes that you might have seen in students while participating in Unified Sports activities/Inclusive Youth Leadership activities/Whole School Engagement activities. Please indicate whether you have observed the following changes in your students.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Since participating in Unified School program…** | **Yes** | **No** | **I don’t know** |
| They seem more comfortable talking to people with an intellectual disability |  |  |  |
| They seem more comfortable talking to people without an intellectual disability |  |  |  |
| They seem to do more activities in their community |  |  |  |
| They seem healthier |  |  |  |
| Their sports skills have improved |  |  |  |
| They joined another sports team outside of Unified Sports (or plan to in the future) |  |  |  |
| They seem to exercise more every week |  |  |  |
| They seem to have more friends with intellectual disabilities |  |  |  |
| They seem to have more friends without intellectual disabilities |  |  |  |

#### (Adapted from Source: Special Olympics Unified Champion Schools Evaluation Guide: A Resource for US State Programs)

##### *Post-School Outcomes*

1. **Upon graduating from high school, do you see students who have participated in the Unified Sports activities/Inclusive Youth Leadership activities/Whole School Engagement activities want/able to attend post-secondary education?**
[ ] Yes
[ ] No
[ ] Not applicable

*(Adapted from Source: UMASS Boston High School Experience Survey)*

1. **Upon graduating from high school, do you see students who have participated in the Unified Sports activities/Inclusive Youth Leadership activities/Whole School Engagement activities want/able to enter employment?**
[ ] Yes, they’d want full time employment
[ ] Yes, they’d want part time employment
[ ] No, they wouldn’t want any kind of employment
[ ] I don’t know
[ ] Not applicable

*(Adapted from Source: UMASS Boston High School Experience Survey)*