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Personal Development and Inclusive Education in People With Intellectual Disability: A Subscale Aligned With the CRPD

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ABSTRACT

Personal development and inclusive education are fundamental rights. However, people with intellectual disability face significant barriers in accessing these rights. Empowering them is crucial to enable the exercise of their rights and achieve full social inclusion, which can be facilitated through tools that capture their experiences in personal development and education. The United Nations Convention on the Rights of Persons with Disabilities mandates the collection of statistical data to inform policies, evaluate compliance, and identify barriers. The study aimed to refine and validate a subscale designed to monitor the fulfillment of rights to personal development and inclusive education, and to examine its relationship with age, gender, and type of education (inclusive or mainstream). A total of 237 people in Spain participated in the study, using the pilot self-report or third-party version of the subscale related to personal development and inclusive education rights, which is part of the #Rights4MeToo Scale. This group included 138 students with intellectual disability, 15 family members, and 84 professionals. The analyses confirmed that the subscale has adequate evidence of reliability and validity. No significant relationships were found between the rights to personal development and inclusive education and age, gender, or educational setting among participants. The final version of the subscale serves as a valuable tool for monitoring these rights, crucial for planning policy and interventions to improve the quality of life for people with intellectual disability. To maximize outcomes in personal development and inclusive education, comprehensive sexuality education, flexible educational environments, vocational training tailored to individual aspirations, and inclusive recreational opportunities are needed.

1 | Introduction

The Convention on the Rights of Persons with Disabilities (CRPD; United Nations 2006) aims to achieve an inclusive society where everyone can actively participate in societal life and enjoy full citizenship on equal terms, eliminating all forms of discrimination. The CRPD recognizes the fundamental rights of persons with disabilities, including those with intellectual disability—defined as a wide range of conditions characterized by significant limitations in intellectual functioning and adaptive behavior during the developmental period (Schalock et al. 2021)—and urges nearly 200 States Parties to implement measures to ensure their full community participation. Within this crucial framework, personal development (PD) emerges as a vital element of empowerment, understood as an ongoing process of growth and improvement across all life areas through the acquisition of knowledge, skills, attitudes, and behaviors that enrich individuals' capacity to be autonomous, engage meaningfully, and contribute to society (Álvarez-Aguado et al. 2023; Santander et al. 2022).

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Inclusive education is fundamental for fostering PD, as it ensures that all students enjoy a quality education on equal terms and nurtures diversity by enhancing each student's abilities (Heras et al. 2021). The relationship between PD and inclusive education is profound for several reasons (Bakoč 2022; Dell'Anna et al. 2022; Gómez et al. 2020, 2022; Krämer et al. 2021; Lombardi et al. 2025; Shutaleva et al. 2023; Verdugo et al. 2012): (a) it provides students with intellectual disability access to the same curriculum and learning opportunities as their peers, which is fundamental to their intellectual growth; (b) it fosters social interactions and relationships among students with and without disabilities, which is essential for developing social skills, emotional intelligence, and a sense of belonging critical for social inclusion and well-being; (c) it encourages a diverse learning environment where all students learn from each other's strengths and challenges, enriching the educational experience and promoting empathy, understanding, and respect; and (d) it supports the development of life skills necessary for independence and self-determination such as problem-solving, decision-making, and self-advocacy.

The CRPD establishes a comprehensive framework with 50 Articles aimed at fostering an inclusive society (Verdugo et al. 2025). Articles 1 to 4 outline the Convention's purpose, key concepts, guiding principles, and general obligations of States Parties. The core of the CRPD, detailed in Articles 5 to 30, specifies rights such as legal capacity, independent living, accessibility, health, employment, and education. Article 24 specifically addresses the right to education for persons with disabilities, promoting non-discrimination and equal opportunities. It emphasizes the importance of an inclusive education system at all levels to fully develop human potential, dignity, self-esteem, personality, talents, creativity, and mental and physical abilities for effective societal participation. The right to inclusive education is foundational to the principles of PD, ensuring that all individuals, regardless of their abilities, can grow and thrive in an environment that nurtures their unique strengths and contributions.

To realize the rights to PD and education, States Parties must ensure that people with intellectual disability (United Nations 2006): (a) are not excluded from the general or mainstream education system, avoiding segregated settings such as special education schools; (b) have access to inclusive, high-quality, and free education, on an equal basis with others, within their communities; (c) enjoy reasonable accommodations tailored to their individual needs; (d) receive personalized support necessary for effective education in inclusive settings, maximizing their academic and social development; and (e) have the opportunity to fully and equally participate in education as valued members of their communities. States Parties should also employ qualified professionals trained in disability support and the use of appropriate augmentative and alternative communication methods and educational techniques.

Furthermore, Articles 31 to 40 address crucial elements such as data collection, international cooperation, and monitoring mechanisms to evaluate compliance and enhance policy implementation. Significantly, Article 31 mandates States Parties to collect relevant information, including statistical and research data, to enable the formulation and implementation of policies that uphold the Convention. For effective monitoring of compliance with the CRPD, the full involvement and participation of civil society—particularly people with intellectual disability and the third sector organizations that represent them—is mandatory at all levels of the monitoring process. Therefore, it is essential to provide them with tools that enable them to understand their rights and communicate the extent to which they feel their rights are being respected or violated. This process must comply with legally established safeguards, including data protection laws, to ensure confidentiality and respect for privacy.

Moreover, the information collected must adhere to internationally accepted norms that protect human rights and ethical principles in the collection and use of statistics. The data gathered should be disaggregated where appropriate and used to monitor the implementation of States Parties' obligations stemming from their commitments upon ratifying the CRPD. This data is crucial for identifying and eliminating barriers faced by persons with disabilities in exercising their rights. Additionally, States Parties are responsible for disseminating these statistics and ensuring their accessibility to persons with disabilities and other stakeholders. The remaining Articles (41–50) address procedural issues, including signature and entry into force, to ensure the effective realization of the Convention's goals.

Over 15 years since the CRPD's entry into force, member States have made significant progress in realizing its principles. This progress extends beyond restoring voting rights (Martínez-Santiago 2024) and prohibiting forced sterilizations (Pérez-Curiel et al. 2023) to promote supported decision-making (Devi et al. 2020; Robinson et al. 2025), independent living (Navas et al. 2024, 2025), or inclusive education (Buchner et al. 2021).

Despite these significant achievements, members have embraced the concept of "progressive realization," recognizing that not all resources are available to fully implement every Article immediately. Continuous efforts are essential to tackle the remaining challenges faced by people with intellectual disability. Numerous blatant violations of their fundamental rights persist, including issues related to health, supported decision-making, equality and non-discrimination, liberty, access to justice, social participation, restrictive practices, and exploitation, violence, and abuse (Didi et al. 2018; Gómez et al. 2020; Murphy and Bantry-White 2021; Pinto et al. 2023). Among these violations, the right to inclusive education stands out as one of the most frequently compromised (Byrne 2022).

Reports on (non-)compliance with the CRPD highlight inclusive education as a critical area of concern, particularly in Spain (CERMI 2023), where this study was conducted. Furthermore, international comparative studies and insights into the implementation process reveal significant gaps in understanding these complexities (Buchner et al. 2021). This pressing issue is echoed in the existing scientific literature, which predominantly features theoretical and descriptive articles discussing inclusive education. Alarmingly, there remains a troubling lack of empirical studies that establish evidence-based practices in inclusive environments (Amor, Hagiwara, et al. 2018).

A significant distinction that emerges in these discussions is the difference between mainstream and special education (Woolfson 2025). Special education provides segregated environments specifically tailored for students with disabilities. While these settings may offer specialized resources and individualized support, they can also limit opportunities for communication and social inclusion (Buckley et al. 2006). In contrast, mainstream education aims to serve all students, including those with intellectual disability, by providing the necessary support and accommodations that facilitate PD alongside their peers (Amor, Hagiwara, et al. 2018). The CRPD emphasizes the importance of inclusive education, asserting that adaptations should be implemented within mainstream settings to meet the diverse needs of all learners. This approach seeks to prevent the establishment of separate educational systems for specific populations and requires a transformative approach to enhance the educational system's capacity for inclusivity, rather than reverting to traditional special education models.

While inclusive education can enrich the educational experience for students with disabilities (Krämer et al. 2021)—helping alleviate challenging behaviors and improving academic achievement and adaptive skills (Dell'Anna et al. 2022), it also fosters positive attitudes toward inclusion among teachers and students without disabilities, promoting more frequent interactions with peers with disabilities (Bakoč 2022). However, inclusive education also poses challenges that must be addressed, including increased marginalization and social isolation (Dell'Anna et al. 2022), negative attitudes toward inclusion, inadequate teacher training and capabilities, insufficient reasonable adjustments, lack of disaggregated data, environmental barriers, and funding limitations (Buchner et al. 2021; Byrne 2022).

To achieve genuine inclusive education, several key strategies must be prioritized: (a) fostering positive attitudes toward inclusion among educators, students, and the community (Moreno et al. 2022); (b) implementing comprehensive training for teachers to equip them with the necessary skills and knowledge to adapt their teaching methods and assessments to meet the diverse needs of all students (Márquez and Sánchez 2023); (c) developing a robust inclusive curriculum that addresses multiple learning styles and provides reasonable adjustments (Rendoth et al. 2022); (d) establishing strong monitoring systems to collect disaggregated data, which will help identify areas needing improvement and track progress over time (Abualghaib et al. 2019); and (e) reinforcing policies that ensure that every student is valued and supported (Buchner et al. 2021).

Currently, Spain is advancing inclusive education through a strategic plan aligned with the CRPD. However, effective implementation and clear evidence of outcomes remain crucial. The country's decentralized education system, divided among 17 autonomous communities and two autonomous cities, leads to significant disparities in the application of national and international laws recognizing inclusion as a fundamental principle (Amor, Verdugo, et al. 2018). These variations highlight the critical need for enhanced interterritorial cooperation to improve data sharing, statistics, and evidence-based practices that are essential for effective inclusion (Márquez and Sánchez 2023).

Given the urgent need to monitor compliance with the CRPD and to implement effective measures to enhance the full citizenship and quality of life (QOL) of people with intellectual disability, it is essential to have instruments with adequate evidence of validity and reliability. With this objective, the #Rights4MeToo Scale (*#YoTambién Tengo Derechos*; Gómez, Morán, Navas, Vicente, et al. 2024) was developed in Spain. It is the only existing tool specifically designed to monitor compliance with the CRPD, proposing indicators and items to evaluate all the rights enshrined therein. Its development began with a theoretical proposal in which Verdugo et al. (2012) articulated the relationship and alignment between the eight domains of the QOL model and the articles of the CRPD. Subsequently, a Delphi study (Lombardi et al. 2019) was conducted with 153 experts from 10 countries, including self-advocates with disabilities, support professionals, family members, academics researching the concept of QOL, and legal experts. The outcome was an international consensus and a proposal for specific QOL indicators to operationalize the rights contained in the CRPD through the eight QOL domains (Schalock and Verdugo 2002). This was complemented by a systematic review of the scientific literature, which extracted more than a hundred indicators that were found to be useful for measuring the implementation of the CRPD and that related to the eight QOL domains (Gómez et al. 2020). Building on this extensive groundwork, the scale further underwent a crucial validation step: a consultation with 32 Spanish experts. This process achieved consensus on the suitability, importance, and clarity of 41 QOL indicators and 153 items that comprised the pilot version of the scale, structured around the eight QOL domains and the specific rights of the CRPD (Gómez et al. 2022). Further details on the scale's development and content-based evidence can be found in Gómez et al. (2023).

In particular, inclusive education (Article 24 of the CRPD) was primarily addressed within the PD QOL domain. Items in this domain covered key aspects such as the right to receive individualized supports within mainstream settings, the availability of necessary educational aids and reasonable accommodations, active participation in activities, opportunities for lifelong learning and development of personal skills, and training related to employment, rights, sexuality, family planning, and independent living skills. Alongside this, complementary sociodemographic variables such as type of educational setting (mainstream or special education) were collected to provide essential contextual information. This approach captured the various dimensions of inclusive education, from structural access to the quality of personal experience and growth. More specifically, it not only measures the presence of inclusive opportunities but also the subjective quality of these experiences from the individual's perspective.

For this subscale, specifically designed to evaluate PD and aspects related inclusive education, the study was guided by the following specific objectives: (a) to identify and select the items with optimal psychometric properties, ensuring accurate and methodologically sound representation of proposed indicators; (b) to provide empirical evidence of the reliability and validity of the items included in the final subscale; (c) to analyze the results obtained from a large sample of people with intellectual disability; and (d) to investigate the relationships between the PD/inclusive education scores and demographic variables such as age, gender and type of education. Consistent with prior scientific literature, it was hypothesized that no statistically significant differences would be found in scores based on gender (Balboni et al. 2020; Lombardi et al. 2016), age (Gómez et al. 2016; Lee et al. 2021; Morán et al. 2022, 2024; Simões and Santos 2017), or type of educational setting (mainstream or special education) (Morán et al. 2024).

2 | Methods

2.1 | Participants

A total of 237 participants were included in this study to provide their views on the right to PD and inclusive education for people with intellectual disability in Spain. Among these participants, 138 people with intellectual disability provided self-reports. Additionally, 15 family members and 84 professionals, who themselves did not have intellectual disability, contributed third-party reports regarding the other 99 participants with intellectual disability.

Out of the 237 participants with intellectual disability, whose experiences were documented either through self-reports or third-party reports, 59.49% ($n=141$) were women. Their ages ranged from 12 to 63 years, with a mean age of 28.29 years (SD = 12.99). In terms of educational placement, 68.78% ($n=163$) were enrolled in special educational settings, while the remaining 31.22% ($n=74$) were in mainstream education.

Among the 237 participants with intellectual disability, 138 completed self-reports. This subgroup's ages also ranged from 12 to 63 years (M = 28.66; SD = 12.88), and 50% identified as women. Regarding the third-party reports, a majority were completed by women, with 86.67% of family members and 82.14% of professionals being female. Most family members were mothers (60%) and fathers (20%). The professionals included teachers (40.48%), caregivers (14.29%), educators (13.10%), direct care supporters (9.52%), and psychologists (7.14%), among others.

2.2 | Instrument

The instrument used was the Spanish pilot version of #Rights4MeToo Scale (Gómez, Morán, Navas, Vicente, et al. 2024), an electronic tool validated in Easy-to-Read format. This version begins with an initial section collecting personal and contextual information about the person with intellectual disability, followed by 153 items organized according to the eight QOL domains, which incorporated specific rights outlined in the CRPD. The instrument offers both a self-reported version and reports by others, providing a comprehensive understanding of perceptions regarding (non)compliance with these rights in the current context and moment.

Participants were encouraged to complete the eight QOL subscales in any order they preferred. They could select the domain to start with and, after completing all items in that subscale, choose the next one. Within each domain, the order of item presentation was consistent for all participants.

All items shared the same format and were displayed individually on the screen, one at a time. As illustrated in Figure 1, each item featured a short sentence in bold, accompanied by an icon representing the QOL domain and a brief written explanation to aid understanding and provide examples (see Figure 1). The items were phrased in either the first or third person, depending on whether the scale was self-reported (i.e., completed by the person with intellectual disability) or reported by others (i.e., completed by a family member or professional regarding the person with intellectual disability).

Item presentation was tailored to the characteristics of the individual with intellectual disability. For instance, items were adjusted to reflect their gender (masculine or feminine), and certain items were selectively presented according to variables such as age or current educational or employment status. These selectively presented items are referred to as "conditional items."

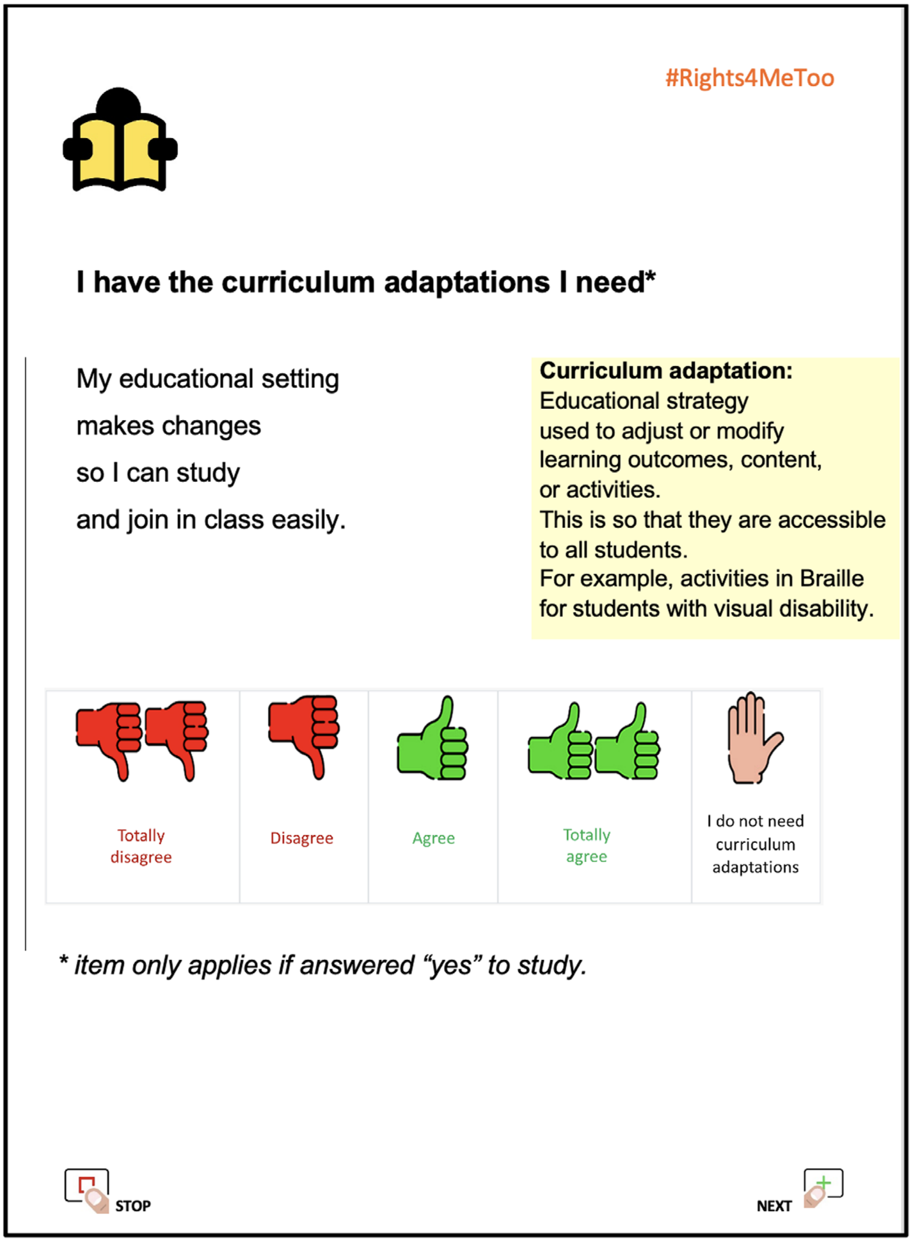
As shown in Figure 1, all items featured a four-option Likert-type response format ranging from "totally disagree" to "totally agree". The response options were displayed in text beneath their corresponding icons (thumbs up or thumbs down) and were color-coded according to the direction and polarity of the response (green for affirmation, red for negation). Some items included a fifth option, represented by an icon of an open hand. The wording of this fifth option varied depending on the content of each item and was used to indicate "not applicable," meaning that the person did not need support in that aspect. Choosing this option implied the full exercise of the right. The response coding was "totally disagree" = 1; "disagree" = 2; "agree" = 3; "totally agree = 4", and "not applicable" = 4 for items with positive valence. For items with negative valence, the response coding was reversed.

This study specifically focuses on the PD subscale, which addresses Article 24 of the CRPD regarding inclusive education. The PD subscale comprises 17 items distributed across five QOL indicators (Table 1). These items reflect various educational contexts in which the person with intellectual disability is currently engaged, encompassing not only formal schooling but also diverse lifelong educational experiences, such as training courses of any type, regardless of age. Within this subscale, there were no reverse items, and three specific items (i15, i16, i17) included the fifth response alternative ("not applicable"). Additionally, the presentation of 10 items was contingent upon whether the person with intellectual disability was in an educational setting, while two items depended on their age. Consequently, only five items were presented to all people, regardless of age or educational status.

2.3 | Procedure

To achieve the broadest and most heterogeneous sample possible, we initially conducted a search to identify as many organizations working with people with intellectual disability in Spain as possible. We reached out to several hundred third-sector organizations and schools by e-mail, informing them of the study's objectives and requesting their collaboration. Additionally, the study was promoted through the website and social media channels of INICO (University of Salamanca, Spain), as well as at various disability-related conferences and courses.

Upon receiving interest from participating associations, we provided them with the necessary materials to administer the pilot



I have the curriculum adaptations I need*

My educational setting
makes changes
so I can study
and join in class easily.

Curriculum adaptation:
Educational strategy
used to adjust or modify
learning outcomes, content,
or activities.
This is so that they are accessible
to all students.
For example, activities in Braille
for students with visual disability.

** item only applies if answered "yes" to study.*

FIGURE 1 | Example of an item, explanation, gloss, icons, web buttons, and response alternatives.

version of the #Rights4MeToo Scale. These materials included a PDF manual and a concise instructional video that offered clear and detailed guidance on completing the scale. For professionals, family members, and people with intellectual disability who requested additional support, our research team traveled to provide assistance.

Within each organization or educational setting, a designated individual was responsible for: (a) acting as the contact and mediator between the research team and the participants; and (b) disseminating information about the study among professionals, family members, and people with intellectual disability, as well as organizing the procedural aspects within the center.

The inclusion criteria for people who could complete the self-reported version of the scale were: (a) having intellectual disability; (b) being at least 12 years old; and (c) being enrolled in an educational setting. For adults providing third-party reports on a person with intellectual disability (aged 4 years and older), the inclusion criteria were: (a) being professionals, family members, or close relatives; (b) having known the person with intellectual disability well (for at least 6 months); and (c) having had the opportunity to observe the person in various contexts.

The project was approved by the Research Ethics Committee of Universidad de Oviedo (17_RRI_2021) and the Principality of Asturias Ethics Committee for Social Intervention. All participants provided informed consent to take part in the study and did not receive any financial compensation for their involvement. Confidentiality and anonymity of responses were ensured by refraining from collecting any personal data that could identify participants. Instead, identification codes were generated automatically by the web application. The link between these codes and specific individuals was known only to

TABLE 1 | Items and indicators for PD and inclusive education field-test subscale.

QOL indicator		Item	Conditions
Educative context	1	I study in a mainstream setting	Educative setting
	2	My educational setting is accessible	Educative setting
	3	I attend the educational center of my choice	Educative setting
Involvement in educational program	4	I have the materials I need to learn	Educative setting
	5	My family or my legal representative helps me	Educative setting
	6	I have friends at my educational setting	Educative setting
	7	I take part in the activities I like at my educational setting	Educative setting
Lifelong learning	8	I have learned about sexuality, reproduction, and family planning	+11 years old
	9	I can ask someone about any subject I am interested in, and they answer me in a way I can understand	—
	10	I learn about my rights	—
Personal skills	11	I learn skills to be independent	—
	12	I learn about the skills I need to get the job I want	+15 years old
	13	I can develop my talent and creativity	—
	14	I learn social skills	—
Supports for personal growth and development	15	At my educational setting, I get the support I need	Educative setting
	16	I have the curriculum adaptations I need	Educative setting
	17	My educational setting helps me learn different forms of communication	Educative setting

Note: Conditions, conditions that the person must meet to respond to each item; —, items applicable to all participants.

the participants. To access their session and continue answering items from where they had left off in the previous session, participants were required to save or remember their unique code.

2.4 | Data Analysis

Descriptive statistics were calculated for each item of the PD subscale (i.e., M, Me, SD, skewness, and kurtosis). Next, an exploratory factor analysis (EFA) was conducted on the polychoric correlation matrix using Robust Unweighted Least Squares (RULS) as the estimation method. The adequacy of the data for conducting the EFA was assessed using the Kaiser–Meyer–Olkin (KMO) test and Bartlett's test of sphericity. A sample is considered adequate for study when the KMO coefficient exceeds 0.80 and Bartlett's test is statistically significant. Additionally, the adequacy of each item was evaluated using the Measure of Sampling Adequacy (MSA) index, with values below 0.50 deemed unacceptable.

The determination of the number of factors in the model was based on an optimal implementation of Horn's Parallel Analysis, which identifies the number of factors underlying the data, regardless of sample size. The goodness of fit of the model was evaluated using the total variance explained, the Comparative Fit Index (CFI), and the Root Mean Squared Residuals (RMSR) indices. To indicate a good fit, the CFI should be greater than 0.95 and the RMSR should be less than 0.08. Since the subscale was anticipated to be essentially unidimensional, the Common Explained Variance (CVE) was also computed, with a value greater than 0.80 considered acceptable. Regarding factor weights, items with weights below 0.30 were iteratively removed. If the criteria for the RMSR were not met, items whose residuals correlated at a higher level with those of other items were also iteratively removed. Finally, the internal consistency of the subscale was assessed using Cronbach's alpha and McDonald's omega coefficient, with values above 0.70 considered satisfactory.

Percentages of responses were analyzed for remaining items. Additionally, the linear relationship between PD/inclusive education and age was analyzed using Pearson's correlation. Differences in scores based on gender (male vs. female) or type of educational setting (mainstream vs. special) were then tested using *t*-tests. Before performing these analyses, the assumption of homoscedasticity was checked with Levene's test. If Levene's test indicated statistically significant differences, Welch's correction was applied to the *t*-test. Cohen's *d* was used to estimate effect size for the mean difference tests.

For inferential tests, the significance level was set at $p < 0.05$. The EFA was performed using the Factor.12.04.05 statistical program, while the remaining analyses were conducted with the JAMOVI.2.3.28 statistical program.

TABLE 2 | Descriptive statistics of the initial items.

Item	M	Me	SD	Asymmetry	Kurtosis	MSA	Factor loadings
1	2.038	2	1.210	0.632	−0.977	0.598	−0.019
2	3.532	4	0.317	−0.838	0.503	0.862	0.519
3	3.080	3	0.808	−0.719	−0.292	0.882	0.503
4	3.401	3	0.434	−0.830	0.359	0.895	0.583
5	3.388	4	0.550	−1.139	0.985	0.768	0.310
6	3.464	4	0.358	−0.868	0.986	0.901	0.560
7	3.380	4	0.590	−1.218	1.163	0.893	0.518
8	2.907	3	0.759	−0.510	−0.361	0.805	0.369
9	3.371	3	0.512	−1.102	1.247	0.886	0.612
10	3.338	3	0.509	−0.948	0.850	0.876	0.613
11	3.430	3	0.405	−0.968	1.190	0.923	0.690
12	3.127	3	0.668	−0.610	−0.314	0.888	0.612
13	3.447	4	0.408	−0.914	0.679	0.893	0.681
14	3.485	4	0.385	−1.211	2.341	0.878	0.647
15	3.532	4	0.468	−1.463	1.908	0.782	0.390
16	3.527	4	0.359	−0.983	0.583	0.855	0.528
17	3.498	4	0.528	−1.482	1.896	0.826	0.404

TABLE 3 | Initial and final EFA for the PD and inclusive education subscale.

	% VE	CFI	RMSR	ECV	Cronbach's α	McDonald's Ω
Initial	31.85	0.907	0.086	0.800	0.852	0.856
Final	38.46	0.956	0.067	0.856	0.863	0.865

3 | Results

High mean scores (M > 3) were observed for most items, with the exception of *I study in a mainstream setting* (i1; Me = 2) and *I have learned about sexuality, reproduction, and family planning* (i8). The highest scores (M > 3.5; Me = 4) were recorded for the items *My educational setting is accessible* (i2), *At my educational setting, I get the support I need* (i15), and *I have the curriculum adaptations I need* (i16). Skewness values ranged from −1.482 to 0.632, while kurtosis values ranged from −0.977 to 2.341 (Table 2).

The Bartlett's test statistic was statistically significant ($\chi^2 = 1219.4$; df = 136; $p < 0.001$), and a KMO of 0.870 was obtained, indicating that the sample was adequate for conducting the EFA. Furthermore, all MSA values exceeded the recommended cutoff, suggesting that the items were appropriate for analysis (see Table 3). Additionally, the parallel analysis suggested retaining a single factor. Next, the fit and reliability indices were calculated (Table 3). Although the values did not indicate a poor fit, the CFI and RMSR did not reach the stipulated cutoff points. All factor loadings were above 0.300, except for item 1 (see Table 2). Consequently, item 1 was eliminated due to its low factor loading.

TABLE 4 | MSA and factor loadings of the final items.

Item	MSA	Factor loadings
2	0.870	0.517
3	0.892	0.529
4	0.873	0.564
6	0.908	0.564
7	0.884	0.500
8	0.791	0.372
9	0.892	0.620
10	0.874	0.637
11	0.914	0.697
12	0.899	0.644
13	0.900	0.696
14	0.887	0.621
16	0.836	0.480

After the elimination of item 1, a new EFA was conducted. In this iteration, all factor loadings were adequate; however, the model residuals remained somewhat high. To address this issue, pairs of items with the highest residual correlations were reviewed, and decisions on item removal were based on a substantive analysis of their content. Items 5, 15, and 17 were iteratively removed as they were found to be redundant with other items. Their removal did not compromise the coverage of the core aspects of PD and inclusive education.

After removing these four items, a final EFA was performed with the remaining 13 items. The MSA indices ranged from 0.791 to 0.914, and the factor loadings for each item ranged from 0.372 to 0.697 (Table 4). The fit and reliability indices for the final version of the subscale (see Table 3) surpassed all the established cutoff points.

Regarding the percentages of responses, an analysis of the most positive responses ("*totally agree*" and "*agree*") in the self-reported version (see Figure 2) reveals that a majority of participants reported having friends at their educational setting (99.3%), attending an accessible educational setting (98.6%), learning social skills (97.1%), being able to develop their talents and creativity (95.7%), and acquiring skills for independence (95%). Conversely, the most negative responses ("*disagree*" and "*totally disagree*") showed that many had not learned about sexuality, reproduction, and family planning (25.4%), did not attend the educational setting of their choice (18.1%), had not learned the skills necessary for their desired job (16%), and did not participate in activities they enjoy (9.4%).

In terms of the most positive responses ("*totally agree*" and "*agree*") from other informants (see Figure 3), the majority

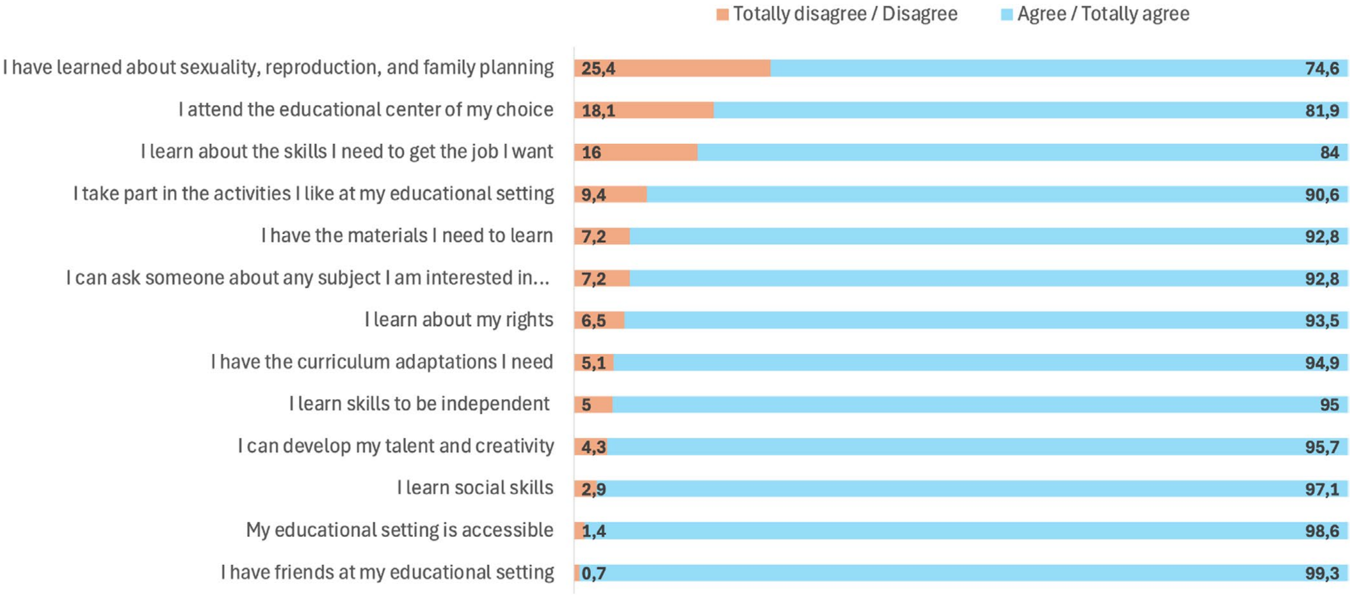


FIGURE 2 | Percentages of response in the final self-report of the subscale.

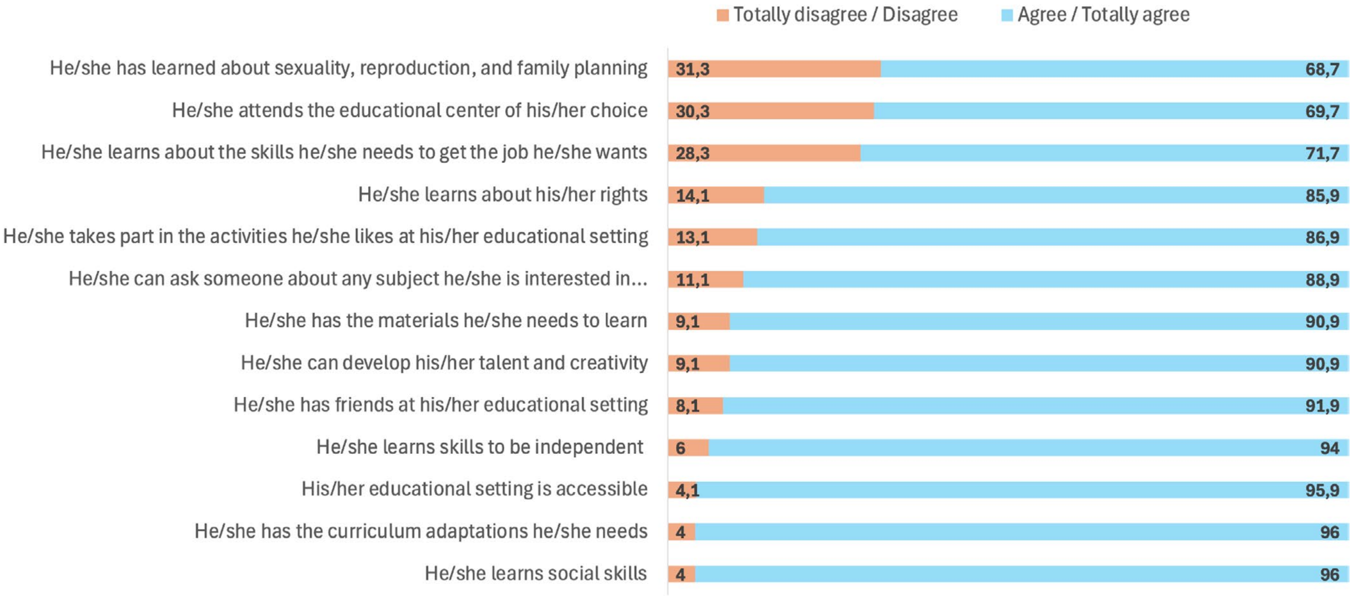


FIGURE 3 | Percentages of response in the final report by others of the subscale.

reported that people with intellectual disability learn social skills (96%), receive the necessary curricular adaptations (96%), attend accessible educational settings (95.9%), acquire skills for independence (96%), and have friends within their educational settings (91.9%). Conversely, the most negative responses ("*disagree*" and "*totally disagree*") revealed that many individuals had not learned about sexuality, reproduction, and family planning (31.3%), did not attend their preferred educational setting (30.3%), had not acquired the skills necessary for their desired job (28.3%), had not learned about their rights (14.1%), and did not participate in activities they enjoy at their educational settings (13.1%).

Finally, the Pearson correlation between PD scores and age was not statistically significant ($r=-0.195$; $p=0.864$), indicating no linear relationship. Levene's test also showed no significant results for educational setting ($F[1.235]=0.854$, $p=0.356$) or gender ($F[1.233]=0.467$, $p=0.495$), confirming the assumption of homoscedasticity. Additionally, Student's *t*-tests indicated no significant differences in scores based on educational setting ($t[235]=-0.195$, $p=0.846$) or gender ($t[233]=-0.865$, $p=0.388$). Thus, scores did not differ significantly between males and females or between those in mainstream and special educational settings.

4 | Discussion

Ensuring the right to PD and inclusive education for people with intellectual disability is fundamental to upholding their broader human rights, as enshrined in Article 24 of the CRPD. This article underscores the importance of inclusive education across all levels—not only within formal education systems from preschool to university, but also through lifelong learning opportunities. Given that one of the most frequently violated rights for people with intellectual disability is the right to PD and inclusive education (CERMI 2023), the primary objective of this study was to provide evidence supporting the validaty of the scores of a subscale designed for effectively monitoring these rights.

The scale development process provided substantial evidence supporting its content-based validity, grounded in a robust theoretical framework (Gómez, Morán, Navas, Verdugo, et al. 2024; Verdugo et al. 2012) and an exhaustive review of the scientific literature (Gómez et al. 2020). This review linked research evidence on PD and inclusive education, identified specific indicators and personal outcomes necessary for achieving inclusive education, and highlighted the significance of inclusive education policies. Consultations with a diverse group of stakeholders—including people with intellectual disability, professionals, family members, academics (Gómez et al. 2022, 2023; Lombardi et al. 2019, 2025)—further enriched the content validity.

These studies underscore the importance of including the right to attend accessible educational settings within one's community, participation in school activities, individualized supports, training in various domains, including rights, employment, sexuality, family planning, and preparation for independent living. Additionally, they stress the need for appropriate materials, reasonable accommodations, training for families and teachers about disabilities, families and peers' participation, coordination among professionals and families, and fostering environments that enhance self-esteem, autonomy, and a sense of belonging.

The refinement process led to the removal of four items with lower factorial weights and higher residuals, adjusting the data to fit a unidimensional model. The final version of the subscale, consisting of 13 items, demonstrated adequate internal consistency. Its satisfactory psychometric properties provide evidence of validity based on internal structure, supporting the reliability of the scores obtained in the validation sample as an effective tool for monitoring compliance with the rights to PD and inclusive education for people with intellectual disability. Notably, our findings reflect broader trends in the literature that assert the necessity of monitoring inclusive education policies, values, strategies, and outcomes to enhance QOL for students with intellectual disability (Buchner et al. 2021; Hornby and Kauffman 2024).

Our findings align with prior scientific literature, as we did not find significant differences in PD scores based on gender (Balboni et al. 2020; Lombardi et al. 2016), age (Gómez et al. 2016; Lee et al. 2021; Morán et al. 2022), or type of educational setting (Morán et al. 2024). In fact, there is no consistent evidence favoring either special education or mainstream education (Dalgaard et al. 2022; Stephenson and Ganguly 2022).

On the one hand, several studies indicate that special education can effectively enhance outcomes for students with intellectual disability (Hornby and Kauffman 2024), particularly in terms of overall QOL and emotional well-being (Morán et al. 2024). This effectiveness may stem from the successful implementations of inclusive practices within special education settings (Woolfson 2025). Additionally, contrary to the CRPD, many existing policies tend to prioritize special educational resources rather and do not adequately address the need to restructure the dual education system to better meet the needs of all students (Buchner et al. 2021).

On the other hand, mainstream education often falls short in providing appropriate and effective education for many students with intellectual disability within a fully inclusive system (Hornby and Kauffman 2024). Consequently, these students are frequently placed in special settings against their preferences, often located far from their communities. The perceived advantages of special education may reflect not only the tailored support it offers but also the systemic challenges present in mainstream education. These challenges include the lack of resources and comprehensive financing strategies (Buchner et al. 2021), negative attitudes, inadequate teacher training, and a lack of preparedness to effectively address microaggressions, bullying, and cyberbullying (Aragón et al. 2025; Arcangeli et al. 2020; Begara et al. 2019; Llauradó and Estévez 2024). Therefore, these intersecting factors highlight the urgent need for targeted interventions, quality research, and enhanced policies to promote genuine inclusion within mainstream educational settings.

The item *I study in a mainstream setting* was initially included due to its perceived relevance based on theoretical, bibliographic, and expert consultations. However, it was ultimately removed from the scale due to inadequate factor weight. This outcome suggests that the intended content of the item may not have been fully understood despite the provided clarification (i.e., *I am in an educational setting and in a classroom alongside students without disabilities. This means I am not in a special school or in a special classroom*). The inclusion of this explanation might have inadvertently caused further confusion, as mainstream education can still include students with disabilities, and special education can implement very inclusive practices. Our fieldwork revealed that participants frequently sought clarification regarding the distinctions between mainstream and special educational settings, indicating a lack of clear understanding and underscoring the complexity and contested nature of inclusive practices. Despite the removal of this item from the PD subscale, it remains crucial to evaluate the impact of studying in a mainstream versus a special setting not only on the PD subscale but across all QOL domains and CRPD rights. This understanding will enhance our insight into the relationship between educational settings and participants' perceptions, ultimately providing valuable implications for the broader understanding of citizenship and QOL for people with intellectual disability.

The analysis of self-reports and reports from others demonstrated a strong alignment in aspects where both groups agree, such as learning social skills and fostering independence, as well as having the necessary adaptations and materials. While both groups largely agree on having friends and learning about rights, people with intellectual disability expressed slightly higher satisfaction with these aspects, with a percentage difference of approximately seven points.

However, there are notable areas of divergence between the two groups, particularly regarding their expressions of dissatisfaction. This is evident in aspects such as learning about sexuality and family planning, acquiring the skills necessary for acquiring their desired jobs, and attending their desired educational center. In the latter two aspects, the percentage differences rise to 12 points, with people with intellectual disabilities again showing higher scores in their self-reports. This reflects a more favorable view of their experiences compared to the more critical perspectives of external informants. These differences may arise from varying viewpoints, social expectations, and potential gaps in knowledge, underscoring the importance of incorporating multiple perspectives (Dada et al. 2020). While the insights of people with intellectual disability are crucial, considering a range of viewpoints is vital to fully capture their experiences and needs. Furthermore, this diversity of opinions can enhance the understanding of those who may struggle to respond to the scale, providing alternatives and opportunities for appropriate support.

The results revealed that the lowest scores in the PD domain and inclusive education were linked to essential areas: learning about sexuality and family planning, attending the educational center of their choice, acquiring the skills necessary for employment, learning about rights, and participating in enjoyable activities. Thus, for instance, in Spain, students with intellectual disability may be compelled to attend a special school rather than the nearby mainstream school because it is argued that the latter cannot provide the necessary support. Many students are not receiving adequate support in crucial areas such as education, recreation, employment, independent living, sexuality, and family planning, all of which are vital for making informed decisions about their present and future. To address these barriers, targeted interventions and policy changes are required to fully realize the rights to PD and inclusive education. This includes implementing comprehensive sexuality education programs (Pérez-Curiel et al. 2023, 2024, 2025), ensuring person-centered support with greater flexibility in educational settings (Amor, Verdugo, et al. 2018), providing vocational training aligned with individual interests and labor market needs (Wehman et al. 2021), and developing inclusive and accessible recreational programs (Heister et al. 2023).

Although this study is groundbreaking, it is not without limitations. Firstly, the sample was one of convenience, determined by the willingness of contacted centers and individual participants. However, the sample size can be considered large, particularly in comparison to typical sample sizes used in the field of intellectual disability and given the challenges due to the absence of a comprehensive census of people with intellectual disability in Spain. Another common limitation in studies involving people with intellectual disability is the tendency to include participants with higher levels of functioning or those associated with organizations, which may bias the findings (Rosencrans et al. 2021). Secondly, despite ensuring anonymity and confidentiality, biases such as social desirability and acquiescence may have influenced the results. Thirdly, the study collected a limited range of sociodemographic variables (i.e., gender, date of birth, educational and/or employment status) from participants with intellectual disability. This limited scope was guided by ethical considerations related to risk minimization and proportionality, aiming to reduce fatigue and protect privacy. Moreover, some participants had limited familiarity with certain sociodemographic issues. Consequently, relevant variables—such as the level of intellectual disability, support needs, chronic health conditions, additional disabilities, concurrent behavioral or mental health problems, family background, or socioeconomic status—were not considered, despite their potential significant impact on the findings. Notably, the reports by others version of the #Rights4MeToo Scale incorporates many of these sociodemographic variables. Therefore, future research should strive to evaluate as many critical personal and contextual variables as possible. Understanding the influence of these factors will not only inform necessary policy changes but also enhance our comprehension of the impacts of educational settings on the experiences of people with intellectual disability.

Despite the limitations, this study represents a significant contribution to research on the QOL of people with intellectual disability, particularly regarding their rights to PD and inclusive education. The #Rights4MeToo scale, validated in Spain, is the first Easy-to-Read instrument created internationally to monitor compliance with the CRPD. The inclusion of perspectives from people with intellectual disability, their families, and professionals provides a comprehensive view of rights fulfillment. Its subscale on PD and inclusive education offers significant practical applications across various contexts.

In educational settings, the scale enables the assessment of the effectiveness of inclusive education practices, identifies gaps and guides the development of personal educational plans that encompass learning experiences. This ensures that plans meet the needs of students with intellectual disability and support their

PD while allowing for necessary adjustments to maintain genuinely inclusive educational environments.

For third-sector organizations—entities providing educational services such as special schools, vocational preparation, or transition to adulthood, as well as support for people with intellectual disability in mainstream settings—this subscale serves as a valuable tool for evaluating and enhancing the quality of their support services. By pinpointing areas where current practices may be lacking, organizations can implement targeted improvements, such as refining support strategies, promoting positive attitudes, providing specialized staff training, and increasing collaboration with families and other support networks.

For policymakers, the scale provides valuable insights into how well (or badly) current policies promote inclusive practices, guiding the development of new policies or adjustments to existing ones that better align with the CRPD and address the specific needs of students with intellectual disability. For instance, effective policies could enhance vocational and sexuality training opportunities, promote collaboration, and training among professionals across different sectors, facilitate participation from families and peers, and ensure adequate support, resources, materials, and funding in mainstream educational settings.

Additionally, researchers can leverage this scale to contribute to the body of knowledge on effective practices in inclusive education and the rights of people with intellectual disability. There is an urgent need for high-quality research in this field, as existing literature on the effectiveness of educational experiences is scarce and often suffers from significant methodological shortcomings (Hornby and Kauffman 2024). By using this scale, future studies can provide more robust insights that accurately reflect the experiences and challenges faced by students with intellectual disability. The data collected through the subscale can support longitudinal studies assessing the impact of different interventions, help identify emerging trends and needs, guide effective policy development, and advocate for meaningful changes. Furthermore, this research can contribute to evidence-based practices that enhance both the compliance with rights and PD outcomes of students with intellectual disability.

In conclusion, the tool not only facilitates learning and shifts attitudes regarding the rights of people with intellectual disability—essential for empowering them to exercise full citizenship—but also serves as a resource for monitoring (non)compliance with the CRPD. This tool provides invaluable information for person-centered planning, evidence-based practices, and the development of public policies aimed at eliminating barriers, combating prejudices, and promoting the QOL for people with intellectual disability.

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Ethics Statement

The study was approved by the Ethics Committee of University of Oviedo (17_RRI_2021) and the authorization of the Department of Social Rights and Welfare of the Principality of Asturias.

Consent

Informed consent was obtained from all participants in the study.

Conflicts of Interest

The authors declare no conflicts of interest.

Data Availability Statement

The data that support the findings of this study are available from the corresponding author upon reasonable request.

References

Abualghaib, O., N. Groce, N. Simeu, M. T. Carew, and D. Mont. 2019. “Making Visible the Invisible: Why Disability-Disaggregated Data Is Vital to “Leave No-One Behind”.” *Sustainability* 11, no. 11: 3091. https://doi.org/10.3390/su11113091.

Álvarez-Aguado, I., V. Vega, M. Farhang, et al. 2023. “Quality of Life in Adults With Intellectual Disabilities and Mental Health Problems.” *British Journal of Learning Disabilities* 51, no. 1: 53–61. https://doi.org/10.1111/bld.12490.

Amor, A. M., M. Hagiwara, K. A. Shogren, et al. 2018. “International Perspectives and Trends in Research on Inclusive Education: A Systematic Review.” *International Journal of Inclusive Education* 23, no. 2: 1–19. https://doi.org/10.1080/13603116.2018.1445304.

Amor, A. M., M. A. Verdugo, M. I. Calvo, P. Navas, and V. Aguayo. 2018. “Psychoeducational Assessment of Students With Intellectual Disability: Professional-Action Framework Analysis.” *Psicothema* 30, no. 1: 39–45. https://doi.org/10.7334/psicothema2017.175.

Aragón, S., M. L. Morán, P. Solís, Y. Fontanil, L. E. Gómez, and M. A. Alcedo. 2025. “Ableist-Microaggressions Towards People With Disabilities: A Systematic Review of Their Impact and Manifestations.” *Revista Española de Discapacidad* 13, no. 2: 7–27. https://doi.org/10.5569/2340-5104.13.02.01.

Arcangeli, L., A. Bacherini, C. Gaggioli, M. Sannipoli, and G. Balboni. 2020. “Attitudes of Mainstream and Special-Education Teachers Toward Intellectual Disability in Italy: The Relevance of Being Teachers.” *International Journal of Environmental Research and Public Health* 17, no. 19: e7325. https://doi.org/10.3390/ijerph17197325.

Bakoč, A. B. 2022. “Academic and Social Outcomes of Inclusive Education for Students With Typical Development” [Doctoral dissertation, University of Belgrade]. National Repository of Dissertations in Serbia. https://nardus.mpn.gov.rs/handle/123456789/22575.

Balboni, G., C. Mumbardó-Adam, and A. Coscarelli. 2020. “Influence of Adaptive Behaviour on the Quality of Life of Adults With Intellectual and Developmental Disabilities.” *Journal of Applied Research in Intellectual Disabilities* 33, no. 3: 584–594. https://doi.org/10.1111/jar.12702.

Begara, O., L. E. Gómez, and M. A. Alcedo. 2019. “Do Young People With Asperger Syndrome or Intellectual Disability Use Social Media and Are They Cyberbullied or Cyberbullies in the Same Way as Their Peers?” *Psicothema* 31, no. 1: 30–37. https://doi.org/10.7334/psicothema2018.243.

Buchner, T., M. Shevlin, M. A. Donovan, et al. 2021. "Same Progress for All? Inclusive Education, the United Nations Convention on the Rights of Persons With Disabilities and Students With Intellectual Disability in European Countries." *Journal of Policy and Practice in Intellectual Disabilities* 18, no. 1: 7–22. https://doi.org/10.1111/jppi.12368.

Buckley, S., G. Bird, B. Sacks, and T. Archer. 2006. "A Comparison of Mainstream and Special Education for Teenagers With Down Syndrome: Implications for Parents and Teachers." *Down's Syndrome, Research and Practice* 9, no. 3: 54–67. https://doi.org/10.3104/reports.295.

Byrne, B. 2022. "How Inclusive Is the Right to Inclusive Education? An Assessment of the UN Convention on the Rights of Persons With Disabilities' Concluding Observations." *International Journal of Inclusive Education* 26, no. 3: 301–318. https://doi.org/10.1080/13603116.2019.1651411.

CERMI. 2023. Derechos Humanos y Discapacidad. Informe España 2022 [Human Rights and Disability: Report Spain 2022]. http://back.cermi.es/catalog/novelty/file/u6jsa-informe-espana-2022final.docx.

Dada, S., A. K. Andersson, A. May, E. E. Andersson, M. Granlund, and K. Huus. 2020. "Agreement Between Participation Ratings of Children With Intellectual Disabilities and Their Primary Caregivers." *Research in Developmental Disabilities* 104: 103715. https://doi.org/10.1016/j.ridd.2020.103715.

Dalgaard, N. T., A. Bondebjerg, B. C. Viinholt, and T. Filges. 2022. "The Effects of Inclusion on Academic Achievement, Socioemotional Development and Wellbeing of Children With Special Educational Needs." *Campbell Systematic Reviews* 18, no. 4: e1291. https://doi.org/10.1002/cl2.1291.

Dell'Anna, S., M. Pellegrini, D. Ianes, and G. Vivanet. 2022. "Learning, Social, and Psychological Outcomes of Students With Moderate, Severe, and Complex Disabilities in Inclusive Education: A Systematic Review." *International Journal of Disability, Development and Education* 69, no. 6: 2025–2041. https://doi.org/10.1080/1034912X.2020.1843143.

Devi, N., B. Prodinger, A. Pennycott, R. Sooben, and J. Bickenbach. 2020. "Investigating Supported Decision-Making for Persons With Mild to Moderate Intellectual Disability Using Institutional Ethnography." *Journal of Policy and Practice in Intellectual Disabilities* 17, no. 2: 143–156. https://doi.org/10.1111/jppi.12314.

Didi, A., L. Dowse, and L. Smith. 2018. "Intellectual Disability and Complex Support Needs: Human Rights Perspective for Policy and Practice." *International Journal of Human Rights* 22, no. 8: 989–1006. https://doi.org/10.1080/13642987.2018.1485653.

Gómez, L. E., A. Monsalve, L. Morán, M. A. Alcedo, M. Lombardi, and R. L. Schalock. 2020. "Measurable Indicators of CRPD for People With Intellectual and Developmental Disabilities Within the Framework of Quality of Life." *International Journal of Environmental Research and Public Health* 17: e5123. https://doi.org/10.3390/ijerph17145123.

Gómez, L. E., L. Morán, S. Al-Halabí, C. Swerts, M. A. Verdugo, and R. L. Schalock. 2022. "Quality of Life and the International Convention on the Rights of Persons With Disabilities: Consensus Indicators for Assessment." *Psicothema* 34, no. 2: 182–191. https://doi.org/10.7334/psicothema2021.574.

Gómez, L. E., M. L. Morán, P. Navas, et al. 2024. "Using the Quality of Life Framework to Operationalize and Assess the CRPD Articles and the Sustainable Development Goals." *Journal of Policy and Practice in Intellectual Disabilities* 21, no. 1: e12470. https://doi.org/10.1111/jppi.12470.

Gómez, L. E., M. L. Morán, P. Navas, et al. 2024. Escala #YoTambién Tengo Derechos [#Rights4MeToo Scale]. INICO. https://tambientengoderechos.org.

Gómez, L. E., M. L. Morán, P. Solís, P. Sierra, P. Pérez-Curiel, and M. A. Verdugo. 2023. "The #Rights4MeToo Scale: A Tool to Monitor Compliance With the Convention on the Rights of Persons With Disabilities." *Siglo Cero* 54, no. 3: 11–33. https://doi.org/10.14201/scero.31228.

Gómez, L. E., E. Peña, B. Arias, and M. A. Verdugo. 2016. "Impact of Individual and Organizational Variables on Quality of Life." *Social Indicators Research* 125, no. 2: 649–664. https://doi.org/10.1007/s11205-014-0857-6.

Heister, N., P. Zentel, and S. Köb. 2023. "Participation in Everyday Leisure and Its Influencing Factors for People With Intellectual Disabilities: A Scoping Review of the Empirical Findings." *Disabilities* 3, no. 2: 269–294. https://doi.org/10.3390/disabilities3020018.

Heras, I., A. M. Amor, M. Á. Verdugo, and M. I. Calvo. 2021. "Operationalization of Quality of Life for Students With Intellectual and Developmental Disabilities to Improve Their Inclusion." *Research in Developmental Disabilities* 119: e104093. https://doi.org/10.1016/j.ridd.2021.104093.

Hornby, G., and J. M. Kauffman. 2024. "Inclusive Education, Intellectual Disabilities and the Demise of Full Inclusion." *Journal of Intelligence* 12, no. 2: 20. https://doi.org/10.3390/jintelligence12020020.

Krämer, S., J. Möller, and F. Zimmermann. 2021. "Inclusive Education of Students With General Learning Difficulties: A Meta-Analysis." *Review of Educational Research* 91, no. 3: 432–478. https://doi.org/10.3102/0034654321998072.

Lee, A., K. Knafl, and M. Van Riper. 2021. "Family Variables and Quality of Life in Children With Down Syndrome: A Scoping Review." *International Journal of Environmental Research and Public Health* 18, no. 2: 419. https://doi.org/10.3390/ijerph18020419.

Llauradó, E. V., and A. L. Estévez. 2024. "Bullying and Intellectual Disability From the Perspective of Students." *Journal of Intellectual Disabilities* 28, no. 2: 315–325. https://doi.org/10.1177/17446295231154109.

Lombardi, M., C. Claes, H. Vandenbussche, L. E. Gómez, and R. L. Schalock. 2025. "Using a Participative Process to Implement CRPD Articles Towards Quality of Life Outcomes." *Research in Developmental Disabilities* 162: 105025. https://doi.org/10.1016/j.ridd.2025.105025.

Lombardi, M., L. Croce, C. Claes, S. Vandevelde, and R. L. Schalock. 2016. "Factors Predicting Quality of Life for People With Intellectual Disability: Results From the ANFFAS Study in Italy." *Journal of Intellectual & Developmental Disability* 41, no. 4: 338–347. https://doi.org/10.3109/13668250.2016.1223281.

Lombardi, M., H. Vandenbussche, C. Claes, R. L. Schalock, J. De Maeyer, and S. Vandevelde. 2019. "The Concept of Quality of Life as Framework for Implementing the UNCRPD." *Journal of Policy and Practice in Intellectual Disabilities* 16: 180–190. https://doi.org/10.1111/jppi.12279.

Márquez, C., and S. Sánchez. 2023. *Estudio Sobre la Transformación de Las Escuelas en Espacios Inclusivos y Accesibles [Study on the Transformation of Schools Into Inclusive and Accessible Spaces]*. Real Patronato sobre Discapacidad. https://sid-inico.usal.es/wp-content/uploads/2023/06/transformacion-escuelas.pdf.

Martínez-Santiago, T. 2024. "An Update on the Voting Rights of People With Disabilities in the European Union." *Revista Española de Discapacidad* 12, no. 2: 141–159. https://doi.org/10.5569/2340-5104.12.02.08.

Morán, L., L. E. Gómez, G. Balboni, A. Bacherini, and A. Monsalve. 2024. "Quality of Life in Children and Adolescents With Cerebral Palsy and Intellectual Disability: Predictors and Personal Outcomes." *Child Indicators Research* 17: 123–143. https://doi.org/10.1007/s12187-023-10079-1.

Morán, L., L. E. Gómez, G. Balboni, A. Monsalve, M. A. Verdugo, and M. Rodríguez. 2022. "Predictors of Individual Quality of Life in Young People With Down Syndrome." *Rehabilitation Psychology* 67, no. 2: 205–214. https://doi.org/10.1037/rep0000443.

Moreno, M. I., M. L. Morán, P. Solís, L. E. Gómez, and M. A. Alcedo. 2022. "Actitudes Hacia Las Personas Con Discapacidad: Una Revisión de la Literatura [Attitudes Toward People With Disability: A Literature Review]." *Revista Española de Discapacidad* 10, no. 1: 7–27. https://doi.org/10.5569/2340-5104.10.01.01.

Murphy, K., and E. Bantry-White. 2021. "Behind Closed Doors: Human Rights in Residential Care for People With an Intellectual Disability in Ireland." *Disability & Society* 36, no. 5: 750–771. https://doi.org/10.1080/09687599.2020.1768052.

Navas, P., V. B. Arias, E. Vicente, et al. 2025. "Empowering Lives: How Deinstitutionalization and Community Living Improve the Quality of Life of Individuals With Intellectual and Developmental Disabilities." *Research in Developmental Disabilities* 157: 104909. https://doi.org/10.1016/j.ridd.2024.104909.

Navas, P., L. Esteban, V. Arias, and M. A. Verdugo. 2024. "Improving Quality of Life and Reducing Behavioral Problems of People With Intellectual and Developmental Disabilities Through Deinstitutionalization." *Psicothema* 36, no. 2: 113–122. https://doi.org/10.7334/psicothema2023.30.

Pérez-Curiel, P., E. Vicente, L. Morán, and L. E. Gómez. 2023. "The Right to Sexuality, Reproductive Health and Parenthood for People With Intellectual Disability: A Systematic Review." *International Journal of Environmental Research and Public Health* 20, no. 2: e1587. https://doi.org/10.3390/ijerph20021587.

Pérez-Curiel, P., E. Vicente, M. L. Morán, and L. E. Gómez. 2024. "What Do We Know About Sex Education of People With Intellectual Disabilities? An Umbrella Review." *British Journal of Learning Disabilities* 52, no. 2: 272–290. https://doi.org/10.1111/bld.12577.

Pérez-Curiel, P., E. Vicente, M. L. Morán, E. Martínez-Isla, and L. E. Gómez. 2025. "A Comprehensive Approach to Assessing the Right to Interpersonal Relationships, Home, and Family for People With Intellectual Disabilities." *Journal of Applied Research in Intellectual Disabilities* 38, no. 6: e70163. https://doi.org/10.1111/jar.70163.

Pinto, P. C., F. Fontes, P. Neca, S. Bento, and J. P. Alves. 2023. "Rights for All? Living Conditions and (de)citizenship of Adults With Intellectual and Complex Disabilities in Portugal." *Journal of Applied Research in Intellectual Disabilities* 36, no. 5: 1092–1100. https://doi.org/10.1111/jar.13128.

Rendoth, T., J. Duncan, and J. Foggett. 2022. "Inclusive Curricula for Students With Severe Intellectual Disabilities or Profound and Multiple Learning Difficulties: A Scoping Review." *Journal of Research in Special Educational Needs* 22, no. 1: 76–88. https://doi.org/10.1111/1471-3802.12544.

Robinson, S., K. R. Fisher, J. Laurens, et al. 2025. "Supported Decision-Making Rights in Behaviour Support Policies." *Australian Journal of Social Issues*. https://doi.org/10.1002/ajs4.70070.

Rosencrans, M., M. J. Tassé, M. Kim, et al. 2021. "Invisible Populations: Who Is Missing From Research in Intellectual Disability?" *Research in Developmental Disabilities* 119: e104117. https://doi.org/10.1016/j.ridd.2021.104117.

Santander, P., A. Cárdenas, M. Troncoso, et al. 2022. "Estudio de Calidad de Vida y Comportamiento Adaptativo en Niños y Adolescentes Con Discapacidad Intelectual [Study of Quality of Life and Adaptive Behavior in Children and Adolescents With Intellectual Disability]." *Siglo Cero* 53, no. 3: 127–143. https://doi.org/10.14201/scero202253127143.

Schalock, R. L., R. Luckasson, and M. J. Tassé. 2021. *Intellectual Disability: Definition, Diagnosis, Classification, and System of Supports*. 12th ed. AAIDD.

Schalock, R. L., and M. A. Verdugo. 2002. *Handbook on Quality of Life for Human Service Practitioners*. American Association on Mental Retardation.

Shutaleva, A., N. Martyushev, Z. Nikonova, et al. 2023. "Sustainability of Inclusive Education in Schools and Higher Education: Teachers and Students With Special Educational Needs." *Sustainability* 15, no. 4: 3011. https://doi.org/10.3390/su15043011.

Simões, C., and S. Santos. 2017. "The Impact of Personal and Environmental Characteristics on Quality of Life of People With Intellectual Disability." *Applied Research in Quality of Life* 12: 389–408. https://doi.org/10.1007/s11482-016-9466-7.

Stephenson, J., and R. Ganguly. 2022. "Analysis and Critique of the Advocacy Paper Towards Inclusive Education: A Necessary Process of Transformation." *Australasian Journal of Special and Inclusive Education* 46, no. 1: 113–126. https://doi.org/10.1017/jsi.2021.23.

United Nations. 2006. *Convention on the Rights of Persons with Disabilities*. https://www.ohchr.org/en/instruments-mechanisms/instruments/convention-rights-persons-disabilities.

Verdugo, M. A., P. Navas, L. E. Gómez, and R. L. Schalock. 2012. "The Concept of Quality of Life and Its Role in Enhancing Human Rights in the Field of Intellectual Disability." *Journal of Intellectual Disability Research* 56, no. 2: 1036–1045. https://doi.org/10.1111/j.1365-2788.2012.01585.x.

Verdugo, M. A., R. L. Schalock, L. E. Gómez, and P. Navas. 2025. "Supporting People in an Inclusive Society: An Inclusive Society Supports Model." *British Journal of Learning Disabilities* 54, no. 1: 39–47. https://doi.org/10.1111/bld.70014.

Wehman, P., C. Schall, L. Avellone, et al. 2021. "Achieving Competitive Integrated Employment for Individuals With Intellectual and Developmental Disabilities." In *APA Handbook of Intellectual and Developmental Disabilities (Volume 2). Clinical and Educational Implications: Prevention, Intervention, and Treatment*, edited by L. M. Glidden, L. Abbeduto, L. L. McIntyre, and M. J. Tassé, 333–355. American Psychological Association. https://doi.org/10.1037/0000195-013.

Woolfson, L. M. 2025. "Is Inclusive Education for Children With Special Educational Needs and Disabilities an Impossible Dream?" *British Journal of Educational Psychology* 95, no. 3: 725–737. https://doi.org/10.1111/bjep.12701.