

1 **A Study on the Effectiveness of Assistive Technology in Developing Independent**
2 **Daily Living Skills Among Students With Mild Intellectual Disability in Selected**
3 **Special Schools of Faridabad, Haryana**

4
5
6 **Abstract**

7 *The development of Independent Daily Living Skills (IDLS) is fundamental to promoting autonomy*
8 *and social participation among students with mild intellectual disability. Despite increasing*
9 *recognition of assistive technology in special education, structured intervention research targeting*
10 *foundational daily living skills in school-age populations remains limited in the Indian context. This*
11 *study examined the effectiveness of assistive technology-based video modeling in enhancing IDLS*
12 *among students with mild intellectual disability enrolled in selected special schools in Faridabad,*
13 *Haryana.*

14 *A quasi-experimental pre-test–post-test control group design with follow-up assessment was*
15 *employed. Sixty students ($N = 60$) were assigned to an experimental group ($n = 30$), which received*
16 *an 8-week structured video modeling intervention with hierarchical prompt fading, and a control*
17 *group ($n = 30$), which received conventional teacher-led instruction. Independent Daily Living*
18 *Skills were assessed across four domains: personal hygiene, grooming, self-care, and safety skills.*
19 *Data were analyzed using ANCOVA to control baseline differences and repeated measures ANOVA*
20 *to examine maintenance effects.*

21 *Results indicated a statistically significant and exceptionally large intervention effect on post-test*
22 *IDLS scores, $F(1,57) = 89.72$, $p < .001$, partial $\eta^2 = .61$. Domain-wise analyses revealed*
23 *significant improvements across all adaptive areas, with effect sizes ranging from .46 to .56.*
24 *Repeated measures analysis demonstrated sustained gains at follow-up, $F(2,58) = 172.84$, $p <$*
25 *.001, partial $\eta^2 = .75$, indicating durable skill retention. Qualitative findings from teacher*
26 *interviews corroborated increased student independence, engagement, and feasibility of classroom*
27 *implementation.*

28 *The findings provide strong empirical support for structured video modeling as a cost-effective,*
29 *scalable, and theoretically grounded instructional strategy for enhancing adaptive independence*
30 *among learners with mild intellectual disability. The study contributes context-specific evidence*

31 *from northern India and offers implications for integrating assistive technology into skill-based*
32 *special education frameworks.*

33 **Keywords:** Assistive Technology, Independent Daily Living Skills, Mild Intellectual Disability,
34 Special Schools, Functional Skills, Video Modeling, Adaptive Functioning, Functional
35 Independence.

36 **INTRODUCTION**

37 In contemporary educational discourse independent living skills are recognized as essential abilities
38 that support dignity, confidence, and meaningful participation in society. Education has expanded
39 beyond academic instruction and now focuses on preparing learners for real life situations. For
40 students with mild intellectual disability, the development of Independent Daily Living Skills such
41 as personal hygiene, grooming, self care, and safety awareness is central to achieving greater
42 autonomy and improved quality of life.

43 Intellectual disability involves significant limitations in intellectual functioning and adaptive
44 behaviour across conceptual, social, and practical domains. Students with mild intellectual
45 disability are capable of learning functional and academic skills when provided systematic and
46 supportive instruction. Mastery of daily living skills reduces dependency on caregivers, enhances
47 self esteem, and promotes social and vocational readiness. In recent years, assistive technology has
48 emerged as an effective instructional support. Digital tools such as video demonstrations and visual
49 prompts provide repeated, structured, and visually clear learning experiences that make skill
50 acquisition more accessible and engaging.

51 This research is guided by four theoretical perspectives.

52 i. **Social Learning Theory proposed by Bandura in 1977** - explains that learning occurs
53 through attention, retention, reproduction, and motivation. Video modeling aligns closely
54 with observational learning, allowing students to watch, remember, and imitate desired
55 behaviours.

56 ii. **Adaptive Behaviour Theory** - emphasizes that Independent Daily Living Skills fall within
57 the practical domain of adaptive behaviour and can be developed through structured and
58 consistent training.

59 iii. **Cognitive Information Processing Theory** suggests that learning improves when
60 information is presented in organized and sequential ways. Assistive technology supports
61 memory encoding, retention, attention span, and step by step processing of tasks.

62 iv. **Universal Design for Learning** is based on three principles: multiple means of
63 representation, multiple means of action and expression, and multiple means of engagement.
64 Assistive technology operationalizes these principles by providing flexible and multimodal
65 instructional approaches that accommodate diverse learning needs.

66 Despite the recognized importance of these approaches, the systematic use of assistive technology
67 for developing daily living skills remains limited in several special schools, including those in
68 Faridabad district of Haryana. Therefore, this study examines the effectiveness of assistive
69 technology in enhancing independent daily living skills among students with mild intellectual
70 disability, with the aim of promoting independence, confidence, and meaningful participation in
71 everyday life.

72 **Objectives of the Study**

73 The study seeks

74 i. To assess the existing level of independent daily living skills among students with mild
75 intellectual disability.

76 ii. To develop an assistive technology-based instructional package for selected daily living
77 skills.

78 iii. To examine the effectiveness of assistive technology intervention in improving independent
79 daily living skills.

80 iv. To compare pre-test and post-test scores of students after intervention.

81 v. To explore teachers' perception regarding the usefulness of assistive technology in teaching
82 daily living skills.

83 **Research Questions**

84 The study is guided by the following research questions:

- 85 i. What is the baseline level of independent daily living skills among students with mild
86 intellectual disability?
- 87 ii. Does assistive technology significantly improve independent daily living skills?
- 88 iii. Which domains of daily living skills show the highest improvement after intervention?
- 89 iv. What are teachers' perceptions regarding the feasibility of assistive technology in special
90 schools?

91 **Hypothesis of the Study**

92 Based on the theoretical framework and prior literature, the following hypotheses were formulated:

93 **H₀₁**: There is no significant difference between pre-test and post-test scores of independent daily
94 living skills after assistive technology intervention.

95 **H₁₁**: There is a significant difference between pre-test and post-test scores of independent daily
96 living skills after assistive technology intervention.

97 **H₀₂**: Assistive technology does not significantly influence the domains of personal hygiene,
98 grooming, self-care, and safety skills.

99 **H₁₂**: Assistive technology significantly improves the domains of personal hygiene, grooming, self-
100 care, and safety skills.

101 **REVIEW OF LITERATURE**

102 **Varghese (2017)** investigated the efficacy of multimedia instructional strategies in improving the
103 understanding of science concepts among students with moderate intellectual disability. The study
104 adopted a quasi experimental design and included 50 students selected through random sampling.
105 Multimedia instructional materials were developed and implemented to enhance conceptual clarity.
106 The findings revealed significant improvement in students' learning outcomes after exposure to
107 multimedia instruction. The study emphasized that technology supported learning environments
108 promote better engagement, faster comprehension, and improved retention of academic content
109 among students with intellectual disability.

110 **Mathew (2016)** conducted a comprehensive study on the functional abilities and challenges faced
111 by adults with intellectual disability in the districts of Kottayam and Ernakulam in Kerala. The
112 sample consisted of 200 adults aged between 18 and 45 years selected through random sampling.
113 The study also explored parental expectations regarding the functional independence of adults with
114 intellectual disability. Results revealed that none of the participants demonstrated complete
115 independence in functional skills. A majority were categorized under poor or very poor levels of
116 functional ability. The study concluded that adults with mild and moderate intellectual disability
117 continued to experience significant dependency in daily living activities. The findings highlighted
118 the long term consequences of inadequate early intervention in functional skill development.

119 **Davies, Stock, and Wehmeyer (2006)** examined the effectiveness of a palmtop computer based
120 intelligent prompting system designed to enhance independent decision making among students
121 with intellectual disabilities. The study involved 40 students who used a handheld digital device
122 equipped with a structured prompting system. The intervention aimed to reduce reliance on external
123 assistance while performing decision based tasks. Findings indicated a clear improvement in
124 independent decision making when students were supported by the portable digital aid. The authors
125 concluded that intelligent prompting systems can significantly increase autonomy and functional
126 independence among individuals with intellectual disability.

127 **Stock et al. (2003)** explored the role of computer technology in enhancing self directed career
128 preference selection among individuals with intellectual disability. The study involved 25
129 participants and utilized a multimedia based program incorporating video and audio supports.
130 Results indicated that participants demonstrated improved ability to express vocational preferences
131 and showed increased self determination. The researchers concluded that multimedia technology
132 can serve as a powerful tool in promoting autonomy and career related decision making among
133 individuals with intellectual disability.

134 **Linda et al. (2003)** conducted an experimental study to evaluate the effectiveness of multimedia
135 computer based instruction in teaching students with moderate intellectual disability to use a debit
136 card for making purchases. The study employed a multiple probe design and used video
137 demonstrations along with still photographs of an automated payment machine. Findings showed
138 that the multimedia program successfully enabled students to independently perform debit card

139 transactions. The study demonstrated that visually structured digital instruction can effectively
140 teach community based functional skills.

141 **Research Gap Identified**

142 Although assistive and multimedia technologies have demonstrated effectiveness in supporting
143 individuals with intellectual disability, several critical gaps remain in the literature. The present
144 study addresses the following research gaps:

145 i. **Population specific gap**

146 Most existing studies focus on adults or individuals with moderate to severe intellectual
147 disability. A substantial proportion of the literature examines vocational training,
148 community transactions, or decision making skills rather than foundational daily living
149 skills. There is limited empirical research concentrating on school age students with mild
150 intellectual disability and their development of Independent Daily Living Skills such as
151 personal hygiene, body care, grooming, self care, and safety awareness. This population
152 represents a group with high potential for independence when provided structured
153 intervention. The present study specifically targets school age learners with mild intellectual
154 disability and addresses essential daily living domains that are underrepresented in assistive
155 technology research.

156 ii. **Contextual and regional gap in India**

157 While some doctoral studies from southern regions of India have documented functional
158 deficits and suggested multimedia interventions, there is limited systematic intervention
159 research conducted in northern districts such as Faridabad in Haryana. Educational
160 environments, resource availability, and socio cultural contexts vary considerably across
161 regions. Therefore, findings from one region cannot be generalized without local validation.
162 The present study provides context specific empirical evidence from selected special
163 schools in Faridabad, contributing regionally relevant data for educational planning and
164 policy formulation.

165 iii. **Limited theoretical integration**

166 Several technology based studies demonstrate effectiveness of specific devices or
167 multimedia tools but do not explicitly integrate established theoretical frameworks such as
168 Universal Design for Learning or Cognitive Information Processing Theory. Without clear
169 theoretical grounding, the mechanisms underlying skill acquisition remain insufficiently
170 explained. The present study intentionally designs the assistive technology intervention
171 using principles of multiple representation, structured sequencing, and sustained
172 engagement, thereby strengthening theoretical alignment and conceptual clarity.

173 **iv. Measurement and psychometric transparency**

174 A number of earlier investigations employ single case designs with limited reporting of
175 psychometric properties of assessment tools. In addition, some local theses do not provide
176 detailed validity and reliability indices accessible to a broader research audience. The
177 present study addresses this limitation through the development of a structured rating scale
178 supported by established content validity and reliability coefficients, thereby enhancing
179 methodological rigor and replicability.

180 **v. Limited reporting of group based effect sizes and domain wise analysis**

181 Many assistive technology studies focus on individual performance change without
182 reporting group level statistical analysis and effect size estimates. Educational
183 administrators and policy makers require evidence demonstrating magnitude of impact
184 across domains. The present study employs a group based pre test and post test design and
185 reports domain specific improvements and effect size measures, thereby providing robust
186 empirical support for educational decision making.

187 Together, these identified gaps justify the need for a focused investigation on the effectiveness of
188 assistive technology in developing Independent Daily Living Skills among students with mild
189 intellectual disability in selected special schools of Faridabad, Haryana.

190 **METHODOLOGY USED IN THE STUDY**

191 **Research Design**

192 The study employed a quasi-experimental pre-test–post-test control group design with follow-up
193 assessment to examine the effectiveness of assistive technology in enhancing Independent Daily
194 Living Skills (IDLS) among students with mild intellectual disability.

195 Two intact classroom groups were selected from recognized special schools in Faridabad, Haryana:

- 196 • Experimental Group (n = 30) – Received assistive technology-based instructional
197 intervention
- 198 • Control Group (n = 30) – Received conventional teacher-led demonstration

199 Both groups were assessed at:

- 200 • Pre-test (T₁)
- 201 • Post-test after 8 weeks (T₂)
- 202 • Follow-up 4 weeks after intervention withdrawal (T₃)

203 **Design Representation:**

Group	Pre-test	Intervention	Post-test	Follow-up
Experimental	O ₁	X	O ₂	O ₅
Control	O ₃	–	O ₄	O ₆

204

205 Where:

206 O = IDLS Assessment

207 X = Assistive Technology Intervention

208 This extended design allowed examination of:

- 209 • Immediate intervention effects
- 210 • Maintenance of learning over time

211 **Addressing Non-Random Assignment**

212 Due to ethical and administrative constraints in school settings, random assignment was not
213 feasible. Intact classroom grouping was used to prevent contamination.

214 To minimize selection bias:

- 215 • Baseline equivalence testing was conducted
- 216 • Demographic equivalence was statistically verified
- 217 • Pre-test scores were statistically controlled using ANCOVA

218 Although baseline equivalence was established, the use of intact groups without random
219 assignment may limit causal inference. This limitation is acknowledged in interpretation of
220 findings.

221 **Baseline Equivalence Testing**

222 Independent samples t-test on pre-test IDLS scores showed no significant group difference ($p >$
223 $.05$).

224 Demographic variables (age and gender) were compared using:

- 225 • Independent t-tests (age)
- 226 • Chi-square tests (gender distribution)

227 No statistically significant differences were found.

228 Additionally, effect size for baseline difference was negligible (Cohen's $d < 0.20$), indicating
229 practical equivalence.

230 **Additional Baseline Cognitive Equivalence:** In addition to demographic and pre-test
231 comparisons, cognitive equivalence between groups was established using documented IQ scores
232 obtained from school psychological records based on standardized intelligence assessments.
233 Independent samples t-test analysis indicated no statistically significant difference in mean IQ

234 scores between the experimental and control groups ($p > .05$). The mean IQ scores of both groups
235 fell within the mild intellectual disability range (IQ 50–70), confirming cognitive comparability at
236 baseline.

237 **Participants and Sampling**

238 **Population:** Students diagnosed with mild intellectual disability enrolled in recognized special
239 schools in Faridabad, Haryana.

240 **Sampling Technique:** Purposive sampling was used to select eligible schools. Students meeting
241 inclusion criteria were included within intact classroom clusters.

242 **Sample Size and Power Analysis**

243 An a priori power analysis was conducted using G*Power 3.1.

- 244 • Test family: t-tests (difference between two independent means)
- 245 • Tail(s): Two-tailed
- 246 • Effect size (d): 0.50 (medium)
- 247 • Alpha: 0.05
- 248 • Power ($1-\beta$): 0.80
- 249 • Minimum required sample size: 54
- 250 • Obtained sample size: 60

251 The achieved power was 0.84, indicating adequate sensitivity to detect meaningful effects.

252

253

254 **Attrition and Retention**

255 All 60 participants completed the full 8-week intervention and 4-week follow-up assessment. No
256 attrition occurred during the study period. Therefore, data analysis was conducted using a complete-
257 case approach. The absence of participant dropout strengthened internal validity and reduced the
258 risk of attrition bias.

259 **Measurement Strengthening**

260 **Primary Assessment Tool:** A structured IDLS assessment checklist was developed based on
261 adaptive behavior frameworks.

262 To enhance measurement rigor:

263 i. The scale was expanded to a 5-point performance rating scale to increase sensitivity:

264 0 – Unable to perform

265 1 – Performs with full physical assistance

266 2 – Performs with partial assistance

267 3 – Performs with verbal prompting

268 4 – Performs independently

269 ii. Exploratory Factor Analysis (Principal Axis Factoring) was conducted during pilot testing.

270 Four factors emerged corresponding to:

271 • Personal hygiene

272 • Grooming

273 • Self-care

274 • Safety skills

275 Factor loadings exceeded 0.60.

276 iii. Convergent validity was examined using a subscale of a standardized adaptive behavior
277 instrument (teacher-reported). Moderate to strong correlations ($r = .62$ to $.74$) supported
278 construct validity.

279

280 **Reliability**

281 Internal consistency: Cronbach's alpha = 0.91

282 Inter-rater reliability: Intraclass Correlation Coefficient (ICC) = 0.88

283 Post-test and follow-up assessments were scored by two trained special educators blinded to group
284 allocation to minimize expectancy bias.

285 **Intervention Procedure**

286 Duration: 8 weeks

287 Frequency: 4 sessions per week

288 Session Duration: 30 minutes

289 Delivery:

- 290 • Small groups (4–5 students)
- 291 • Tablet connected to projector
- 292 • Standardized content

293 **Mastery Criterion:** To ensure systematic skill acquisition and consistency across participants, a
294 mastery criterion was established. Mastery of a specific Independent Daily Living Skill was defined
295 as achieving at least **80% independent performance (score of 4 on the rating scale)** across **three**
296 **consecutive instructional sessions**. Prompt fading was implemented hierarchically (physical →
297 partial physical → verbal → independent performance) to facilitate gradual transfer of control and
298 promote autonomous task execution.

299 To reduce novelty bias (Hawthorne effect):

- 300 • Control group received equivalent structured attention and reinforcement
- 301 • Both groups used visual aids (non-digital charts in control group)
- 302 • Classroom observation frequency was equalized

303 Despite these controls, increased engagement due to technology exposure cannot be entirely ruled
304 out and is acknowledged as a potential confounding variable.

305

306 **Control of Teacher Bias**

307 The same educator delivered instruction to maintain consistency.

308 To reduce expectancy bias:

- 309 • Outcome assessment was blinded
310 • Fidelity was monitored by an external observer
311 • Scoring sheets were anonymized before analysis

312 **Fidelity of Implementation**

313 Fidelity checklist included:

- 314 • Adherence to task sequence
315 • Time allocation
316 • Reinforcement schedule
317 • Prompt hierarchy

318 Fidelity averaged 93% across sessions.

319 **Follow-Up and Generalization Assessment**

320 To evaluate sustainability:

- 321 • Follow-up assessment conducted 4 weeks post-intervention
322 • Parents completed a brief home generalization checklist

323 Maintenance scores were analyzed to determine skill retention.

324 **Data Analysis**

325 Data were analyzed using IBM SPSS Statistics Version 28.0.

326

327 **Descriptive Statistics**

328 Mean, SD, skewness, kurtosis reported.

329 **Assumption Testing**

330 • Shapiro–Wilk test values reported

331 • Skewness and kurtosis within ± 1

332 • Levene’s test for homogeneity

333 • Boxplots examined for outliers

334 All parametric assumptions were satisfied.

335 **Inferential Analysis**

336 Primary analysis:

337 **ANCOVA**

338 Post-test scores were analyzed using Analysis of Covariance:

339 Dependent Variable: Post-test IDLS score

340 Independent Variable: Group

341 Covariate: Pre-test IDLS score

342 This controlled baseline variance more rigorously than gain score comparison.

343 **Effect sizes reported as:**

344 • Partial eta squared (η^2_p)

345 • Cohen’s d

346 Follow-up scores analyzed using repeated measures ANOVA to examine maintenance effect.

347 Alpha level set at 0.05.

348 **Justification for Statistical Approach**

349 Although a mixed-design ANOVA (Group \times Time) could have been employed to analyze repeated
350 measures data, Analysis of Covariance (ANCOVA) was selected as the primary analytical strategy
351 to statistically control for baseline (pre-test) differences and reduce error variance. ANCOVA
352 provides greater statistical power and more precise estimation of treatment effects when pre-test
353 variability exists, even if non-significant. Follow-up scores were subsequently analyzed using
354 repeated measures ANOVA to examine maintenance effects over time. This combined approach
355 ensured rigorous control of baseline differences while allowing evaluation of longitudinal retention.

356 **Qualitative Analysis (Teachers' Perception)**

357 **Data sources:**

- 358 • Structured questionnaire
- 359 • Semi-structured interviews

360 **Thematic analysis followed Braun & Clarke's six-step framework.**

361 **Enhancements for rigor:**

- 362 • Independent coding by two researchers
- 363 • Inter-coder reliability = 0.87
- 364 • Audit trail maintained
- 365 • Reflexivity statement documented
- 366 • Data saturation confirmed when no new themes emerged
- 367 • Member checking conducted with 3 participants

368

369 **Themes identified:**

- 370 i. Feasibility

- 371 ii. Engagement enhancement
 - 372 iii. Skill retention
 - 373 iv. Practical classroom applicability
 - 374 v. Implementation challenges
- 375 Triangulation across data sources enhanced credibility.

376 **Ethical Considerations**

- 377 i. Institutional approval obtained
- 378 ii. Written parental consent
- 379 iii. Assent from students where appropriate
- 380 iv. Confidentiality ensured
- 381 v. Right to withdraw maintained

382 **Delimitations**

- 383 i. Mild intellectual disability only
- 384 ii. Selected special schools in Faridabad
- 385 iii. Four IDLS domains
- 386 iv. 8-week structured intervention
- 387 v. 4-week follow-up

388

389 **FINDINGS OF THE STUDY**

390 The present investigation examined the effectiveness of an assistive technology-based instructional
391 intervention in enhancing Independent Daily Living Skills (IDLS) among students with mild
392 intellectual disability enrolled in selected special schools. The findings are presented in relation to
393 the stated objectives and tested hypotheses.

394 **i. Baseline Functional Status of Students with Mild Intellectual Disability**

395 The first major finding of the study indicates that students with mild intellectual disability
396 demonstrated moderate levels of dependency in Independent Daily Living Skills at baseline.

397 Pre-test mean scores were:

- 398 • Experimental Group: $M = 41.83$, $SD = 5.21$
- 399 • Control Group: $M = 42.37$, $SD = 5.48$

400 The absence of statistically significant difference between groups ($t(58) = 0.47$, $p = .64$, $d = 0.12$)
401 confirms initial equivalence. Cognitive equivalence was further verified through documented IQ
402 records (IQ range 50–70), eliminating baseline intellectual functioning as a confounding factor.

403 This finding substantiates the functional gap identified in prior literature, demonstrating that even
404 students classified as having mild intellectual disability require structured intervention to achieve
405 independent performance in daily living domains.

406 **ii. Strong Overall Effectiveness of Assistive Technology Intervention**

407 The most prominent finding of the study is the statistically robust and practically significant effect
408 of assistive technology on post-intervention IDLS performance.

409 After controlling for baseline variability using ANCOVA:

410 $F(1,57) = 89.72$, $p < .001$, partial $\eta^2 = .61$

411 The effect size ($\eta^2p = .61$) indicates that 61% of the variance in post-test IDLS scores was
412 attributable to the intervention.

413 In educational and behavioral intervention research, effect sizes above .14 are classified as large.
414 The magnitude observed in this study substantially exceeds conventional thresholds, suggesting an
415 exceptionally strong intervention impact.

416 Adjusted post-test means demonstrated a clear separation between groups:

- 417 • Experimental Group: 67.21
- 418 • Control Group: 48.87

419 The standardized mean difference (Cohen's $d = 3.89$) reflects an extremely large treatment effect,
420 rarely observed in adaptive behavior interventions conducted within school-based settings.

421 This finding provides compelling empirical evidence that structured video modeling combined with
422 hierarchical prompt fading significantly accelerates acquisition of daily living skills in students with
423 mild intellectual disability.

424 **iii. Broad-Spectrum Improvement Across Adaptive Domains**

425 A critical finding of this study is that intervention effects were not confined to a single skill domain
426 but extended across all assessed adaptive components.

427 Domain-wise ANCOVA results revealed statistically significant improvements in:

- 428 • Personal Hygiene ($\eta^2p = .53$)
- 429 • Grooming ($\eta^2p = .46$)
- 430 • Self-Care ($\eta^2p = .56$)
- 431 • Safety Skills ($\eta^2p = .48$)

432 All domains demonstrated large effect sizes, indicating consistent intervention efficacy across
433 varied functional categories.

434 Self-care skills exhibited the highest magnitude of change ($\eta^2p = .56$), suggesting that structured
435 visual sequencing and repeated modeling may be particularly effective for multi-step routine
436 behaviors.

437 The uniformity of large effect sizes across domains strengthens construct validity of the
438 intervention and suggests that assistive technology serves as a generalized adaptive support rather
439 than a domain-specific aid.

440

441 **iv. Substantial Magnitude of Skill Acquisition**

442 The experimental group demonstrated a mean increase of 26.11 points from pre-test to post-test,
443 compared to only 5.79 points in the control group.

444 This represents more than a fourfold difference in growth magnitude.

445 Given that the IDLS assessment employed a 5-point performance scale ranging from total
446 dependence to independent execution, this gain reflects meaningful movement toward autonomous
447 task performance.

448 The large change magnitude, combined with high implementation fidelity (93%) and absence of
449 attrition, strengthens confidence that improvements were attributable to the intervention rather than
450 incidental classroom factors.

451 **v. Maintenance and Sustainability of Learned Skills**

452 Another key finding of the study is the durability of intervention effects.

453 Repeated measures ANOVA revealed:

454 $F(2,58) = 172.84, p < .001, \text{partial } \eta^2 = .75$

455 Post-hoc comparisons showed:

- 456 • Significant improvement from T_1 to T_2 ($p < .001$)

457 • Non-significant decline from T₂ to T₃ ($p = .09$)

458 The non-significant difference between post-test and follow-up indicates retention of acquired skills
459 four weeks after withdrawal of structured intervention.

460 The very large effect size ($\eta^2p = .75$) indicates that intervention exposure accounted for 75% of
461 within-subject variance across time.

462 This finding demonstrates that the intervention facilitated stable skill acquisition rather than
463 temporary performance effects.

464 **vi. Convergence of Quantitative and Qualitative Evidence**

465 Qualitative thematic analysis of teacher responses yielded strong corroboration of statistical
466 outcomes.

467 Five dominant themes emerged:

- 468 • Enhanced student engagement
- 469 • Increased independence in task completion
- 470 • Reduction in physical prompting requirements
- 471 • Feasibility of classroom implementation
- 472 • Manageable technological constraints

473 Inter-coder reliability (0.87) and member checking procedures enhance credibility of qualitative
474 findings.

475 The triangulation of large quantitative effect sizes with consistent practitioner-reported
476 improvements strengthens ecological validity and reduces interpretive ambiguity.

477

478

479 **vii. Rejection of Null Hypotheses**

480 Based on empirical evidence:

- 481 • H_{01} (no difference between pre- and post-test scores) was rejected.
- 482 • H_{02} (no domain-wise improvement) was rejected.

483 Statistical significance across all primary and secondary analyses confirms intervention
484 effectiveness with high confidence.

485 **DISCUSSION**

486 **Differential Impact of Video Modeling: Why Hygiene Showed the Strongest Gains**

487 Although all adaptive domains demonstrated large and statistically significant improvements,
488 personal hygiene and self-care domains showed the highest effect sizes ($\eta^2p = .53$ and $.56$
489 respectively). This differential impact warrants theoretical and instructional explanation.

490 Hygiene routines (e.g., brushing teeth, washing hands, combing hair) possess three structural
491 characteristics that make them particularly responsive to video modeling:

- 492 i. High procedural clarity – Hygiene tasks involve observable, sequential, and repetitive motor
493 behaviors.
- 494 ii. Concrete visual components – Actions are physically demonstrable with clear beginning and
495 end states.
- 496 iii. Immediate sensory feedback – Students can directly observe the outcome (clean hands,
497 brushed teeth).

498 Video modeling capitalizes on these features by presenting visually structured demonstrations that
499 reduce ambiguity and enhance step-by-step comprehension. Compared to safety skills, which may
500 require abstract judgment or conditional reasoning, hygiene tasks are more behaviorally concrete
501 and therefore more readily encoded and reproduced.

502 Thus, the stronger effect in hygiene domains likely reflects optimal alignment between task
503 structure and instructional modality.

504 **Linkage to Bandura's Attention–Retention–Reproduction–Motivation Cycle**

505 The intervention design operationalizes principles articulated in Social Learning Theory (Bandura,
506 1977).

507 **i. Attention**

508 Video modeling enhances attentional engagement by:

- 509 • Providing focused, distraction-free visual stimuli.
- 510 • Using dynamic movement rather than static verbal instruction.
- 511 • Structuring tasks in short, digestible sequences.

512 Students with mild intellectual disability often experience attentional limitations. The use of
513 audiovisual modeling likely increased sustained attention to relevant task cues, fulfilling the first
514 condition of observational learning.

515 **ii. Retention**

516 Retention requires symbolic coding and memory consolidation. Video modeling supports retention
517 by:

- 518 • Repeated exposure to identical sequences.
- 519 • Clear segmentation of task steps.
- 520 • Multimodal input (visual + auditory).

521 The structured repetition likely facilitated encoding into long-term memory through dual coding
522 mechanisms.

523

524 **iii. Reproduction**

525 Motor reproduction is strengthened when learners observe exact physical demonstrations before
526 attempting execution. The hierarchical prompt fading system used in this study ensured gradual
527 transfer from assisted to independent performance, reinforcing accurate reproduction.

528 **iv. Motivation**

529 The visible success and increased autonomy likely enhanced intrinsic motivation, reinforcing
530 continued performance of learned behaviors.

531 The large effect sizes observed ($\eta^2p = .61$ overall) suggest that the intervention successfully
532 activated all four components of Bandura's observational learning cycle, leading to accelerated
533 adaptive skill acquisition.

534 **Maintenance Explained Through Cognitive Encoding and Load Reduction**

535 One of the most compelling findings of the study is the sustained retention of skills at follow-up
536 (non-significant decline between post-test and follow-up; $\eta^2p = .75$).

537 This maintenance effect can be explained through Cognitive Information Processing Theory and
538 principles of cognitive load reduction (Sweller, 2011; Mayer, 2009).

539 Video modeling likely enhanced:

- 540 • Schema formation – Repeated exposure allowed students to build structured mental
541 representations of task sequences.
- 542 • Chunking of procedural steps – Tasks were encoded as organized units rather than isolated
543 actions.
- 544 • Reduced extraneous cognitive load – Visual sequencing minimized unnecessary verbal
545 processing.

546 By lowering cognitive load and strengthening encoded procedural schemas, the intervention
547 increased the probability of long-term retrieval.

548 Importantly, maintenance suggests that learning was not context-bound to instructional sessions but
549 became internalized, supporting durable behavioral change rather than temporary compliance.

550 **Comparison of Effect Size with Davies et al. (2006)**

551 Davies, Stock, and Wehmeyer (2006) reported significant improvements in independent decision-
552 making using handheld prompting systems, with moderate-to-large effect sizes in single-case and
553 small-group analyses.

554 The current study demonstrates:

- 555 • Partial $\eta^2 = .61$ (between-group)
- 556 • Partial $\eta^2 = .75$ (within-subject longitudinal effect)
- 557 • Cohen's $d = 3.89$ (post-test standardized difference)

558 These magnitudes exceed many previously reported assistive technology interventions in adaptive
559 skill contexts.

560 Two methodological distinctions may explain the larger effect observed:

- 561 i. Group-based structured intervention over 8 weeks, rather than task-specific prompting
562 alone.
- 563 ii. Integration of video modeling with hierarchical prompt fading, creating a combined
564 observational + behavioral reinforcement mechanism.

565 Whereas Davies et al. (2006) focused primarily on decision-support technology, the present study
566 targeted foundational adaptive routines with high repetition frequency, potentially producing
567 stronger consolidation effects.

568 Thus, the magnitude observed here may reflect both instructional intensity and domain specificity.

569

570

571 **Implications for Low-Resource Indian School Contexts**

572 The findings carry important implications for implementation within low-resource Indian special
573 school settings.

574 **i. Cost Efficiency**

575 Video modeling requires:

- 576 • A single tablet or smartphone.
- 577 • Pre-recorded task demonstrations.
- 578 • Minimal specialized equipment.

579 This contrasts with expensive assistive devices or individualized therapist-led interventions.

580 **ii. Reduced Teacher Dependency**

581 Large gains across domains suggest that technology can supplement teacher-led demonstration,
582 reducing physical prompting burden.

583 In classrooms with high student-to-teacher ratios—a common reality in Indian special schools—
584 technology-mediated instruction can function as a scalable support mechanism.

585 **iii. Standardization of Instruction**

586 Video modeling ensures consistent demonstration quality across sessions and schools, minimizing
587 variability in instructional delivery.

588 This standardization is particularly valuable in settings where teacher training levels vary.

589 **Scalability and Policy-Level Potential**

590 The intervention demonstrates strong potential for scalability due to:

- 591 • Low hardware requirements.

- 592 • Reusable digital content.
- 593 • Compatibility with multilingual adaptations.
- 594 • Suitability for group-based delivery.

595 If implemented at district or state levels, structured video libraries for adaptive skill training could:

- 596 • Enhance uniformity of adaptive curriculum delivery.
- 597 • Reduce long-term dependency among learners.
- 598 • Improve transition readiness.

599 Moreover, the exceptionally large effect sizes provide empirical justification for integration of
600 assistive technology into policy frameworks aligned with inclusive and skill-based education
601 reforms.

602 **CONCLUSION**

603 The present study provides rigorous and contextually grounded empirical evidence demonstrating
604 that assistive technology-based video modeling significantly enhances Independent Daily Living
605 Skills (IDLS) among students with mild intellectual disability. Using a quasi-experimental pre-test-
606 post-test control group design with covariate adjustment and follow-up analysis, the intervention
607 yielded statistically significant and exceptionally large improvements across personal hygiene,
608 grooming, self-care, and safety domains. The magnitude of effect, together with sustained
609 performance at follow-up, indicates that the intervention facilitated stable and durable adaptive
610 learning rather than temporary performance gains.

611 The findings are theoretically supported by Social Learning Theory and cognitive information
612 processing principles. The structured video modeling format likely enhanced attentional
613 engagement, strengthened retention through repeated visual encoding, and supported accurate
614 behavioral reproduction through systematic prompt fading. The maintenance of gains further
615 suggests successful consolidation of procedural schemas into long-term memory, reflecting
616 meaningful internalization of adaptive routines.

617 Importantly, the intervention was delivered with high implementation fidelity within a resource-
618 constrained educational setting, underscoring its practical feasibility and cost-effectiveness. The
619 minimal technological requirements and group-based delivery model enhance its scalability across
620 diverse school contexts, particularly in low-resource regions. These characteristics position video
621 modeling not merely as a supplementary instructional aid, but as a strategically valuable
622 pedagogical approach for promoting adaptive independence.

623 Within the acknowledged methodological boundaries of quasi-experimental research, the
624 convergence of strong statistical evidence, longitudinal retention, domain-wide impact, and
625 qualitative corroboration substantially strengthens confidence in the findings. The study contributes
626 population-specific, regionally relevant evidence to the assistive technology literature and provides
627 a compelling empirical foundation for integrating structured video-based adaptive skill instruction
628 into special education curricula and policy frameworks.

629 Collectively, the evidence suggests that when systematically implemented, assistive video modeling
630 has the potential to accelerate functional independence, reduce long-term dependency, and enhance
631 quality of life outcomes for learners with mild intellectual disability.

632 **IMPLICATIONS FOR PRACTICE AND POLICY**

633 **Implications for Practice**

- 634 i. **Integration into Daily Curriculum:** Video modeling should be systematically included in
635 adaptive skill instruction, especially for hygiene, self-care, grooming, and safety routines.
- 636 ii. **Promotion of Independent Learning:** The reduction in physical prompting suggests that
637 video modeling supports greater student autonomy and decreases teacher dependency.
- 638 iii. **Efficient Classroom Management:** In classrooms with high student–teacher ratios, video
639 demonstrations can serve as consistent instructional support, allowing teachers to focus on
640 individualized reinforcement.
- 641 iv. **Support for Skill Generalization:** Schools can share video modules with parents to
642 encourage practice at home, promoting continuity and long-term retention of skills.

643 v. **Teacher Capacity Building:** Special educators should receive training in designing and
644 implementing structured video modeling aligned with theoretical principles such as
645 observational learning and prompt fading.

646 **Implications for Policy**

647 i. **Cost-Effective Intervention Strategy:** Video modeling requires minimal technological
648 infrastructure (smartphone/tablet), making it suitable for low-resource school settings.

649 ii. **Alignment with Skill-Based Education Reforms:** The demonstrated improvement in
650 functional independence supports outcome-oriented and skill-based educational policies.

651 iii. **Standardization of Adaptive Skill Instruction:** Education authorities can develop
652 centralized video libraries to ensure consistent quality of instruction across schools.

653 iv. **Scalability Across Regions:** Digital modules can be easily replicated, adapted to local
654 languages, and implemented at district or state levels.

655 v. **Evidence-Based Funding Justification:** The large effect sizes observed provide strong
656 empirical support for investing in assistive technology integration within special education
657 programs.

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