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The adaptive behavior scale-residential and community (part I): towards the development of a short form

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Abstract

A potential 24-item short form (SABS) of the 73-item Adaptive Behavior Scale-Residential and Community (Part I) (ABS-RC2; Nihira et al., 1993a, b) was developed, based on data from two diverse UK samples of adults with intellectual disabilities living in residential services ($n = 560$ and 254).

SABS factor and total scores showed good internal reliability in both samples ($\alpha = 0.89-0.98$), and were highly correlated with their full ABS-RC2 Part I equivalents ($r = 0.97-0.99$). Regression equations were calculated for SABS factor and total scores against their full ABS-RC2 Part I equivalents. Levels of agreement between predicted quartile scores (derived from the regression equations) and actual full ABS-RC2 Part I quartile scores were high ($\kappa = 0.75-0.89$; percentage agreement 82%–92%).

It is concluded that the SABS is a potentially useful research tool, although further work is clearly needed to establish the reliability and cross-cultural validity of the instrument. © 2001 Elsevier Science Ltd. All rights reserved.

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1. Introduction

Adaptive behavior (now termed adaptive skills; Luckasson et al., 1992; Schalock, 1999), along with IQ, has been a core component of the most widely used systems for classifying and describing people with intellectual disabilities (Schalock, 1999), such as the current classification system of the American Association on Mental Retardation (Luckasson et al., 1992). A widely cited definition of adaptive behavior comes from Grossman (1983):

Adaptive behavior refers to the quality of everyday performance in coping with environmental demands. The quality of general adaptation is mediated by level of intelligence; thus, the two concepts overlap in meaning. It is evident, however, from consideration of the definition of adaptive behavior, with its stress on everyday coping, that adaptive behavior refers to what people do to take care of themselves and to relate to others in daily living rather than the abstract potential implied by intelligence (p. 42).

A number of standardised scales for the assessment of adaptive behavior have been developed (see Editorial Board, 1996, for a discussion). One of the most widely used standardised scales is the AAMR Adaptive Behavior Scale (ABS), first designed in 1969 (Nihira et al., 1969), revised in 1975 (Nihira et al., 1975), and recently extensively revised again for adults living in residential and community-based settings (Nihira et al., 1993a, b). This revision, the Adaptive Behavior Scale-Residential & Community (second edition) (ABS-RC2), consists of two parts. Part I is “designed to evaluate coping skills considered important to personal independence and responsibility in daily living” (Nihira et al., 1993b, pp. 2–3). This part consists of 73 items across 10 domains of adaptive skills: 1) Independent Functioning; 2) Physical Development; 3) Economic Activity; 4) Language Development; 5) Numbers and Time; 6) Domestic Activity; 7) Pre-vocational/Vocational Activity; 8) Self-Direction; 9) Responsibility; 10) Socialization. The 73 items of Part I have also been factor-analysed into three adaptive behavior factors: Factor A (personal self-sufficiency); Factor B (community self-sufficiency); and Factor C (personal-social responsibility). Part II of the ABS-RC2 is designed and scored separately to Part I and measures ‘problem’ behaviors. Part II of the ABS-RC2 is not the focus of the study reported in this paper and therefore will not be discussed further. Whilst the reliability and validity of the ABS-RC2 have been extensively tested by the authors (Nihira et al., 1993b), to date there have been no independent evaluations of the reliability or validity of the ABS-RC2.

Nihira et al. (1993b) outline four major uses of the ABS-RC2, one of these being measuring adaptive behavior in research studies. Indeed, the routine use of a standardised measure of adaptive behavior would greatly enhance the descriptions of participants in research studies and would enable cross-comparisons between studies (c.f. Luckasson et al., 1993; Schalock, 1999). However, as researchers are almost always using a measure of adaptive behavior as part of a

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