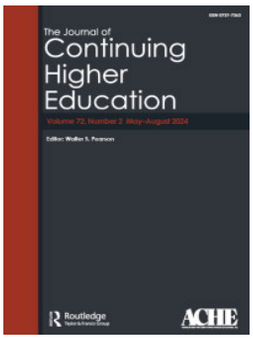

The Journal of Continuing Higher Education

ISSN: (Print) (Online) Journal homepage: www.tandfonline.com/journals/ujch20

The Impact of the Pandemic on Young People with Intellectual Disabilities Participating in a University Training Course for Employment in Spain

Yolanda Muñoz Martínez, Patricia Gómez Hernández, Marcos Gómez Puerta & Constanza San Martín Ulloa

To cite this article: Yolanda Muñoz Martínez, Patricia Gómez Hernández, Marcos Gómez Puerta & Constanza San Martín Ulloa (2024) The Impact of the Pandemic on Young People with Intellectual Disabilities Participating in a University Training Course for Employment in Spain, The Journal of Continuing Higher Education, 72:2, 127-141, DOI: 10.1080/07377363.2022.2139430

To link to this article: https://doi.org/10.1080/07377363.2022.2139430

Published online: 28 Dec 2022.

THE JOURNAL OF CONTINUING HIGHER EDUCATION
2024, VOL. 72, NO. 2, 127–141
https://doi.org/10.1080/07377363.2022.2139430

Routledge
Taylor & Francis Group

The Impact of the Pandemic on Young People with Intellectual Disabilities Participating in a University Training Course for Employment in Spain

Yolanda Muñoz Martínez, Patricia Gómez Hernández, Marcos Gómez Puerta, and Constanza San Martín Ulloa

ABSTRACT

Spanish universities still face many barriers to the training of people with disabilities, especially with intellectual disabilities (ID). In general, continuing higher education courses are the main training response for the latter. Knowing the impact that confinement by COVID-19 has had on the students of these courses is a relevant element. The present investigation focused on analyzing the case of the confinement experience of 12 young students with ID who attended the continuing training program called Unidiversidad at the University of Alcalá (Spain). In particular, the implications on their emotional well-being, interpersonal relationships, and individual training were analyzed. Information was collected through a semi-structured interview with the students and a questionnaire with their relatives. The results reflect changes in emotional well-being linked to the increased concern of students for the health of their families. Interpersonal relationships were also affected, although participants tried to compensate for the lack of face-to-face interaction with instant messaging applications and video calls. The change in training to the online modality generated concern and uncertainty in students, although it also provided learning opportunities, which have been supported by peer tutoring and support from teachers.

KEYWORDS

Intellectual disability; COVID-19; university; quality of life

Spanish universities still create barriers in relation to the inclusion of students with disabilities. These barriers are manifested in physical accessibility difficulties, negative attitudes of teachers towards inclusion, and, fundamentally, in the lack of an adequate teaching design for inclusion. However, in recent years various actions have been undertaken to facilitate the inclusion of this group within the university environment. Thus, the most significant study carried out in Spain (Fundación Universia, 2018), in which 72 universities (94.7% of the total) and 1,720 university students with disabilities participated, concluded that these represent 1.5% of the total number of college students. In addition, there is a greater proportion of students with disabilities enrolled in public universities (1.5%) rather than in private ones (1.2%) and, for the most part, they have physical disabilities (55.9%), with a lower proportion of students presenting psychosocial/intellectual developmental (26.5%) or sensory (17.6%) disabilities. A relevant piece of information provided by this study is that, as the level of studies rises, the

CONTACT Yolanda Muñoz Martínez yolanda.munozm@uah.es Department of Educational Sciences, University of Alcala, C/Madrid, 1, 19001 Guadalajara, Spain.

proportion of students with physical disabilities and sensory disabilities increases while that of students with psychosocial, intellectual, and developmental disabilities decreases. This shows that students with psychosocial, intellectual, and developmental disabilities are the ones who encounter the most difficulties in their university studies, and the ones who abandon their studies the most (Vlachou & Papananou, 2018). In order to overcome these barriers, the training of university teachers is considered to be an essential element (Moriña, 2017; Moriña et al., 2020; Sánchez-Díaz & Morgado, 2021).

In order to alleviate this situation, Spanish universities have promoted various actions and specific regulations that facilitate access and permanence for university students with disabilities (Riddell et al., 2005). Among these actions, services for people with disabilities stand out, normally including tutoring or monitoring programs or specific actions for students. Likewise, these services offer psychoeducational counselling and guidance for students and teachers (Fundación Universia, 2018), for example, for the realization of curricular adaptations. These are usually aimed at facilitating adaptations of access to the curriculum such as software and hardware adaptations, digitization of content, inclusion of subtitles in audio-visual material, and providing more time for carrying out practices and exams.

As a specific response to increase access and participation of students with intellectual disabilities in Spanish universities, continuing training programs have been implemented based on their university-specific degrees (non-official or nationally regulated degrees) with different themes and purposes. Some of them began under the 2014–2020 Youth Employment Operational Program, co-financed by the European Social Fund and managed by the ONCE Foundation. The main objective of this initiative is to carry out voluntary training programs for the employment of young people with intellectual disabilities.

Literature Review

Challenges of the Educational Response to Students with Intellectual Disabilities During Confinement

In March 2020, face-to-face classes in Spanish universities were interrupted, and online teaching began in response to the health emergency COVID-19. The cessation of face-to-face training meant a change in the way of understanding teaching and learning for all those involved in university training, generating the challenge of transforming the ways of teaching and interacting in university environments (Bozkurt & Sharma, 2020). This was a challenge, since it was not possible to plan a transition to online teaching that would contemplate the necessary changes from the beginning of the pandemic to ensure that all actors had the technological means, digital skills, and attitudes prone to change, as well as the consideration of the diverse needs of the students (Herburger, 2020). In this context, research was required to determine the impact of changes in training due to confinement in essential dimensions of the lives of students with intellectual disabilities and their families, in order to design and offer relevant support.

The Quality-of-Life Model as an Approach to Study the Impact of Confinement on University Students with Intellectual Disabilities

One of the possible approaches when studying this question is from the quality-of-life model proposed by Schalock and Verdugo (2002) and used in multiple investigations (Bigby et al., 2014; Lyons, 2005; Nieuwenhuijse et al., 2019). From this model, quality of life is conceptualized as a desired state of personal well-being composed of eight dimensions that incorporate subjective and objective elements and whose development is influenced by personal and environmental factors (Verdugo & Schalock, 2013).

Quality-of-life studies have been developed mainly through self-report instruments of people with disabilities themselves (González-Valero et al., 2021), as well as through key informants such as professionals or family members of the person being focused on in the analysis (Verdugo et al., 2014). In this study, considering the voice of university students with disabilities and their families, we asked ourselves what implications confinement had on their quality of life. To do this, we focused on three of the eight dimensions proposed by Schalock and Verdugo (2002): emotional well-being, interpersonal relationships, and training (understood as part of the personal development dimension).

Emotional well-being is understood as satisfaction with life, self-concept, and the absence of stress or negative feelings (Verdugo & Schalock, 2013). To promote this well-being, it is essential to have adequate social networks of affection and friendship, which in many cases does not happen with young people with intellectual disabilities and even leads them to situations of loneliness (Morentin et al., 2008).

Interpersonal relationships are defined in terms of family, social, and affective-sexual relationships (Verdugo & Schalock, 2013). It is important to highlight that the emotional needs of people with intellectual disabilities are the same as those of people without disabilities (Morentin et al., 2008), hence the importance of investigating this aspect when we talk about the implications that this confinement has had for this group. In this new situation of "online learning," special care must be taken when considering interpersonal relationships so that there is no disconnection of students. Teachers must offer opportunities for students to connect with both teachers and their peers (Herburger, 2020).

The personal development dimension would be made up of training, which is understood as the possibility of learning different things, having knowledge, and fulfilling oneself personally (Verdugo & Schalock, 2013). This training may have implications for autonomy. In this sense, as Huete (2020) indicated, social studies of disability have shown that disability discrimination manifests itself precisely in a generalised loss of personal autonomy. This loss is due, according to this author, to various reasons such as the primacy of the medical over the social, isolation through barriers to the use of space and public knowledge, the serious loss of job opportunities regardless of qualification or strength of the economy, and the loss of opportunities to make decisions about one's own life.

The current study is of interest for several reasons. First, it focused on the study of adaptation and educational response to young people with intellectual disabilities in the university environment. This fact is already relevant since there are very few studies of this aspect (Prohn et al., 2018; Whirley et al., 2020). Second, it limited the data

collection to the period of confinement due to the COVID-19 pandemic, a historic event worldwide that had never occurred before. Third, it addressed the question of how information and communication technologies played a fundamental role during this period in being able to access the training and various supports that these people usually need (Chadwick et al., 2022; Prohn et al., 2019; Schalock et al., 2021). Therefore, it was important to investigate the effects that confinement had on a population that already tends to encounter these barriers and what lessons we could obtain from these experiences. The objective of this study was to know the perceptions that the students of the above-mentioned continuing training course had on the impact that confinement had on their emotional well-being, interpersonal relationships, and the training they were receiving. Hence, we asked ourselves the following research questions:

- What perception do students have about their emotional well-being during confinement/lockdown?
- What impact do students perceive that confinement has had on their interpersonal relationships?
- What perception do students have of the changes that occurred in their training during confinement?

Method

The research was carried out from a qualitative phenomenological approach (Sandín Esteban, 2010). The objective of this research method is not to generalize its results to other populations but to understand in depth what happened in this specific case (Vázquez-Recio & Angulo Rasco, 2003).

Context and Participants

This study was developed in the context of the program called "Unidiversidad: Higher education course in competencies for the social and labour inclusion of young people with intellectual disabilities." The program constitutes a university-specific degree in Continuing Education at the University of Alcalá (Spain). It offers training for access to employment in the university environment to 15 young people with intellectual disabilities. To access this course, students must have an intellectual disability officially recognized by the university administration, must be between 18 and 30 years old, and have to be registered in the National Youth Guarantee System.

The program is made up of three modules: (1) general training module (independent living skills, social skills, emotional intelligence, healthy living); (2) specific training (related to the labour specialty taught); and (3) internships in companies. The training is given by university professors and supported by tutors, who guide the students in academic and personal matters, as well as managing the necessary supports, since it is considered that these are key to achieve the social and educational inclusion of the students (Moriña & Melero, 2016). The methodology is based on cooperative learning in order to promote, on the one hand, the development of academic, social, and emotional

competencies and, on the other, the participation of students (Muñoz-Martínez et al., 2020).

The population consisted of the 15 students in this program and their families. However, the sample consisted of 12 students and their respective families, since they were the ones who agreed to participate in this study (80%), being equally distributed according to gender (50%). Their ages ranged from 19 to 27 years, with a mean of 21.5 years ($SD = 3.060$). The students had medium-low levels of support needs ($n = 6$, 50%) and medium-high ($n = 6$, 50%). All of them were residents of Alcalá de Henares and nearby towns. Of the participants, none had previously had a job. However, 11 of the 12 participants had completed at least one training workshop or course in which they had had an internship in a company. This previous training was quite varied in terms of professional profiles: carpentry, gardening, cleaning, etc.

Regarding the families, a total of 12 relatives participated, one per student. Of the relatives, 58.3% were women ($n = 7$). Regarding kinship, the participants were mostly mothers ($n = 7$, 58.3%), the rest being fathers ($n = 4$, 33.3%) or legal guardians ($n = 1$, 8.3%). The families indicated that confinement was carried out in their habitual residences, ranging in size between 70 and 154 m^2 ($M = 95.83$, $SD = 22.751$). The number of people who lived together during confinement ranged between 2 and 6 ($M = 3.83$, $SD = 1.030$). Regarding devices with internet access available in their homes, relatives indicated that all participants had mobile phones ($n = 12$, 100%), 91.7% had a computer ($n = 11$), and 58.3% had tablets ($n = 7$). Regarding which device the students used to access the internet, relatives indicated that the students habitually used the mobile phone ($n = 12$, 100%), followed by the computer ($n = 10$, 83.3%) and the tablet ($n = 5$, 41.7%).

Instruments

In the research process, two instruments were used: a semi-structured interview and a questionnaire which focused on investigating three of the eight dimensions of the previously described quality of life model: (a) an emotional well-being dimension, (b) an interpersonal relationships dimension, and (c) a training dimension. For the dimensions of emotional well-being and interpersonal relationships, the items belonging to these same dimensions were adapted in the INICO-FEAPS Scale for the comprehensive evaluation of the quality of life of people with intellectual or developmental disabilities (Verdugo-Alonso et al., 2013). The training dimension, related to the dimension that the authors called personal development, was addressed by including items related to the potential adverse effects of online classes.

The semi-structured interview, directed to the students, was considered the main instrument of the research. This was organized and sequenced according to the three dimensions mentioned above.

The questionnaire addressed to families included a collection of sociodemographic information from relatives and students and key aspects of confinement, as well as the effects of confinement on an emotional level, interpersonal relationships, and the formation of those relationships. Regarding the sociodemographic variables, relatives were asked about their gender, age, relationship with the student, and level of support that,

in their opinion, the student needed at the time of the study. Regarding the key aspects during the confinement, they were asked how many people had been confined in their home, the square metres of their dwelling, which devices with internet access were available at home, and which devices the students used. The perception of the impact of confinement on the aforementioned dimensions was made using a 5-point Likert-type scale (1 = totally disagree, 5 = totally agree). For each dimension, an open question was included where family members could reflect in writing on other questions that they considered relevant. The reliability of the instrument was addressed by calculating the internal consistency of the scale (*Cronbach's Alpha* = 0.794), achieving levels considered adequate (Nunnally, 1978).

The validity of the instruments was addressed, on the one hand, by deriving a good part of the items on the scale from instruments already published and graded (Verdugo-Alonso et al., 2013). Likewise, specific recommendations were applied to increase the rigour in qualitative research (Sandín Esteban, 2010). In the first place, opinions were exchanged with other researchers (three university specialists) to capture their criteria and criticism of the research process in order to reorient it and thus be able to reach valid conclusions. Secondly, to ensure validity, we triangulated the data, contrasting those obtained from the interviews with the students with those obtained in the questionnaires from the families. Finally, the participants were confirmed by preparing and verifying partial reports of the interviews.

Procedure

Access to the field was made by first contacting those responsible for the training course, who were asked for authorisation to carry out the study. Subsequently, the informed consent of relatives and students was collected online; for the latter, the materials were adapted to easy reading to make it cognitively accessible (Vived Conte & Molina García, 2012). In it, compliance with the usual ethical standards was ensured through voluntary participation, the anonymization of the results, and the access, rectification, or cancellation of the data provided.

Differentiated procedures were established for data collection. In the case of the interview and given the confinement situation, in late April and early May 2020 telephone interviews were conducted and recorded. Family members or legal guardians were asked to answer the online questionnaire.

The data analysis of the interviews was carried out through content analysis using pre-established categories (Gibbs, 2012) based on our conceptual framework (Table 1). In the case of the quantitative data from the questionnaire, these were processed and analyzed through the IBM SPSS version 26 program.

Table 1. Analysis dimensions.

Emotional Well-Being	Interpersonal Relationships	Training
Absence of stress or negative feelings	Family	Job expectations
Self-concept	Affective-sexual	Uncertainties
Satisfaction with life	Friends	Change in support staff
	Classmates	Change in teachers
	Other people	Change to online classes
	Needs and changes	

A statistical analysis of the data was performed with both a descriptive and an inferential perspective. In the latter case, the nonparametric Mann Whitney *U* test was used to compare the results of the scale by gender, and the nonparametric Kruskal–Wallis test was used to compare the data according to kinship and level of student support. In these tests, a significance level of 5% ($p<.05$) was established.

Results

The results are presented according to the research questions. At a general level, it should be noted that the comparison of the implications of confinement in the three dimensions studied according to the gender of the student, the level of support of the student, or the relationship of the respondent did not show statistically significant differences, as reflected by the relatives in their responses to the questionnaire ($p > .05$).

Implications for Emotional Well-Being

It is noteworthy that the participants indicated that there has been a change in the dimension of emotional well-being as a result of confinement. For the most part, students stated that they were different than before the health crisis generated by COVID-19, especially more restless and worried. However, all of them said they felt proud of their lives, a factor that had not been altered by this situation. The families also reflected that before confinement the students showed a good level of emotional well-being ($M = 4.16$); this finding was not entirely in agreement with both the emotional well-being of the student ($M = 2.75$) and that of the family ($M = 3.25$). In addition, the support that families had offered to students hardly changed during this health crisis situation ($M = 2.67$).

As for the life satisfaction subdimension, the students were happy with their lives. The word most frequently indicated by students when asked about their situation before COVID-19 was "normal." Some examples that can be extrapolated to the sensations of the students included, "All very well and calm," "Everything is very good and quiet" (Student 5). However, this stability changed over the course of the pandemic. Most of them were concerned and uneasy about this situation and its possible repercussions: "I thought it would not be so hard" (Student 3). This aspect was not seen the same by families, who stated that confinement had not affected the emotional well-being of the students ($M = 1.75$).

With respect to the subdimension of self-concept of the students, there were no changes. They all showed linearity in this regard with respect to before the health crisis, with statements such as, "Yes, I am always proud of myself" (Student 9). The families followed the words of the students, maintaining that confinement had not negatively affected the self-concept of the students ($M = 2.58$).

Regarding negative feelings within the dimension of emotional well-being, everyone felt well before confinement. However, this feeling changed in all students except two who said they felt the same. Consequently, some said that they felt expectant and worried about this situation, even overwhelmed and depressed: "Sometimes I feel very overwhelmed" (Student 4), "I am a little bit down about the truth" (Student 14). However, the families did not

show the vision of this alteration in the students, maintaining that they did not notice changes during confinement around anxiety ($M = 2.58$), symptoms of depression ($M = 1.58$), or alterations in behaviour ($M = 1.75$), although there was a slight increase in concern for the future of the students ($M = 3.41$). For example, one of the relatives argued about the personal situation they had experienced:

> I have been hospitalized for 20 days due to coronavirus and really the first days I had a really bad time thinking about my children. This is because I am a widower and have two disabled children. But thank God everything has been solved. Thanks to my children who encouraged me and their exemplary behaviour, and then taking care of me at home to recover in my room, confined. My children have learned to cook, so we have brought out something positive. (Family 12)

Implications in Interpersonal Relationships

The interpersonal relationships of the students were considerably modified. Above all, the influence of confinement stood out with the means by which they continued to maintain contact with others. During confinement they used smartphones to communicate, especially to send messages and make video calls. But in general, they missed direct contact with others and going out.

Family relationships changed in two ways. Students said they spent more time with their parents and did more activities than before the health crisis. While before they focused on shopping, their time was focussed on playing together: "Now my mother is at home more. I like it that way because now in the afternoons we play" (Student 3). This factor, although to a lesser extent, was also reflected among families. In this way, families maintained that they spent little time with students before confinement with respect to during confinement and carried out fewer activities before than during confinement.

However, relationships with other family members were altered in the sense that they decreased or were of lower quality. Most of the students related to family outside their home through messages and video calls: "Now I have to see them by video call, but now we all see each other because we make a group call, and we all see each other […] with the family we also have a WhatsApp group" (Student 1).

The students' affective-sexual relationships were not altered since they all stated that they continued the same. Of the five students who had a partner before confinement, four of them continued to maintain the relationship. In general, they really wanted to see each other again, since they only saw each other by video call or contact through messages: "I can't hug her or kiss her … and I miss that" (Student 8). The families did not show changes in terms of the influence of confinement in relation to the possible difficulties in having or maintaining a partnership.

Broadly speaking, talking about sexuality was still a taboo subject for the students, and in general they felt uncomfortable, measuring their words: "I didn't have a partner, I'm single […] I'm a virgin, so nothing has changed" (Student 4).

Regarding the relationship with friends, all students agreed that before confinement they went out and met with their friends to go for a walk, go shopping, have a drink, etc., especially on weekends: "I would hang out with them, going out on weekends with them" (Student 2). In the same way, families stated that before confinement the

students had friends with whom they went out and had fun ($M = 3.00$), and they maintained that students carried out remote activities to have fun with their friends ($M = 3.91$) during confinement.

With the health crisis, these relationships were limited to messages and video calls: "We cannot meet, but we talk on WhatsApp" (Student 9). In general, they missed that contact with friends: "I keep talking with them, but you can't tell things on WhatsApp, better person to person" (Student 13). In the same way, the families stated that, both before and during confinement, the students had a friend who listened to them when they had a problem ($M = 3.75$). However, the data show that students called, wrote, or contacted people they appreciated less often before lockdown than during lockdown ($M = 3.91$ vs $M = 4.17$, respectively).

Contact with classmates was altered by this health crisis situation, especially by the manifestations collected by the students. Before confinement they had good relationships, and this is what the students indicated: "We talked every day in class" (Student 2). Similarly, families also thought so ($M = 4.50$). However, these relationships were restricted, and, in the best of cases, the students maintained that some classmates continued to maintain contact on WhatsApp: "Now we don't see each other in class, and we don't talk so much anymore. We talk on WhatsApp" (Student 14). Despite the change in peer relationships, families maintained that such relationships continued to be good during confinement ($M = 3.91$).

Relationships with other agents such as neighbours were not altered according to the students, but they were in the words of the family members. According to the students, they continued to maintain the same treatment as before: "With the neighbours my relationship was good and has not changed. When we go out to applaud, we see them" (Student 1). According to the families, the students had little contact with other people before confinement ($M = 2.67$) but increased this contact during confinement ($M = 3.41$).

In general, students needed the situation to improve so that they could meet again with their families and friends: "Let this end so that I can go out with my friends" (Student 2). As for the change in interpersonal relationships after this health crisis passed, there was a discrepancy. Most of them stated that relationships would continue the same as before COVID-19. However, four of the students maintained that they would be different: "We are going to value seeing each other more because we miss each other" (Student 3). On the part of the families, they maintained that the students' time to interact with their peers was restricted, since some students went to leisure centres, and, due to the health crisis, these activities were suspended, negatively affecting some of the participating students: "It is in a leisure association for people with disabilities that is quite entertaining and complete, but at present these activities have been suspended" (Family 12). In addition, establishing social relationships with equals was an important deficiency that was affected by this situation: "It is very difficult for him to maintain relationships with his equals, before and during confinement" (Family 5).

Training Implications

The transition from face-to-face classes to distance learning was hard for the students. Some of them claimed to have been overwhelmed, especially at the beginning: "Well,

online classes overwhelmed me a bit [...] then we already learned" (Student 14). For the most part, when they needed help, they relied on their classmates: "I needed help. My classmates gave me help" (Student 7). All of them stated that they liked the face-to-face class more since they had direct contact with the teacher and classmates and learned better: "I like face-to-face classes more. And I understand face-to-face classes better" (Student 13). However, families maintained that it was not a problem to go from face-to-face classes to online classes ($M = 2.58$), but they did notice, as did the students, differences between face-to-face classes and online classes ($M = 4.00$).

Regarding the relationship with the teacher, the students valued more a personal and direct contact rather than lessons through a screen, since they could ask questions directly and understand the explanations better: "Yes, the truth is (there is a difference). The teachers teach the classes better in the classes, I understand things better" (Student 13). In this regard, the families maintained that the teachers were involved during the online classes and helped the students: "The teachers have shown interest online during confinement to perfection" (Family 3).

The treatment with the support staff or tutors was the same, it remained constant, and this was what all the students attested. They all continued to have contact with their tutors, with the same trust and treatment as before COVID-19: "Same. I ask and I can talk to her anyway. If I have a question or something, I know that if I want to call her, I can call her, and she will help me" (Student 2). The family members maintained that the treatment with the guardians had not changed with respect to before confinement ($M = 2.16$).

Their concerns regarding the course and its temporary suspension lay in the period of external internships with which this process ended: "I am concerned about the internships, how they are going to be done, when they would be done" (Student 2). This was reflected in the same way by the families, since they maintained that the students showed concern about the internships in the company that they had not yet been able to carry out ($M = 4.83$). In addition, they stated that, "He is anxious, with nerves, to start the practices" (Family 12).

Regarding the expectations of students to find work in the future, before the health crisis they were excited, and everyone wanted and hoped to find work: "I did think I was going to find work" (Student 1), "It was different. Before you didn't have to worry and now you do" (Student 14). In the same way, the families expressed that before the confinement they had positive expectations about the search for work ($M = 4.00$). However, this situation led to a widespread discouragement, with students encountering more difficulties: "I think it will be more difficult. Seeing the situation, I see it more difficult. Because now you don't work like before, now everything is more complicated" (Student 10). This discouragement was also reflected in the families, who affirmed that after several weeks of confinement they had fewer positive expectations about the future of work ($M = 3.67$).

Discussion and Conclusions

Regarding emotional well-being, results indicated that the participants perceived a change with respect to their situation prior to confinement and during this period, since

they experienced greater restlessness, overwhelming feelings, and concern for their health and for other people, especially family members. As in other recent studies (Fernández-Morales et al., 2020), the reports of young people regarding this variation in the perception of emotional well-being were coherent and/or expected in an atypical situation that restricted the development of all kinds of activities to home confinement. It should be noted that the instruments used in this study were not intended to measure depression and/or stress, but rather the dimension of emotional well-being as a whole. Therefore, because there was evidence indicating that confinement had negative repercussions on both mental and physical health and that the prevalence of depression and increased anxiety symptoms have been reported (Del Castillo & Velasco, 2020), it would be necessary to evaluate, with the teachers of this program and other similar ones, the relevance and/or need to carry out more research in this regard.

With regard to interpersonal relationships, the results indicated that, as with all people who have been in a confinement situation, relationships were altered and/or modified due to the prohibition of activities outside the home or in public spaces. Thus, the use of technology and applications that facilitate communication by messages or video calls increased. These were a key element for socialization, even though in some cases the frequency of contact with friends decreased. The participants made the need for physical contact and face-to-face interaction explicit, emphasizing the need for these students to express affection and love just like the entire population (Razquín-Plano, 2020). A favourable aspect of the confinement period for interpersonal relationships was the increase in the performance of recreational and/or leisure activities with members of the nuclear family who share the home. This was a difference strongly pointed out by the young people interviewed, and it could have functioned as a source of emotional well-being.

The pandemic and the confinement situation were associated with an increase in psychosocial risk factors referred to as different factors, including social isolation and the abuse of new technologies (Del Castillo & Velasco, 2020). Both aspects were evidenced in the results of the study; therefore, in the face of possible new confinement situations, it is relevant to define strategies and/or measures that promote healthy habits and positive communication to overcome these possible effects.

Regarding the training process and the transfer of classes to the online mode, the findings indicated that this inevitably posed challenges for young people. This was due to the fact that, initially, the situation produced a stress associated with the uncertainty of the process and the stability of the internet connection to participate in distance learning. It should be noted that this modality of education is itself a learning process so that, over time, the people involved adapt and feel greater self-efficacy to interact in these environments based on the experiences that are acquired. To overcome these initial challenges or obstacles, an element strongly highlighted by the participants referred to the support and collaboration provided among peers, as well as the closeness and frequent contact with tutors. This emerged as a relevant component that in future distance training programs could be intended, planned, and supported by teachers, whose role during this period was valued by both young people and families. On the other hand, the uncertainty of the pandemic context, in the face of the risk of being infected with COVID-19, has been transferred to aspects related to the labour and economic sphere.

Thus, there was evidence of a decrease in expectations regarding the completion of the training processes that involved internship processes and the possibility of obtaining of a job. This perception of lack of control and the transition towards the acceptance of uncertainty as characteristics of life pose new challenges to societies as a whole and, in particular, to those professionals and families who provide support to people in disability situation. Our study, like others developed from the voices of people with disabilities in these times of pandemic (Navas et al., 2020, 2021), becomes relevant, since it allows us to visualize those necessary aspects to consider in situations of social isolation and virtual teaching to generate the conditions and opportunities required, in this case, by young people with intellectual disabilities and their families.

Implications

Several practical implications can be derived from the present study. First, technologies proved to be an adequate way to provide support to people with intellectual disabilities during confinement, although it was found that the emergency planning of online training and supports was improvised. Several key aspects could be derived from what happened: training plans through courses and individualized support should be established in digital skills aimed at both families and students with intellectual disabilities; support for distance learning should include not only access to education but also interaction and social connection (Gobec et al., 2022). In line with Chadwick et al. (2022), it should not be assumed that teachers, families, or students with intellectual disabilities have the appropriate devices to use the internet or even have access to the internet.

Limitations

Our study has several limitations that must be considered when interpreting the results. The characteristics, size, and method of obtaining the sample do not allow the generalization of the results to other populations.

Funding

This work has been supported by the University Teaching Research Network Program of the Institute of Educational Sciences of the University of Alicante (2020-21 call). Ref. 5100.

Notes on Contributors

Yolanda Muñoz Martínez is at Department of Educational Sciences, University of Alcala, Spain.

Patricia Gómez Hernández is at Department of Didactics, School Organization and Specific Didactics, National University of Distance Education (UNED), Spain.

Marcos Gómez Puerta is at Department of General and Specific Didactics, University of Alicante, Spain.

Constanza San Martín Ulloa is at Faculty of Education, University Diego Portales, Chile.

ORCID

Yolanda Muñoz Martínez http://orcid.org/0000-0003-4001-0214
Patricia Gómez Hernández http://orcid.org/0000-0001-9163-7637
Marcos Gómez Puerta http://orcid.org/0000-0003-0406-0214
Constanza San Martín Ulloa http://orcid.org/0000-0001-5948-1329

References

Bigby, C., Knox, M., Beadle-Brown, J., & Bould, E. (2014). Identifying good group homes: Qualitative indicators using a quality of life framework. *Intellectual and Developmental Disabilities*, *52*(5), 348–366. https://doi.org/10.1352/1934-9556-52.5.348

Bozkurt, A., & Sharma, R. C. (2020). Emergency remote teaching in a time of global crisis due to coronavirus pandemic. *Asian Journal of Distance Education*, *15*(1), 1–6. https://doi.org/10.5281/zenodo.3778083

Chadwick, D., Ågren, K. A., Caton, S., Chiner, E., Danker, J., Gómez-Puerta, M., Heitplatz, V., Johansson, S., Normand, C. L., Murphy, E., Plichta, P., Strnadová, I., & Wallén, E. F. (2022). Digital inclusion and participation of people with intellectual disabilities during COVID-19: A rapid review and international bricolage. *Journal of Policy and Practice in Intellectual Disabilities*, *19*(3), 242–256. https://doi.org/10.1111/jppi.12410

Del Castillo, R. P., & Velasco, M. P. (2020). Salud mental infanto-juvenil y pandemia de COVID-19 en España: cuestiones y retos. *Revista de Psiquiatría Infanto-Juvenil*, *37*(2), 30–44.

Fernández-Morales, R., Alloud, N. D., Álvarez-Sierra, M. C., Castellanos-Cárdenas, M., L. Espel, C., Fortin, I., García-Sáenz, K., Guerra, A., Liquez, K. L., Marroquín-Crocker, K. L., & Morales-Reyna, J. (2020). Bienestar psicológico y respuesta conductual durante el confinamiento domiciliario decretado por la pandemia del COVID-19 en adultos de la ciudad de Guatemala. *Ciencias Sociales y Humanidades*, *7*(1), 41–50. https://doi.org/10.36829/63CHS.v7i1.1004

Fundación Universia. (2018). *Universidad y discapacidad: IV Estudio sobre el grado de inclusión del sistema universitario español respecto de la realidad de la discapacidad*. Fundación Universia.

Gibbs, G. (2012). *El análisis de datos cualitativos en investigación cualitativa*. Morata.

Gobec, C., Turnbull, M., & Rillotta, F. (2022). Lessons learnt from transitioning to online mentoring and learning at university during COVID-19 for adults with intellectual disability. *Journal of Intellectual Disabilities*, *26*(4), 869–884. https://doi.org/10.1177/17446295211036559

González-Valero, G., Vidal-Conti, J., Zurita-Ortega, F., & Palou-Sampol, P. (2021). Active time in cooperative activities, quality of life and body mass index in individuals with intellectual disabilities. A model of structural equations. *Sustainability*, *13*(4), 2341. https://doi.org/10.3390/su13042341

Herburger, D. (2020). *Considerations for teachers providing distance learning to students with disabilities*. WestEd. https://www.wested.org/resources/providing-distance-learning-to-students-with-disabilities/#

Huete, A. (2020). Pandemia y discapacidad. Lecciones a propósito del confinamiento. *Revista Española de Discapacidad*, *8*(I), 203–207. https://doi.org/10.5569/2340-5104.08.01.11

Lyons, G. (2005). The life satisfaction matrix: An instrument and procedure for assessing the subjective quality of life of individuals with profound multiple disabilities. *Journal of Intellectual Disability Research*, *49*(Pt 10), 766–769. https://doi.org/10.1111/j.1365-2788.2005.00748.x

Morentin, R., Arias, B., Rodríguez, J. M., & Verdugo, M. A. (2008). *El amor en personas con discapacidad intelectual y su repercusión en el bienestar emocional*. AMPANS.

Moriña, A. (2017). Inclusive education in higher education: Challenges and opportunities. *European Journal of Special Needs Education*, *32*(1), 3–17. https://doi.org/10.1080/08856257.2016.1254964

Moriña, A., & Melero, N. (2016). Redes de apoyo sociales y académicas de estudiantes con discapacidad que contribuyen a su inclusión en la Enseñanza Superior. *Prismasocial*, *16*, 32–59.

Moriña, A., Sandoval, M., & Carnerero, F. (2020). Higher education inclusivity: When the disability enriches the university. *Higher Education Research & Development*, *39*(6), 1202–1216. https://doi.org/10.1080/07294360.2020.1712676

Muñoz-Martínez, Y., Monge-López, C., & Torrego, J. C. (2020). Teacher education in cooperative learning and its influence on inclusive education. *Improving Schools*, *23*(3), 277–290. https://doi.org/10.1177/1365480220929440

Navas, P., Amor, A. M., Crespo, M., Wolowiec, Z., & Verdugo, M. A. (2021). Supports for people with intellectual and developmental disabilities during the COVID-19 pandemic from their own perspective. *Research in Developmental Disabilities*, *108*, 103813. https://doi.org/10.1016/2Fj.ridd.2020.103813

Navas, P., Verdugo, M. A., Amor, A. M., Crespo, M., & Martínez, S. (2020). *COVID-19 y discapacidades intelectuales y del desarrollo: impacto del confinamiento desde la perspectiva de las personas, sus familiares y los profesionales y organizaciones que prestan apoyo*. Plena inclusión España e Instituto Universitario de Integración en la Comunidad (INICO).

Nieuwenhuijse, A. M., Willems, D. L., van Goudoever, J. B., Echteld, M. A., & Olsman, E. (2019). Quality of life of persons with profound intellectual and multiple disabilities: A narrative literature review of concepts, assessment methods and assessors. *Journal of Intellectual & Developmental Disability*, *44*(3), 261–271. https://doi.org/10.3109/13668250.2017.1388913

Nunnally, J. O. (1978). *Psychometric theory*. MacGraw-Hill.

Prohn, S. M., Kelley, K. R., & Westling, D. L. (2018). Students with intellectual disability going to college: What are the outcomes? A pilot study. *Journal of Vocational Rehabilitation*, *48*(1), 127–132. https://doi.org/10.3233/JVR-170920

Prohn, S. M., Kelley, K. R., & Westling, D. L. (2019). Supports' perspectives on the social experiences of college students with intellectual disability. *Inclusion*, *7*(2), 111–124. https://doi.org/10.1352/2326-6988-7.2.111

Razquín-Plano, J. (2020). *Relaciones afectivas en discapacidad intelectual* [Master's diss]. International University of La Rioja.

Riddell, S., Tinklin, T., & Wilson, A. (2005). *Disabled students in higher education*. Routledge.

Sánchez-Díaz, M. N., & Morgado, B. (2021). Moving toward the inclusion of university students with disabilities: Barriers, facilitators, and recommendations identified by inclusive faculty. *The Journal of Continuing Higher Education*. https://doi.org/10.1080/07377363.2021.1946635

Sánchez-Gómez, V., López, M., Amor, A. M., & Verdugo, M. A. (2020). Apoyos para la calidad de vida de escolares con y sin discapacidad: revisión de literatura. *Revista Internacional de Educación Para la Justicia Social*, *9*(2), 327–349. https://doi.org/10.15366/riejs2020.9.2.016

Sandín Esteban, M. P. (2010). *Investigación cualitativa en educación. Fundamentos y tradiciones*. McGraw-Hill.

Schalock, R. L., Luckasson, R., & Tassé, M. J. (2021). *Intellectual disability: Definition, diagnosis, classification, and systems of supports* (12th edition). American Association on Intellectual and Developmental Disabilities.

Schalock, R. L., & Verdugo, M. A. (2002). *Handbook on quality of life for human service practitioners*. American Association on Mental Retardation.

Vázquez-Recio, R., & Angulo Rasco, F. (2003). *Introducción a los Estudios de Casos. Los primeros contactos con la investigación etnográfica*. Aljibe.

Verdugo, M. A., Gómez, L. E., Arias, B., Navas, P., & Schalock, R. L. (2014). Measuring quality of life in people with intellectual and multiple disabilities: Validation of the San Martín scale. *Research in Developmental Disabilities*, *35*(1), 75–86. https://doi.org/10.1016/j.ridd.2013.10.025

Verdugo, M. A., & Schalock, R. L. (2013). Calidad de vida. In M. A. Verdugo and R. L. Schalock (Eds.), *Discapacidad e Inclusión* (pp. 443–461). Amarú.

Verdugo-Alonso, M. A., Gómez Sánchez, L. E., Arias Martínez, B., Santamaría Domínguez, M., Clavero Herrero, D., & Tamarit Cuadrado, J. (2013). *Escala INICO-FEAPS: evaluación integral de la calidad de vida de personas con discapacidad intelectual o del desarrollo*. INICO.

Vived Conte, E., & Molina García, S. (2012). *Lectura fácil y comprensión lectora en personas con discapacidad intelectual*. Prensas universitarias de Zaragoza.

Vlachou, A., & Papananou, I. (2018). Experiences and perspectives of Greek higher education students with disabilities. *Educational Research*, *60*(2), 206–221. https://doi.org/10.1080/00131881.2018.1453752

Whirley, M. L., Gilson, C. B., & Gushanas, C. M. (2020). Postsecondary education programs on college campuses supporting adults with intellectual and developmental disabilities in the literature: A scoping review. *Career Development and Transition for Exceptional Individuals*, *43*(4), 195–208. https://doi.org/10.1177/2F2165143420929655