

PIADS - Plain Language Version

Age: _____

Gender: _____

List the assistive technology device that you will be referring to for this survey _____

Directions: Circle the face that matches how you feel when you use your technology

1) Makes it **easier for me to do things**



Never



Almost Never



Sometimes



Almost Always



Always

2) Allows me to **show my talents**



Never



Almost Never



Sometimes



Almost Always



Always

3) Lets me **do more things**



Never



Almost Never



Sometimes



Almost Always



Always

4) Helps me **do things well**



Never



Almost Never



Sometimes



Almost Always



Always

5) Makes me **feel safe**



Never



Almost Never



Sometimes



Almost Always



Always

6) Helps me **feel okay**



Never



Almost Never



Sometimes



Almost Always



Always

7) Gives me **hope**



Never



Almost Never



Sometimes



Almost Always



Always

8) Helps me **do things on my own**



Never



Almost Never






































Sometimes



Almost Always



Always

9) Makes me want to try new things					
	Never	Almost Never	Sometimes	Almost Always	Always
10) Makes me feel happy					
	Never	Almost Never	Sometimes	Almost Always	Always
11) Helps me feel in control					
	Never	Almost Never	Sometimes	Almost Always	Always
12) Is helpful to me					
	Never	Almost Never	Sometimes	Almost Always	Always
13) Makes me feel good about myself					
	Never	Almost Never	Sometimes	Almost Always	Always
14) Makes my life better					
	Never	Almost Never	Sometimes	Almost Always	Always
15) Helps me try new things					
	Never	Almost Never	Sometimes	Almost Always	Always

16. How often do you use your technology?

- 3-5 days a week
- 1-2 days a week
- Less than one day a week

17. How much assistance do you require to use your technology?

- None - I use it on my own
- Some - I use it with some help
- A lot - Someone helps me use it

18. How do you feel about the technology?

- I like it
- It's OK
- I don't like it

19. Do you want to continue using your technology?

- Yes
- Maybe
- No