

Reis, S. M., Schader, R., Milne, H. J., Bloomer, R., Shute, L., Williams, G., Tieso, C., Stephens, R., & Don, A. (2002). *A study of musical talents and persons with Williams Syndrome* (RM02173). University of Connecticut, The National Research Center on the Gifted and Talented. <https://nrcgt.uconn.edu/wp-content/uploads/sites/953/2015/04/rm02173.pdf>

Music and Minds... A Talent Development Program and Williams Syndrome Study Participant Interview Protocol (Reis et al. 1998b) (PIP)

Music and Minds... A Talent Development Program

and Williams Syndrome Research Study

Participant Interview Protocol

(c) June 1998

Reis, S. M., Milne, H. J., Schader, R., and Shute, L.

Participant's Name: _____ Date: _____

Telephone Number: _____ Data Code Number: _____

e-mail Address: _____ Fax Number: _____

Interviewer: _____ Start Time: _____ Finish: _____

Follow up interview required?: _____ Date: _____ Time: _____

Completed by: _____ Date: _____

Comments: _____

Introduction

1. Tell me about the kind of person you are.

2. What is best about being you?

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A. Experiences of being different, and the same:

1. What makes you different/special?

2. What is different about having WS?

3. How did you feel about having WS?

4. Did people treat you as if you were special when you were young (because of WS)?

5. Do people treat you as if you were different because of WS?

6. In what ways are you the same of different to other people your age?

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B. Medical and health:

1. Have you ever been to hospital?

hospitalization(s)	reason(s)	duration(s)	treatment(s)
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2. Have you had any accidents?

i. accidents

ii. frequency

iii. nature

iv. treatment(s)

v. after effects

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3. Do you take medications?

medications:

for:

when:

4. Are you allergic to anything?

5. Do you have to take special care, or avoid any foods or activities...? Why?

C. Education history

1. What do you remember about how you learned before you went to school?

2. When did you learn to Read? How? What did you like reading?

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3. Did you go to special schools all the time you were at school?

i. IF NO, OR WITH SPECIAL CLASSES FOR PART OF THE TIME
- go to question 4.

ii. IF YES - what do you remember about the:

a. Special Preschool(s) you attended?

0 to 2 years

3 to 4 years

5 to 6 years

0 to 2 years

3 to 4 years

5 to 6 years

1. favorite teacher(s)

2. favorite activity(s)?

3. least favorite teacher(s)?

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4. least favorite activity(s)?

b. special School(s) you attended?

7 to 9 years

10 to 12 years

13 to final years

1. favorite teacher(s)

2. favorite activity(s)?

3. least favorite teacher(s)?

4. least favorite activity(s)?

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4. What do you remember about elementary school?

a. special times?

b. favorite subject areas?

c. favorite teachers? Why?

d. special education classes?

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5. What do you remember about the middle school(s) you attended?

a. special times?

b. favorite subject areas?

c. favorite teachers? Why?

d. special education classes?

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6. What do you remember about the high schools you attended?

a. special times?

b. favorite subject areas?

c. favorite teachers? Why?

d. special education classes?

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7. What schools or classes have you been involved with since high school?

i. courses attempted

ii. courses completed and grades

iii. training for what?

iv. involvement in extra-curricular activities

v. what are your career plans?

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D. Talent development history

1. When did you first realize you liked music/singing, and music making?

2. What sorts of musical activities did you do?

3. What lessons have been taken?

4. What musical instruments have you played?

5. What singing skills do you have?

6. Who has helped you develop these skills?

7. What musical instruments do you still play?

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8. What musical instruments would you like to play?

9. What singing skills would you like to develop?

10. What dance and drama skills do you have?

11. What dance and drama skills would you like to develop?

12. What other skills would you like to develop while you are here?

13. What musical skills do members of your family, your relations, and people who are your family's friends have?

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14. What musical instruments do you have at home?

15. What special musical experiences do you remember? (Type I enrichment activities, i.e., concerts, organized visits, visitors, ...)?

16. What special training program and experiences do you remember? (Type II training activities/programs (summer camps, evening/weekend training, college courses, community courses, ...))?

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17. What have you created in music, song, drama, dance, and other things (etc.) that you remember? (Type III enrichment experience?)

E. What are your hobbies and recreational interests?

1. home based

2. school board

3. community based

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4. What are you curious about?

5. What do you collect?

6. How do you organize and score your collections?

7. Do you like to be actively involved with others, who? Doing what?

F. Academic achievement

1. What do you like or dislike about reading?

2. What kinds of books do you like to read?

fiction novels
non-fiction - true stuff
newspapers
road signs
comics
books (type and complexity)
music
graphic (e.g., cartoons;
“women,” “men’s” outside bathrooms, ...)
other?

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3. What do you like or dislike about math?

counting
beat a rhythm with hand or foot
relate math to music
sort by color
 shape
 function
 into groups (10, 12, 24, ...)
addition
subtraction
multiplication
fractions
time
money
measure weights
liquids

G. Social skills

1. How do you get along with other people?

2. Do you enjoy talking with other people? Do you run out of things to say?

3. What are your favorite topics?

4. Do you like to start a conversation with other people? Why?

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5. What do you usually do when you get angry, or someone annoys you?

6. What do you do when you have spare time?

7. Tell me about your friend (try to elicit whether they have friends)?

8. Are people always fair and kind when you go out to shows, shopping, or other activities with them?

H. Organizational skills

- i. wake up to an alarm?
- ii. take care of yourself outside of home?
- iii. cook and prepare meals for yourself?
- vi. clear up and wash dishes after meals?
- v. do your laundry?
- vi. keep your room and stuff tidy?
- vii. get to places on time?
- viii. travel by plane, bus, train?
- ix. organize what you will be doing each day?
- x. go to a shopping center and buy stuff?
- xi. take stuff with you without losing it?

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I. Employment skills

1. What volunteer work have you done? How did you like it?

2. Have you ever been paid for work? How did you like it?

3. What do you think about working?

4. What work skills do you have?

musical/singing entertainer

kitchen hand

storeperson

can use a telephone

can use a computer

can use the Internet

can use e-mail

can do other clerical tasks?

e.g., collect mail

post mail

other?