

**YEAR 2001 SATISFACTION WITH EDUCATION IN ALBERTA
PARENTS OF CHILDREN WITH MILD MODERATE AND SEVERE SPECIAL
NEEDS SURVEY
FINAL DOCUMENT**

Hello, my name is _____ from Criterion Research, an opinion research firm. On behalf of Alberta Learning, we are asking a random sample of parents/guardians of children with special needs about their satisfaction with various aspects of their children's special needs programs during the 2000-2001 school year.

PAT RESPONSE (If unsure of what Alberta Learning is): Alberta Learning is a new Alberta government department, formed in May 1999 when the former departments of Alberta Education (which had responsibility for Kindergarten to Grade 12) and Alberta Advanced Education and Career Development (which had responsibility for post-secondary and adult learning) joined.

Please be assured that we are not trying to sell you anything. We are just interested in your opinions. All answers are kept confidential. Your responses will help to provide the Alberta Government with information to improve the way services are provided for children with special needs.

For the purposes of this survey, may I please speak to the person in your household who is the parent/guardian of a child with special needs and is the person who has had the most recent birthday. Would that be you?

- 1 Yes
- 2 No **ARRANGE CALLBACK/REINTRODUCE IF NECESSARY**

Contact Name/Phone Number:

If you have any questions or concerns about this research project, please do not hesitate to call Terry Wendel at the Special Programs Branch of Alberta Learning in Edmonton, (780) 422-6326.

1. Is your special needs child in **READ LIST** (NOTE: IF THE PARENT INDICATES MORE THAN ONE SPECIAL NEEDS CHILD IN SCHOOL, ASK PARENT TO ANSWER THE REMAINING QUESTIONS FOR THE CHILD WITH THE MOST RECENT BIRTHDAY)
 - 1 Kindergarten/Early Childhood Services
 - 2 Grades 1 to 6
 - 3 Grades 7 to 9
 - 4 Grades 10 to 12

DO NOT READ

F5 Don't Know

2. Overall, how satisfied are you with the quality of education that your child with special needs is receiving? Are you ...**ROTATE AND READ**
 - 1 Very satisfied
 - 2 Satisfied
 - 3 Dissatisfied
 - 4 Very dissatisfied

DO NOT READ

F5 Don't Know/No Answer

3. Overall, how satisfied are you with the responsiveness of the school in providing a program that meets the special needs of your child? Are you ...**ROTATE AND READ**
 - 1 Very satisfied
 - 2 Satisfied
 - 3 Dissatisfied
 - 4 Very dissatisfied

DO NOT READ

F5 Don't Know/No Answer

4. Thinking of your child's Individual Program Plan (IPP), would you **STRONGLY AGREE, AGREE, DISAGREE, OR STRONGLY DISAGREE** that you were meaningfully involved in the development of the IPP? **ROTATE AND READ**
 - 1 Strongly Agree
 - 2 Agree
 - 3 Disagree
 - 4 Strongly Disagree

DO NOT READ

F5 Don't Know/No Answer

F6 Child is not on an IPP

5. Overall, how satisfied are you with the quality of information you receive on the progress of your child? Are you ...**ROTATE AND READ**
- 1 Very satisfied
 - 2 Satisfied
 - 3 Dissatisfied
 - 4 Very dissatisfied
- DO NOT READ**
F5 Don't Know/No Answer
6. Overall, how satisfied are you with your child's overall progress in school this year? Are you ...**ROTATE AND READ**
- 1 Very satisfied
 - 2 Satisfied
 - 3 Dissatisfied
 - 4 Very dissatisfied
- DO NOT READ**
F5 Don't Know/No Answer
7. Thinking about your child's program, would you **STRONGLY AGREE, AGREE, DISAGREE, OR STRONGLY DISAGREE** that your child is learning what he/she needs to know in
- a. Reading ...**ROTATE AND READ**
 - 1 Strongly Agree
 - 2 Agree
 - 3 Disagree
 - 4 Strongly Disagree

DO NOT READ
F5 Don't Know/No Answer
F6 Does not apply
 - b. Writing
 - c. Mathematics
 - d. Social and/or adaptive skills (including classroom behaviour)
 - e. Life skills
 - f. Communication (receptive and expressive language)
 - g. Gross motor development (**DO NOT READ:** e.g., walking, dancing, gymnastics, showing rhythm, sitting, standing)
 - h. Fine motor control (**DO NOT READ:** e.g., cutting, pasting, holding a pen or a pencil, writing and printing, throwing and catching a ball)
8. Overall, how satisfied are you with the goals identified in your child's IPP? Are you...**ROTATE AND READ**
- 1 Very satisfied
 - 2 Satisfied
 - 3 Dissatisfied
 - 4 Very dissatisfied
- DO NOT READ**
F5 Don't Know/No Answer

9. Thinking about your child's teachers, would you **STRONGLY AGREE, AGREE, DISAGREE, OR STRONGLY DISAGREE** that they use methods that help your child learn?...**ROTATE AND READ**
- 1 Strongly Agree
 - 2 Agree
 - 3 Disagree
 - 4 Strongly Disagree
- DO NOT READ**
 F5 Don't Know/No Answer
 F6 Does not apply
10. Thinking about the services that support your child in school, would you **STRONGLY AGREE, AGREE, DISAGREE, or STRONGLY DISAGREE** with the following statements? **ROTATE AND READ**
- a. My child needs services to be able to attend school.
- 1 Strongly agree
 - 2 Agree
 - 3 Disagree
 - 4 Strongly disagree
- DO NOT READ**
 F5 Don't Know/No Answer
- b. My child receives the support services he/she needs to be successful in school.
 c. The types of services my child receives are appropriate for my child.
 d. Services for my child were arranged quickly.
 e. The people providing services spend the right amount of time with my child.
 f. The people providing services to my child work well together.
 g. My child is benefiting from the services being provided.
11. Overall, how satisfied are you with the support services your child is receiving in her/his school? Are you ...**ROTATE AND READ**
- 1 Very satisfied
 - 2 Satisfied
 - 3 Dissatisfied
 - 4 Very dissatisfied
- DO NOT READ**
 F5 Don't Know/No Answer
12. How satisfied are you with your involvement in the provision of support services for your child? Are you ...**ROTATE AND READ**
- 1 Very satisfied
 - 2 Satisfied
 - 3 Dissatisfied
 - 4 Very dissatisfied
- DO NOT READ**
 F5 Don't Know/No Answer

13. Which of the following services did your child receive to **SUPPORT** his/her participation in a special needs program last year (**DO NOT READ:** The 1999-2000 school year) and this year (**DO NOT READ:** The 2000-2001 school year)?
ROTATE AND READ LIST.

- 1 Yes
2 No
F5 Don't Know

Type of Support Service	1999/2000 (LAST YEAR)	2000/2001 (THIS YEAR)
a. Teacher assistant/aide b. Speech-language therapy c. Physiotherapy d. Audiology e. Occupational therapy (DO NOT READ: e.g., play, eating, strength building exercises) f. Respiratory therapy (e.g., using inhalator to expand lung capacity; mucous removal) g. Regular medications/injections h. Emergency medications/injections (DO NOT READ e.g., asthma, allergies) i. Equipment or supplies (DO NOT READ e.g., hearing aids, FM systems, incontinence supplies, wheelchairs) j. Personal counselling (DO NOT READ e.g., low self-esteem, isolation, being different) k. Psychiatry/Psychology (DO NOT READ e.g., depression; suicidal thoughts) l. Management of behaviour problems (DO NOT READ e.g., attention difficulties, conduct difficulties, boredom) m. Sign language interpreter n. Physical needs (e.g., specialized feeding, toileting assistance, lifting and transferring) o. Handicapped Children's Services (DO NOT READ e.g., funding for in-home programs, parent in-servicing, transportation) p. Child welfare q. Probation supervision r. Institutional placement (DO NOT READ e.g., Women's shelters – WIN House; Young Offender Centres – Kennedale* in Edmonton and Westview in Calgary; Group homes – McMan Group Home in Edmonton and Direwood in Red Deer; Youth Assessment Centres in High Prairie and Lac La Biche; Hospitals - University of Alberta, Alberta Hospital in Ponoka). s. Native liaison worker (e.g., aboriginal to work with schools and school system and the aboriginal parent) t. Other Mentions (SPECIFY)		

NOTE: IF Q.13 = 2 FOR ALL IN 2000-2001, GO TO Q. 16

14. In the last question, you identified the support services your child was receiving. Would you **STRONGLY AGREE, AGREE, DISAGREE, or STRONGLY DISAGREE** that it was easy to **ACCESS** these support services for your child? **ASK QU. 14 FOR EACH "1" IN QU. 13 FOR 2000-2001.**

a. Teacher assistant/aide

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DO NOT READ

F5 Don't Know/No Answer

b. Speech-language therapy

c. Physiotherapy

d. Audiology

e. Occupational therapy

f. Respiratory therapy

g. Regular medications/injections

h. Emergency medications/injections (DO NOT READ e.g., asthma, allergies)

i. Equipment or supplies (DO NOT READ e.g., hearing aids, FM systems, incontinence supplies, wheelchairs)

j. Personal counselling (DO NOT READ e.g., low self-esteem, isolation, being different, underachievement)

k. Psychiatry/Psychology (DO NOT READ e.g., depression; suicidal thoughts)

l. Management of behaviour problems (DO NOT READ e.g., attention difficulties, conduct difficulties, boredom)

m. Sign language interpreter

n. Physical needs (e.g., specialized feeding, toileting assistance, lifting and transferring)

o. Handicapped Children's Services (DO NOT READ funding for in-home programs, parent in-servicing, transportation)

p. Child welfare

q. Probation supervision

r. Institutional placement (DO NOT READ e.g., Women's shelters – WIN House;

Young Offender Centres – Kennedale* in Edmonton and Westview in Calgary;

Group homes – McMan Group Home in Edmonton and Direwood in Red Deer;

Youth Assessment Centres in High Prairie and Lac La Biche; Hospitals - University of Alberta, Alberta Hospital in Ponoka).

s. Native liaison worker

t. Other Mentions (s) (SPECIFY): _____

FOR EACH "3" OR "4" IN OU.14, ASK OU. 15.

15. Could you explain why you disagree/strongly disagree that it was easy to access (INSERT FROM QU. 14) for your child?

16. In March 1999, the Student Health Initiative was announced. Please tell me how much you agree with the following statements about the allocation of resources for students with special health needs. Do you **STRONGLY AGREE, AGREE, DISAGREE, OR STRONGLY DISAGREE with the following statements:**

- a. I am knowledgeable about the Student Health Initiative partnership in my community **(IF ANSWER IS 3 OR 4, SKIP B AND C AND GO TO D)**
- b. I have had the opportunity to provide input into the Student Health partnership
- c. I am satisfied with the level of my involvement
- d. My child has received student health services through the Student Health Partnership

We've reached the end of the survey. On behalf of Alberta Learning, I'd like to thank you very much for your time and cooperation.