## Parent Survey Protocol

### Background

1. **What is your gender?**   
   [ ] Male   
   [ ] Female  
   [ ] Do not wish to indicate
2. **Have you been involved in Unified Sports/Youth Leadership/Whole School Engagement activities before either as a coach, volunteer, and/or family member of an athlete?**  
   [ ] Yes  
   [ ] No

*(Source: Appendices to the Report on Methodological Approaches and Procedures)*

1. **How have you been involved in** **Unified Sports/Youth Leadership/Whole School Engagement activities? (Check all that apply)**[ ] Coach   
   [ ] Other volunteer   
   [ ] Family member of an athlete   
   [ ] Other (Specify)

*(Source: Appendices to the Report on Methodological Approaches and Procedures)*

1. **How long have you been involved with Unified Schools activities?**\_\_\_\_\_\_\_ YEARS

*(Source: Developing self-report measures on social inclusion for people with intellectual disabilities and for sports coaches: A transnational study)*

### Participation Activities

1. **Are you aware of Unified Schools activities being adopted in your child’s school?**  
   [ ] Yes  
   [ ] No  
   [ ] Not applicable

*(Adapted from Source: Appendices to the Report on Methodological Approaches and Procedures)*

1. **What Unified Schools activities are implemented in your child’s school (check all that apply)?**[ ] Unified Sports  
   [ ] Inclusive Youth Leadership  
   [ ] Whole School Engagement

*(Adapted from Source: UMASS Boston High School Experience)*

1. **Please indicate your child’s involvement in the following Unified Schools program activities (by checking the “yes”, “no” to indicate your child’s participation, and provide the number of times your child participated in each activity. Provide a response of “not applicable” if the event was not offered at your child’s school at all):**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **During this school year…** | **Yes** | **No** | **# of times student participated** | **Not applicable** |
| My child belonged to a club, student group, or society where students came together for games, community service or school events. *(Such as a Youth Activation Committee, Special Olympics Club or Student Society)* |  |  |  |  |
| My child participated in a day-long sports fair or field day. |  |  |  |  |
| My child supported and cheered for athletes and Unified Sports teams at sporting events or assemblies. *(Most schools call this Fans in the Stands or Unified Sports Pep Rally.)* |  |  |  |  |

*(Source: Adapted by American Institutes for Research)*

#### **Frequency of events**

1. **How often does *your child* attend Unified Sports/Youth Leadership/Whole School Engagement activities?**  
   [ ] Very often  
   [ ] Often  
   [ ] Not very often  
   [ ] Not at all  
   [ ] I don’t know

*(Adapted from Source: UMASS Boston High School Experience Survey)*

1. **How often do *you* attend** **Unified Sports/Youth Leadership/Whole School Engagement activities?**[ ] Every time my child participates  
   [ ] I try to attend **most** events in which my child participates  
   [ ] I try to attend **some** events in which my child participates  
   [ ] I do not attend events   
   [ ] I don’t know

*(Adapted from Source: UMASS Boston High School Experience Survey)*

1. **Please explain why do not you attend Unified Sports/Youth Leadership/Whole School Engagement activities? Select all that apply.**[ ] Lack of time  
   [ ] Lack of interest  
   [ ] Lack of transportation  
   [ ] I’m not allowed to attend  
   [ ] Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Adapted from Source: UMASS Boston High School Experience Survey)*

#### **Experiences with events**

1. **Why did you decide to sign your child up for Unified Sports/Youth Leadership/Whole School Engagement activities? (Select yes or no for each option.)**

|  |  |  |  |
| --- | --- | --- | --- |
| **So that my child can…** | **Yes** | **No** | **Don’t understand question** |
| Play sports with people with intellectual disabilities |  |  |  |
| Play sports with people without intellectual disabilities |  |  |  |
| Try a new sport |  |  |  |
| Improve his/her health and fitness |  |  |  |
| Improve his/her sports skills |  |  |  |
| Improve his/her social skills |  |  |  |
| Make new friends |  |  |  |
| Meet people with intellectual disabilities |  |  |  |
| Meet people without intellectual disabilities |  |  |  |
| Do community service/charity work |  |  |  |
| Other (please describe): |  |  |  |

*(Adapted from Source: UMASS School Experience and Attitude Survey)*

1. **From a scale of 1 to 5 with 1 being no difference and 5 being a big difference, please mark whether or not the Unified Sports/Youth Leadership/Whole School Engagement activities have made a difference in your child’s interactions with others who are part of the Unified Sports program.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **My child has** | **1 – No difference** | **2 – Very little difference** | **3 – Neutral** | **4 – Moderate difference** | **5 – Big difference** | **Don’t Know** |
| spent time with teammates from Special Olympics outside of school |  |  |  |  |  |  |
| Have a friend with an intellectual disability over to your house |  |  |  |  |  |  |
| Stand up for people with an intellectual disability if others are mean |  |  |  |  |  |  |
| Eat a meal with people from either program outside of the program |  |  |  |  |  |  |
| Call someone with an intellectual disability on the telephone |  |  |  |  |  |  |
| Text/SMS a friend with intellectual disability |  |  |  |  |  |  |
| Introduce people with an intellectual disability to their other friends |  |  |  |  |  |  |
| Choose people from either program as a partner in a game |  |  |  |  |  |  |
| Friend people from either program on social media (Facebook/Twitter/Instagram/Snapchat) |  |  |  |  |  |  |
| Go together with someone with intellectual disability to a sports match, movie, or other activity in the community. |  |  |  |  |  |  |

*(Adapted from Source: Special Olympics Unified Champion Schools Evaluation Guide: A Resource for US State Programs)*

### Outcomes/Impacts

#### **Perceived Effects on Schools**

##### *Attitudes and Knowledge Towards Intellectual Disability*

1. **From a scale of 1 to 5 with 1 being no difference and 5 being a big difference, please mark how much of a difference do you think the Unified Schools activities have made in your child’s school in each of the following areas?**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **1 – No difference** | **2 – Very little difference** | **3 – Neutral** | **4 – Moderate difference** | **5 – Big difference** |
| Raising awareness of students about people with intellectual disabilities |  |  |  |  |  |
| Changing students’ attitudes and behaviors towards people with intellectual disabilities |  |  |  |  |  |
| Improving students’ behavior towards people with intellectual disabilities |  |  |  |  |  |
| Raising awareness of teachers about what students with intellectual disabilities can contribute to the school |  |  |  |  |  |

*(Adapted from Source: UMASS Boston Liaison Survey)*

##### *Academic Climate*

1. **Do you think being part of Unified Schools activities has contributed to your child’s academic performance?**  
   [ ] Yes, my child is performing better  
   [ ] Yes, but my child is performing worse  
   [ ] No, it hasn’t changed the way my child performs  
   [ ] I don’t know

*(Source: Adapted by American Institutes for Research)*

#### **Perceived effects on students**

##### *Social Inclusion and School Engagement*

1. **From a scale of 1 to 5 with 1 being no difference and 5 being a big difference, please mark how much of a difference do you think participating in Unified Schools activities has made to your child in each of the following areas?**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **1 – No difference** | **2 – Very little difference** | **3 – Neutral** | **4 – Moderate difference** | **5 – Big difference** |
| Providing more sports opportunities for students with intellectual disabilities |  |  |  |  |  |
| Helping promote leadership and advocacy skills among students with intellectual disabilities |  |  |  |  |  |
| Increasing participation of students with intellectual disabilities in school activities |  |  |  |  |  |
| Increasing confidence for students with intellectual disabilities |  |  |  |  |  |
| Helping promote leadership and advocacy skills among students **without intellectual disabilities** |  |  |  |  |  |
| Increasing participation of students **without intellectual disabilities** in school activities |  |  |  |  |  |

#### (Adapted from Source: Special Olympics Unified Champion Schools Evaluation Guide: A Resource for US State Programs)

1. **How would you rate your child’s engagement in Unified Schools activities?**[ ] Very engaged   
   [ ] A little more engaged than other activities at his/her school   
   [ ] About the same level of engagement compared to other activities at the school   
   [ ] Unengaged  
   [ ] Very unengaged

*(Source: Adapted by American Institutes for Research)*

1. **Compared to other activities in the school, how would you rate the visibility Unified Schools activities at your child’s school?**  
   [ ] A lot more visible than other activities at the school   
   [ ] A little more visible than other activities at the school   
   [ ] About the same level of visibility compared to other activities at the school   
   [ ] A little less visible than other activities at the school   
   [ ] A lot less visible than other activities at the school

*(Source: Adapted by American Institutes for Research)*

##### *Attitudes and Knowledge Towards Intellectual Disability*

1. **Has your child interacted with student with(out) disabilities outside of Unified Schools activities?**[ ] Yes   
   [ ] No  
   [ ] I don’t know

*(Source: UMASS Boston High School Experience Survey)*

1. **Has your child’s *interactions* with student with(out) disabilities changed as a result of participating in Unified Schools activities?**[ ] It’s been more positive  
   [ ] It’s been the same  
   [ ] It’s been more negative  
   [ ] I don’t know

*(Source: UMASS Boston High School Experience Survey)*

1. **Has your child’s *behavior* changed towards students with(out) intellectual disabilities as a result of participating in Unified Schools activities?**[ ] Yes   
   [ ] No  
   [ ] I don’t know

*(Source: UMASS Boston High School Experience Survey)*

1. **From a scale of 1 to 5 with 1 being almost never true and 5 being almost always true, please mark how true these statements are for your child in his/her school?**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **My child…** | **1 – Almost never true** | **2 – Usually not true** | **3 – Occasionally true** | **4 – Usually true** | **5 – Almost always true** |
| Would feel comfortable carrying on a conversation with a student with an intellectual disability at school |  |  |  |  |  |
| Wouldn’t know how to act around a student with an intellectual disability |  |  |  |  |  |
| Would try to avoid talking to a student with an intellectual disability in the hallway |  |  |  |  |  |
| Would exchange their contact information (e.g. their phone number) with a student with an intellectual disability |  |  |  |  |  |
| Would feel uncomfortable with a student with an intellectual disability was in their class |  |  |  |  |  |
| Wouldn’t know how to respond If a student with an intellectual disability started to talk to them |  |  |  |  |  |
| Would feel comfortable working on a school project with a student with an intellectual disability |  |  |  |  |  |
| Would feel uncomfortable introducing a student with an intellectual disability to their friends |  |  |  |  |  |
| Would feel uncomfortable spending time one-on-one with a student with an intellectual disability |  |  |  |  |  |
| Would feel comfortable if a student with an intellectual disability were to ask them to sit together during lunch |  |  |  |  |  |
| Would feel uncomfortable if a student with an intellectual disability hung out with them and their friends |  |  |  |  |  |

*(Source: The Special Olympics Unified Champion Schools Program: Unified Schools Intervention Study Final Report)*

1. **Please select how much the following has changed since the implementation of the U Unified Schools activities.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Decreased a lot** | **Decreased a little** | **Stayed the same** | **Increased a little** | **Increased a lot** |
| The number of opportunities that you’ve seen for students with and without intellectual disabilities to work together on classroom activities |  |  |  |  |  |
| The amount of interaction you’ve seen between students with and without intellectual disabilities in non-classroom settings |  |  |  |  |  |
| The number of opportunities you’ve seen for students with and without intellectual disabilities to work together on extracurricular/afterschool activities |  |  |  |  |  |

*(Source: Adapted by American Institutes for Research)*

##### *Health Outcomes*

1. **The following questions are about specific changes that you might have seen in your child while he/she was participating in Unified Schools activities. Please indicate whether you have observed the following changes in your child.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Since participating in Unified Schools activities…** | **Yes** | **No** | **I don’t know** |
| They seem to do more activities in their community |  |  |  |
| They seem healthier |  |  |  |
| Their sports skills have improved |  |  |  |
| They joined another sports team outside of Unified Sports (or plan to in the future) |  |  |  |
| They seem to exercise more every week |  |  |  |

#### (Adapted from Source: Special Olympics Unified Champion Schools Evaluation Guide: A Resource for US State Programs)

##### *Post-School Outcomes*

1. **Upon graduating from high school, will your child want/be able to attend post-secondary education?**   
   [ ] Yes  
   [ ] No  
   [ ] Not applicable

*(Adapted from Source: UMASS Boston High School Experience Survey)*

1. **Will it be as a result of having participated in the Unified School program (that is Unified Sports and Inclusive Youth Leadership)?**   
   [ ] Yes  
   [ ] No  
   [ ] Not applicable

*(Adapted from Source: UMASS Boston High School Experience Survey)*