

## Infant & Toddler Connection of Virginia **2021 Family Survey - Early Intervention**



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This is a survey conducted by ODU for families receiving Early Intervention services. Your responses will help guide ettorts to improve services and results for children and families. For each statement below, please select one of the following response choices: very strongly disagree, strongly disagree, disagree, agree, strongly agree, very strongly agree. You may select Does Not Apply, the last column, for any item that you feel does not apply to your family. In responding to each statement, think about your experience and your family's experience with Early Intervention services during the past year.

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For quick access to the online survey, simply scan the QR code on the front or back of this survey. You will need a QR scanning app on your device to scan this code. If needed, you can download a free QR scanning app from Google Play Store or iTunes app store.

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## Impact of Early Intervention Services on Your Family

During the past year, Early Intervention services have helped me and/or my family:	Very Strongly Disagree	Strongly Disagree	Disagree	Agree	Strongly Agree	Very Strongly Agree	Does Not Apply
1participate in typical activities for children and families in my community	O	0	0	Ô	0	O	O
2know about services in my community	0	0	0	0	0	0	0
3improve my family's quality of life	0	0	0	0	0	0	0
4know where to go for support to meet my child's needs	0	0	0	0	0	0	0
5know where to go for support to meet my family's needs	0	0	0	0	0	0	0
6feel that I can handle the challenges of parenting my child with his/her needs	0	0	0	0	0	0	0
7 feel more confident in my skills as a parent	0	0	0	0	0	0	0
8keep up friendships for my child and family	0	0	0	0	0	0	0
9find information I need	0	0	0	0	0	0	0
10know how to make changes in family routines that will benefit my child	0	0	0	0	0	0	0
11 figure out solutions to problems as they come up	0	0	0	0	0	0	0
12feel that I can get the services and supports that my child and family need	0	0	0	0	0	0	0
13understand how the Early Intervention system works	0	0	0	0	0	0	0
14 be able to evaluate how much progress my child is making	0	0	0	0	0	0	0
15feel that my child will be accepted and welcomed in the community	0	0	0	0	0	0	0
16feel more confident in finding ways to meet my child's needs	0	0	0	0	0	0	0
17communicate more effectively with the people who work with my child and family	0	0	0	0	0	0	0
18understand the roles of the people who work with my child and family	0	0	0	0	0	0	0
19know about my child's and family's rights concerning Early Intervention services	0	0	0	0	0	0	0
20do things with and for my child that are good for my child's development	0	0	0	0	0	0	0
21understand my child's needs	0	0	0	0	0	0	0
22feel that my efforts are helping my child	0	0	0	0	0	0	0









Your Family's Experience in Early Intervention	Very Strongly Disagree		Disagree		Strongly Agree	Very Strongly Agree	Does Not Apply
1. What I say about my child and family is understood and respected.	0	0	0	0	0	0	0
2. The people who work with my child and family answer our questions.	0	0	0	0	0	0	0
3. I can easily get in touch with my service coordinator.	0	0	0	0	0	0	0
<ol> <li>The services provided to my child and family help reach the outcomes/goals that are important to my family.</li> </ol>	0	0	0	0	0	0	0

1. What is your child's gender?

O male O female

- 2. How old is your child now?
  - O Birth to 12 months
  - $\bigcirc$  13 months to 24 months
  - $\bigcirc$  25 months to 36 months
  - Older than 3 years
- 3. How old was your child when first referred to Early Intervention?
  - O Birth to 12 months
  - $\bigcirc$  13 months to 24 months
  - $\bigcirc$  25 months to 36 months

- 4. What is your child's Race/Ethnicity?
  - O White
  - O Black or African-American
  - O Hispanic or Latino
  - O Asian
  - O American Indian or Alaskan Native
  - O Pacific Islander or Hawaiian Native
  - O Two or More Races



- 5. How long has your child been receiving Early Intervention services?
  - O less than 6 months
  - $\bigcirc$  6 months 1 year
  - O more than 1 year

Thank you for taking the time to answer these questions!

Please return the survey in the postage-paid envelope provided or return to: SSRC, BAL Bldg #2000, 1 Old Dominion University, Norfolk, VA 23508-9800

If you are interested in seeing the results of previous surveys, please visit: http://www.infantva.org/sup-FamilySurvey.htm

If you prefer to complete this survey online, please scan the QR code below and you will be directed to the web based version of this survey.



