Appendix A: Final Research Survey

1. Is your child attending occupational therapy sessions for sensory integration difficulties?
   - Yes
   - No

2. How old is your child who is attending occupational therapy for sensory integration difficulties?
   - 1 year old
   - 2 years old
   - 3 years old
   - 4 years old
   - 5 years old
   - 6 years old
   - 7 years old
   - 8 years old
   - 9-12 years old

3. How long has your child received occupational therapy intervention for sensory integration difficulties?
   - 3-5 months
   - 6-11 months
   - 1-2 years
   - More than 2 years

4. In addition to sensory integration difficulties, has your child been diagnosed with any of the following conditions?
   - None
   - Attention Deficit Disorder or Attention or Attention Deficit Hyperactivity Disorder
   - Anxiety or Depression
   - Neuromotor difficulties (eg. Cerebral Palsy, muscular dystrophy, spina bifida, spinal muscle atrophy)
   - Learning Disability (eg. dyslexia, dysgraphia, or auditory processing disorder)
   - Other diagnosis (please specify):_____

5. In what setting is your child attending therapy? (Tick all items that are relevant)
   - Private Practice
   - Government School

- Private School
- Mainstream School
- Remedial School
- Special Needs School
- Hospital
- Other:_____

6. Does your child attend individual occupational therapy or group therapy?
   - Individual Therapy
   - Group Therapy
   - Both individual and group therapy
   - I am unsure if my child attends therapy individually or in a group

7. Does your child attend occupational therapy in person or online?
   - In-person
   - Online
   - Both

8. How is your child's occupational therapy funded?
   - I pay for my child's therapy
   - My medical aid pays for my child's therapy
   - My child's therapy is included in their school fees
   - My child's therapy is free of charge at their school or institution
   - A third party funds my child's therapy
   - My child's therapy is funded by the government
   - Other:_____

9. How would you rate your involvement in your child's occupational therapy?
   - Very uninvolved
   - Involved
   - Neutral
   - Involved
   - Very involved

10. How satisfied are you with the parent support that you receive from your therapist?
    - Very unsatisfied
    - Unsatisfied
    - Neutral
    - Satisfied
    - Very satisfied

11. Which of the following support methods are available to you as a parent of a child attending occupational therapy for their sensory integration difficulties (with or without an additional fee). Select all options which apply.
    - o Parent-therapist consultations or feedback meetings
    - o Written feedback from your child's therapist after therapy sessions
    - o Verbal feedback from your child's therapist after therapy sessions
    - o Formal assessment and progress reports
    - o In-depth home programs specific to your child's therapy aims
    - o General Home Programs to support your child's sensory integration
    - o Training in specific sensory techniques or activities that are to be administered by you as the parent
    - o Suggestions or ideas about home-activities to do with your child between therapy sessions (ie Homework)
    - o Parent support groups with other parents of children who are attending occupational therapy
    - o Sitting in on your child's therapy sessions and observing/asking your therapist questions
    - o Email/ WhatsApp (or other electronic) communication with your child's therapist
    - o Parent education seminars about sensory integration difficulties either in person or online
    - o Suggestions on how to modify your child's home environment, or an activity itself, in order to support their sensory needs
    - o Home Visits
    - o Classroom observations or school visits with feedback to you as the parents, on how your child is coping within their learning environment.
    - o Suggestions of activities which can be incorporated into your child's routine, or modification of their routine to support their sensory needs
    - o Goal-setting and problem-solving sessions or conversations with your child's therapist
    - o Other (please name):_____

The following questions are used to determine which support methods are valued by you as a parent. Rate each of the support methods according to how helpful you find them (if they are already in place) or how helpful you think they could be (if they are not in place).

12. Parent-therapist consultations or feedback meetings

o Very unhelpful o Unhelpful o Neutral o Helpful o Very helpful

13. Written feedback from your child's therapist after therapy sessions

o Very unhelpful o Unhelpful o Neutral o Helpful o Very helpful

14. Verbal feedback from your child's therapist after therapy sessions

o Very unhelpful o Unhelpful o Neutral o Helpful o Very helpful

15. Formal assessment and progress reports

o Very unhelpful o Unhelpful o Neutral o Helpful o Very helpful

16. In-depth home programs specific to your child's therapy aims

o Very unhelpful o Unhelpful o Neutral o Helpful o Very helpful

17. General Home Programs to support your child's sensory integration

o Very unhelpful o Unhelpful o Neutral o Helpful o Very helpful

18. Training in specific sensory techniques or activities that are to be administered by you as the parent

o Very unhelpful o Unhelpful o Neutral o Helpful o Very helpful

19. Suggestions or ideas about home-activities to do with your child between therapy sessions (ie Homework)

o Very unhelpful o Unhelpful o Neutral o Helpful o Very helpful

20. Parent support groups with other parents of children who are attending occupational therapy

o Very unhelpful o Unhelpful o Neutral o Helpful o Very helpful

21. Sitting in on your child's therapy sessions and observing/asking your therapist questions

o Very unhelpful o Unhelpful o Neutral o Helpful o Very helpful

22. Email/ WhatsApp (or other electronic) communication with your child's therapist

o Very unhelpful o Unhelpful o Neutral o Helpful o Very helpful

23. Parent education seminars about sensory integration difficulties either in person or online

o Very unhelpful o Unhelpful o Neutral o Helpful o Very helpful

24. Suggestions on how to modify your child's home environment, or an activity itself, in order to support their sensory needs

o Very unhelpful o Unhelpful o Neutral o Helpful o Very helpful

25. Home Visits

o Very unhelpful o Unhelpful o Neutral o Helpful o Very helpful

26. Classroom observations or school visits with feedback to you as the parents, on how your child is coping within their learning environment.

o Very unhelpful o Unhelpful o Neutral o Helpful o Very helpful

27. Suggestions of activities which can be incorporated into your child's routine, or modification of their routine to support their sensory needs

o Very unhelpful o Unhelpful o Neutral o Helpful o Very helpful

28. Goal-setting and problem-solving sessions or conversations with your child's therapist

o Very unhelpful o Unhelpful o Neutral o Helpful o Very helpful

29. Is there any other form of support, currently in place, from your child's therapist that you find helpful?

_____

30. Is there additional support from your child's therapist that you, as a parent, would find helpful in future?_____

The following questions are to determine what content of therapist-parent education is valued by you as a parent. Please rate each of the following topics according to how helpful you find them in relation to your child's therapy

31. Explanations of Sensory Integration Terminology.

o Very unhelpful o Unhelpful o Neutral o Helpful o Very helpful

32. Explanations of specific sensory integration difficulties that your child is experiencing, the underlying cause and how it relates to their functional difficulties.

o Very unhelpful o Unhelpful o Neutral o Helpful o Very helpful

33. Explanations of how other diagnoses are related to sensory integration difficulties.

o Very unhelpful o Unhelpful o Neutral o Helpful o Very helpful

34. Explanations of the theory behind the treatment techniques implemented in therapy and at home.

o Very unhelpful o Unhelpful o Neutral o Helpful o Very helpful

35. Explanations of the link between functional difficulties (at home, school and in the community) and sensory integration difficulties.

o Very unhelpful o Unhelpful o Neutral o Helpful o Very helpful

36. Explanations of the link between behavioural difficulties and sensory integration

o Very unhelpful o Unhelpful o Neutral o Helpful o Very helpful

37. Are there other topics that your child's therapist has covered with you that you have found helpful?
    _____

38. Is there any other content you would find helpful in relation to your child's therapy?_____