

Research Priorities for Learning Difficulties in Children and Young People

Survey

Tell us what matters to you about research into learning difficulties

Who can take part?

We would like you to complete this survey if you are:

- a child or young person who has learning difficulties
- an adult who has experienced learning difficulties as a child
- a parent/carer of a child or young person with learning difficulties
- a professional working with a child or young person with learning difficulties
 e.g. those working in health, education, social work or the third sector.

Additional information

Go to www.SalvesenMindroom.org for an **online version** of the survey, **more information**, including Q&As and a **child-friendly version** of this form

or call: Ai Lim on 0131 536 8898 or email: LD_research@ed.ac.uk

Learning difficulties definition

For this survey, learning difficulties means a problem of understanding or an emotional difficulty that affects a person's ability to learn, get along with others and follow convention. On a day-to-day basis, this may be many things – struggling with reading, writing or numeracy, not being able to concentrate for long periods, losing track of time, forgetting what has just been learned or acting impulsively.

If diagnosed, a learning difficulty may be associated with many conditions such as dyslexia, autism spectrum disorder (ASD) etc.

Survey closes: 31 July 2017







Consent

It is your choice whether you fill in this survey or not. The questions and comments that you write below may be published online and in printed documents but we will never publish your name.

Section A - Your Questions

What questions would you like answered by research?

Think about your own personal and/or professional experience with learning difficulties. Your questions might be related to:

- causes
- identifying or diagnosing learning difficulties
- the effect on everyday life (e.g. in education, work, relationships, health and wellbeing)
- what helps (e.g. interventions, therapies, treatments, care and support)
 or anything you'd like to know the answer to.

No question is too big or too small. You can suggest up to three questions. They do not have to be in order of importance.

Please write your questions in the boxes below. Question 1		
Question 2 (please leave blank if you don't have any more questions)		
Question 3 (please leave blank if you don't have any more questions)		

Section B - Anonymous Information About You

This question will help us check we have a wide range of people taking part in this survey.

Please note: If you are completing this form on behalf of someone else, please complete the form with their details (gender, age etc) rather than your details.

1.	Who	are you?
		A child or young person (please answer questions 2-6)
		An adult who experienced learning difficulties as a child (please answer questions 2-6)
		A parent/carer (please answer questions 7-13)
		A professional (please answer questions 14-16)

Please note: the following questions are optional

Children and young people with a learning difficulty and adults who experienced learning difficulties as a child

2.	What is your gender?
	Male
	Female
	Other (Please specify)
	Prefer not to answer
3.	How old are you?
	(Please note: Adults don't need to answer this question)
	Prefer not to answer
4.	What is your ethnicity?
	White
	Mixed/multiple ethnic groups
	Asian or Asian British
	Black African, Black Caribbean or Black British
	Other (Please specify)
	Prefer not to answer
5.	What is your postcode?
6	What learning difficulty(ies) do you have?
0.	what learning unitedity(les) do you have:
	I do not know
	Prefer not to answer

Please now turn to Section C on page 8

Parents and carers

Abo	ut you:
7.	What is your gender?
	Male
	Female
	Other (Please specify)
	Prefer not to answer
8.	What is your ethnicity?
	White
	Mixed/multiple ethnic groups
	Asian or Asian British
	Black African, Black Caribbean or Black British
	Other (Please specify)
	Prefer not to answer
9.	What is your postcode?
	ut the child/children you were thinking about en completing Section A:
10.	What is their gender?
	Male
	Female
	Other (Please specify)
	Prefer not to answer
11.	How old is the child or young person? (Please write ages of all children you were thinking about)
	Prefer not to answer

12.	What is their ethnicity?
	White
	Mixed/multiple ethnic groups
	Asian or Asian British
	Black African, Black Caribbean or Black British
	Other (Please specify)
	Prefer not to answer
13.	What learning difficulty(ies) does the child or young person have?
	I do not know
	Prefer not to answer
Dlor	ace new turn to Section Con nage 9
Pied	ase now turn to Section C on page 8
Hea	alth, educational, social work
	third sector professionals
	•
14.	If you are a professional working with a child or young person
	who has learning difficulties, what is your profession? (Please tick all that apply)
	(Flease tick all triat apply)
	Education
	Classroom assistant/Pupil support assistant
	Educational psychologist
	Support for learning staff
	Teacher
	Health
	Audiologist
	Child and adolescent mental health staff
	Clinical psychologist
	Clinician
	Community learning disability nurse
	General practitioner
	Health visitor
	Nurse
	Occupational therapist
	Ontometrist

	Paediatrician
	Physician
	Physiotherapist
	Psychiatrist
	School nurse
	Speech and language therapist
	Social Work
	Social worker
	Social worker
	Third Sector/Voluntary Sector
	Practitioner
	Volunteer
	Other
	(Please specify)
	Prefer not to answer
15	What is your work postcode? (if you have many workplaces,
13.	please use your primary work postcode)

Please now turn to Section C on page 8

Section C - Additional Details

16. Would you like to hear more about the next stages and progress of this project?		
Yes No		
If yes , please give us your name and email below.		
Your contact details*:		
Name:		
Email address: (Please complete in capital letters)		
If you don't have an email address – please give us your postal address and/or telephone number		
Postal address:		
City/Town:		
Postcode: Phone number:		
17. How did you hear about this survey?		
Thank you for completing this survey!		

Updates about this survey, including the results, will be available online at www.SalvesenMindroom.org

Please return your completed survey by 31 July 2017

- by email to: LD_research@ed.ac.uk
- by post to: Dr Ai Keow Lim

The Salvesen Mindroom Centre

c/o Child Life & Health University of Edinburgh

20 Sylvan Place Edinburgh EH9 1UW

 by freepost envelope. For an envelope call 0131 536 8898 or email LD research@ed.ac.uk

^{*}Data Protection: Your contact details will be kept confidential and secure in accordance with the UK Data Protection laws. They will only be used for the purposes of this project and will be destroyed once the project has been completed.

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