

Introduction

Thank you for coming today to share your experience with the TEAM program. Our group discussion today is about your motivations for wanting your child to participate in the program, the types of activities that your child participated in, what you feel your child has gained from the program and any recommendations for further activities and information that you would like to have in the future. The discussion will be approximately 1 hour. We will record your responses so we can accurately note your responses, however all the information is confidential. We will not share your name or attribute any information directly to you unless you give permission. The findings from our discussion will be shared with the Autism Program, the hospital and other organizations interested in establishing programs like the TEAM program.

Questions

1. How long has your child been involved with the TEAM program?
2. Was your child in a mentor or mentee role in the community or at school while participating in the TEAM program?
3. When you first learned about the TEAM program, why did you want your child to join?
 - a. What were your goals for your child?
4. What was challenging for your child? Can you give me an example?
 - a. How do you feel those challenges were addressed?
5. What skills did you think your child gained from the program that could help your child in the future?
6. How did you think your child has changed since joining the program? Can you give me an example? (Probe: ask about social activities, ability to feel part of a group, take on something new, doing better in school academically or behaviorally)
7. Can you share about any feelings (e.g. isolation, loneliness, worrying) that may have been struggles for your son/daughter? Are there changes that you have observed in these struggles, perhaps resulting from participation in TEAM?
8. Has your child discussed participating in any specific activities while being a part of the TEAM program?
 - a. If yes, what were the specific activities they identified and what did they express enjoying or not enjoying about the activity?
 - b. From your perspective, did they learn anything from participating in the identified activity(ies)?
9. What would you like to see for future activities through the TEAM program for your child?
 - a. What about training topics?
10. What else would like to share with us the TEAM program?
11. Any interest in PLAN?