

MODULE ON CHILD FUNCTIONING
Manual for Interviewers



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Division of Data, Research and Policy

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Section 1

INTRODUCTION

1. Objectives

UNICEF and the Washington Group on Disability Statistics (WG) developed the Module on Child Functioning for use in censuses and surveys. The module, which is in line with the United Nations Convention on the Rights of Persons with Disabilities (CRPD) and the International Classification of Functioning (ICF), is intended to provide an estimate of the number/proportion of children with functional difficulties. These functional difficulties may place children at risk of experiencing limited participation in an unaccommodating environment. The module covers children and adolescents between 2 and 17 years of age and assesses functional difficulties in the domains of seeing, hearing, mobility, selfcare, fine motor, communication/comprehension, learning, remembering, playing, affect, controlling behaviour, attention and concentrating, coping with change, and relationships. It conforms to the 'biopsychosocial' model of disability, focusing on the presence and extent of functional difficulties rather than on body structure or conditions (i.e., causes of those difficulties). For example, a mobility limitation can be the result of cerebral palsy, loss of limbs, paralysis, muscular dystrophy or spinal cord injuries. Behavioural issues may result from autism, attention deficit hyperactivity disorder, or a mental health condition. Moreover, children with the same cause of difficulties may have very different types of degrees of limitations. Functional difficulties occur on a continuum from very mild to very severe. For example, a child with cerebral palsy might have a slight speech impairment but can easily be understood while another child with the same condition might not be able to speak at all making communication very challenging. Some of these difficulties are traditionally seen as a 'disability' while others are not.

Disability is a complex concept, involving aspects of body function and structure (impairments), capacity (measured as the ability to carry out basic activities without the benefit of assistance in any form), and performance (measured as the individual's ability to carry out these same basic activities using available assistive technologies and assistance). Furthermore, disability emerges from the interaction of the person and their environment¹. For persons with a functional difficulty, disability becomes manifest when they meet barriers in their environment that prevent them from participating in society to the same extent as people without any functional difficulties. For example, children who have difficulty hearing become disabled through a non-accommodating environment – such as lack of hearing aids, sign language interpretation, or attitudes that children with hearing difficulties cannot succeed in school. However, given appropriate accommodations including sign language interpretation and adapted learning materials, children with hearing difficulties would be better able to perform the same activities as other children. The module is designed to capture this continuum of functional abilities across a breadth of domains. It is not intended as a diagnostic tool.

1. The definition of 'disability' has evolved over time. The medical model that identifies children based on a diagnosis and focuses on impairments or diseases (e.g., cerebral palsy, blindness, deafness, spina bifida, etc.) has been replaced by a biopsychosocial definition that incorporates a child's functional ability in multiple domains. This is in line with the CRPD and its underpinning biopsychosocial model of disability, i.e., 'persons with disabilities include those who have long-term physical, mental and intellectual or sensory impairments which in interaction with various attitudinal and environmental barriers may hinder their full and effective participation in society on an equal basis with others' (article 1). Medical diagnoses and prevalence estimates that focus on impairments and diseases may be useful for planning medical and some rehabilitation interventions but under-identify/estimate children with disabilities, which according to the new biopsychosocial model of disability, include children with functional difficulties undertaking basic life activities (regardless of cause).

2. General Characteristics

The module is comprised of two questionnaires – one with 16 questions for children aged 2 to 4 years and another with 24 questions for children aged 5 to 17 years.

Functional domains covered in each questionnaire are as follows:

2-4 years: Seeing, hearing, walking, fine motor, communication/comprehension, learning, playing and controlling behaviour.

5-17 years: Seeing, hearing, walking, selfcare, communication/comprehension, learning, remembering, concentrating, accepting change, controlling behaviour, making friends, and affect (anxiety and depression).

Two types of response formats are used in the questionnaire.

• Dichotomous Yes/No responses

Questions that are introductory in nature use Yes/No response options. In some instances these questions activate skip patterns.

Example: Does (*name*) wear glasses or contact lenses?

- 1) Yes
- 2) No

• Scaled responses

Questions to obtain information about degrees of difficulties, frequency or related qualities use scaled responses.

Example: Compared with children of the same age, does (*name*) have difficulty walking?

Would you say:

- 1) No difficulty
- 2) Some difficulty
- 3) A lot of difficulty
- 4) Cannot do at all

Example: How often does (*name*) seem very anxious, nervous or worried?

Would you say:

- 1) Daily
- 2) Weekly
- 3) Monthly
- 4) A few times a year
- 5) Never

Example: Compared with children of the same age, how much does (*name*) kick, bite or hit other children or adults?

Would you say:

- 1) Not at all
- 2) The same or less
- 3) More
- 4) A lot more

3. Eligible Respondents

The questionnaire is to be administered to the mother or, if the mother is not alive or does not live in the household, to the primary caregiver of the child in question. The primary caregiver may be a grandparent, other family member or someone else living in the household. Respondents do not need to be literate, although depending on age, maturity, cognitive ability and place of origin respondents may find some questions or concepts more difficult to understand than others.

If the mother or primary caregiver is not available at the time of the interview, the interviewer must return to the home at a time when she is available. A substitute respondent who is not the mother or primary caregiver should not be interviewed in place of the mother/primary caregiver.



Section 2

INTERVIEWING GUIDELINES

1. General

Duration of interviews

The interview is expected to last 5 to 10 minutes per child, on average, but may take longer depending on the comprehension and literacy level of the respondent. Respondents who have problems with language, are less educated, very talkative or have children with many difficulties may take longer to answer questions.

Conducting the interview in private

The respondent should be interviewed in private and no other member of the household should be present. If total privacy is not possible, the respondent may have to be interviewed outside the house.

Standardization

Every interviewer must conduct the interview the same way with each respondent. This is done to minimize differences in responses that might occur if formatting, structure or interviewing techniques changed with every respondent. A respondent might answer very differently if interviewed with other people in the room or if the interviewer is unpleasant or patronizing. Likewise, a rushed interview or the interviewer's lack of interest may greatly affect responses. Research has shown that the interviewer can have an effect on the data collection because of four factors: his/her socioeconomic background, unconventional administration of the questionnaire, wording and intonation, and reaction to respondent's difficulties in understanding the questionnaire. Except for the interviewer's background, these factors can be addressed in training.

Role of Interviewer

The interviewer is responsible for asking questions, answering respondents' queries, recording answers and editing the questionnaire. He/she must check that the respondent has understood the questions by using

interviewing techniques such as neutral probes, clarification and appropriate feedback, and determine whether the answer given is appropriate. Listening to what the respondent is communicating, both verbally and non-verbally, will ensure that the information is correct. The interviewer must set the pace of the interview and keep the respondent focused and interested. The atmosphere should be comfortable and pleasant at all times. Before going to the field, the interviewer must be familiar with the questionnaire and know how it is to be administered. Thorough preparation as well as extensive practice will guarantee that this is achieved.

Role of Respondent

The role of the respondent is to cooperate with the interviewer and follow his/her instructions. The respondent must listen to questions attentively without interrupting, take her time before answering, and try to give an accurate and complete response. Whenever a question seems unclear the respondent should ask for clarifications and ask the interviewer to repeat or rephrase it. Trying to answer an unclear question is likely to lead to an incorrect response.

Role of Supervisor

The role of the supervisor is to check that interviewers perform their work well. This includes handling the logistics of the survey, coordinating with other staff, recruiting and training additional interviewers, and supervision. Supervision must be given to interviewers before, during and after the interview. Supervisors must not only check that contact procedures are followed correctly but that interviews are conducted appropriately. They should ensure that standardized interviewing techniques are observed when asking questions, clarifying, probing and giving feedback in a nondirective manner.

After the interview has been conducted, they must also check that data is coded and entered correctly. Supervisors must give feedback and debrief on a regular basis, in order to update the organization responsible for the study on the progress of the survey and any problems that have arisen.

Questionnaire Conventions

The survey uses two standard typographical conventions to indicate how the survey questions should be read to the respondent.

1. Anything written in standard print is to be read to the respondent.

Example: I would like to ask you some questions about difficulties your child may have.

2. Anything written in *[italics]* is an interviewer instruction and should not be read aloud. Insert the name of the child wherever indicated by *(name)*.

Example: Does *(name)* wear glasses?

2. Interviewer Instructions

This section describes in detail the steps to take, from start to finish, in the process of conducting an interview:

- Introduce yourself and the survey so the respondent feels comfortable and knows what to expect.
- Ask basic information about the child, including age and his/her name so it can be inserted into the questionnaire as it is being administered.
- Ask the survey questions using common conventions so the data will be unbiased and comparable across all interviewers.
- Provide clarification when the respondent does not understand the question.
- Probe for more information when the respondent seems to misinterpret the question or provides an incomplete or inappropriate response.
- Provide feedback to encourage the respondent and to maintain control over the interview.
- Record the data so that it is complete, reliable and consistent among different interviewers.
- Check the data to ensure that it is complete before leaving the household.



Introduction to the Interview

The interviewer must clearly communicate the objectives of the survey to the respondent. Knowing what is expected of the respondent will contribute to the accuracy in responses. The interviewer should establish a good rapport with a clear and complete introduction to himself and the survey.

Make a good impression

- Introduce yourself.
- You are a professional interviewer from a legitimate and reputable organization.
- Explain the purpose of the project:
 - The survey is about children and their ability to do different things.
 - We need to make sure that everyone understands these questions and that everyone understands them in the same way.
- Explain the process:
 - You will ask the questions and they will answer.
- The questionnaire is for gathering data for important, worthwhile research.
- The respondent's participation is vital to the success of the research but is voluntary and the respondent can choose to conclude her participation at any time during the interview.
- The responses given will be confidential and will only be used for research purposes.
- Ask the respondent if she has any questions.

Do not mention the word 'disability' in the introduction, nor at any other time during the entire interview process.

Conduct the interview clearly and pleasantly

- You should be pleasant and assertive, and make the respondent feel at ease.
- You should know the questionnaire thoroughly and be well prepared to answer any questions.
- You should speak slowly and clearly to set the tone for the interview.
- You should adapt your introduction to the respondent, as different respondents require different amounts of information.
- You should be motivated and interested in the interview.

Asking Questions

At the outset, the interviewer should make it clear the interview is not a test and that there are no right or wrong answers. There are rules in interviewing that should be followed to avoid biased answers and to ensure comparability of data.

- Response options must be read aloud to the respondent.
- Read questions exactly as they are written in the text. Do not paraphrase, rephrase or change the wording in any way.
- Do not change the order of the questions.
- Read the questions slowly and clearly, emphasizing key words. The pace should be about two words per second.
- Read the questions in a pleasant voice that conveys interest, assurance and professionalism.
- Maintain eye contact (or whatever equivalent is culturally appropriate).
- Read the entire question to the respondent making sure that she has heard all of it. If the respondent interrupts before the end, the question should be repeated.
- Do not skip questions, even if the respondent has given the answer earlier or if one answer applies to questions that are similar, unless you are certain of the answer.
- Follow skip patterns closely.
- Verify information volunteered by the respondent. The respondent may volunteer information before a question is asked. If the interviewer asks that question when it comes up and ignores what the respondent has

said earlier, she may be annoyed because she thinks that the interviewer was not listening to her.

Two approaches can be taken:

1. Ask questions with a preface to acknowledge the fact that the respondent has already provided information relevant to a particular question. The interviewer may read the question with a preface.

'You told me that before ... but I still need to ask you this question as it is written.'

2. Skip questions only if the interviewer knows with certainty that a question has already been answered. This is not recommended.

The interviewer should not assume what the respondent will say, or think, because of health condition or lifestyle, or that the respondent is bound to answer one way rather than another.

The interviewer may be tempted to skip questions or make comments such as, *'I know this probably doesn't apply to you, but...'* This practice may prevent efforts to get accurate and unbiased information or learn to what extent answers to earlier questions actually do predict answers to later ones.

The interview should not be rushed and the respondent must be allowed enough time to understand and answer a question. If the respondent feels pressured to give a quick reply, she may answer with anything that crosses her mind or say that she 'doesn't know'. In addition, trying to have a rushed interview will slow things down, as more questions will need to be repeated a second time.

Clarification

Clarification is needed when the respondent is unable to answer a question because she does not understand it completely or at all.

When to clarify:

- The respondent does not seem to understand the question and gives an inappropriate reply.
- The respondent does not appear to have heard the question.
- The respondent takes a lot of time to think about her answer.
- The respondent asks about a specific part of the question. In this case, it is acceptable to repeat only that part of the question.

When the respondent asks for one option to be repeated, all the options should be read again. Assumptions should not be made about how the respondent is going to respond. When the respondent asks for one term to be clarified, the interviewer should refer to the Question–by–Question Specifications in Section 3. If the definition does not exist, he should ask the respondent to answer the question according to whatever the question means to her.



Probing

Probing is needed when the respondent seems to understand the question but gives a response that does not meet the objectives of the question. It is mainly used to encourage the respondent to expand on what has been said or to clarify her response, while keeping her focused to avoid incomplete answers or irrelevant information.

When to probe:

- The respondent does not seem to understand what has been asked, misinterprets the question, cannot make up her mind or digresses from the topic.
- The respondent seems to have understood the question but has not answered appropriately.
- The respondent has replied correctly but may have other things to say.
- Silence may be the best probe and will give her time to think and expand on her answer. A look or a nod may also encourage communication.
- The respondent has not given a complete answer or her answer is unclear.
- The respondent needs to give more information.

Probing techniques:

- Repeat the question. The respondent may come up with the right answer if she hears the question a second time.
- Pause. This gives the respondent time to collect her thoughts and expand on her answer if she has more to say. The interviewer must be sensitive enough to know when to use a pause and for how long. Usually a pause together with an expectant look or a nod will encourage communication.
- Repeat the respondent's reply. This is often a very effective way of having the respondent reflect on the answer she has just given. The interviewer can repeat the question as he is recording it.
- Use neutral introductions to avoid biasing responses. Do not ask leading questions or suggest answers such as, *'I guess you mean...'*, as such questions may influence the respondent. Instead say, *'Overall, generally speaking...'* The interviewer should never give the impression that he approves or disapproves of what the respondent says, or that her answer is right or wrong. If the respondent asks for his opinion, the interviewer should say that he is interested in what the respondent has to say and that he needs to keep the interview going.

Feedback

It is important that the interviewer tells the respondent when she is doing well to keep her motivated and more likely to participate appropriately, by:

- Listening to the whole question without interrupting;
- Giving appropriate and complete answers to the questions;
- Answering in a way that meets the objectives of the questions;
- Avoiding digression.

Giving feedback

- Feedback should be used to keep the respondent focused, and to discourage digression or inappropriate enquiries;
- Positive feedback must be given for good performance;
- Feedback can be verbal as well as non-verbal, such as a smile or a nod;
- Short feedback sentences should be used for short responses and longer feedback sentences for longer responses;
- There should be a brief pause after feedback for more effect;
- Vary the type of feedback by using different phrases;
- Certain comments such as, *'Let me make a note of this...'* can motivate the respondent if she feels that what she is saying is important.

In addition to listening to what the respondent is saying, it is useful to pay attention to gestures and tone of voice, which can often give a better indication of what the respondent is trying to say if her verbal answer is confusing or inarticulate. Anger or frustration may not come through verbally but may be communicated non-verbally.

Situations requiring feedback

- Respondent makes inappropriate enquiries and asks for advice or information, or wants to know about the interviewer's personal experiences.

Suggested phrases:

'In this interview, we are really interested in learning about your experiences.'

'When we finish, let us talk about that.'

'We will come to that later.'

- Respondent digresses from the questions by giving lengthy responses or unnecessary information.

'I have many more questions to ask so we should really move on.' *'If you would like to talk more about that, perhaps we can do it at the end of the interview.'*

- Respondent gives inappropriate responses or feels like conversing. Silence can be quite effective in this case.

Minimizing Repetition

In some cases, the interviewer or respondent may feel a high degree of repetition during administration of the questionnaire due to repeated response options for each question. If the interviewer senses frustration on the part of the respondent due to repetition or if the respondent answers the question correctly before the interviewer has completed saying all the response options, the interviewer can use his/her best judgement to omit repeating response options for subsequent questions that have the same response options, as long as the respondent continues to provide acceptable responses. If the respondent forgets the response options and provides an incorrect response, the interviewer must repeat all response options.

Another approach to minimizing repetition is to omit saying the word 'difficulty' when repeating the response options after the first few questions.

E.g., *'Would you say John has no difficulty, some, a lot, or cannot do at all?'*

Recording Data

Rules for data entry

The interviewer must ask the questions and record the interview correctly to ensure unbiased and reliable data. The respondents' answers must all be noted down.

Techniques for data entry

- Use a pencil for writing. It will be easier to erase any information from the questionnaire or rewrite words or sentences. The interviewer should not erase any notes made, as they can be useful. Red ink is not to be used as it is for editor's corrections.
- The information must be legible. Illegible handwriting is not of much use if only the interviewer can read it.
- Check that all the questions have been asked. If a question has been skipped by mistake, it can be corrected. If the respondent decides to change her mind on one of the options, the new answer must then be recorded.
- Each interview must be identified and the following information must be noted on each questionnaire: Interviewer's name, project number, sample ID, interview number and date of interview.

How to record data

All questions in the module are closed-ended and require the correct response to be circled. The interviewer must neatly circle one number and make sure that no other response is circled. If an incorrect answer is circled because the respondent has changed her mind or because the interviewer has made a mistake, the answer should be crossed out with a forward slash (/) and the correct option circled.

Uncertainty about the respondent's answer

If the interviewer is uncertain about a respondent's answer, or about the coding, he should ask the question again, repeating the response options and prompting the respondent to select the appropriate response option.

Missing data

If the interviewer accidentally misses any questions, the interviewer enters 'MISSED' in the right margin of the form. This indicates to the coder that the question was not asked. During an interview, if an interviewer notices that he missed a question, he should go back and ask the question, making a note in the margin that the question was asked out of sequence. If the missing data is not discovered until after the interview, the researcher must re-contact the respondent to get an answer.

Refusals to answer questions should always be recorded. The interviewer should write 'Refuse' in the right margin of the form. Before accepting a refusal, the interviewer should explain the objective of the question to the respondent.



Editing

Before leaving the household, the interviewer should review the questionnaire to check that it is complete and that no questions have been omitted. Right after the interview, the interviewer should spend time checking the questionnaire to ensure that:

- All the questions have been answered.
- The information recorded is clear and legible for others to read.
- Comments are written between slashes.

The interviewer should also edit the coversheet and check that:

- There is no missing information (e.g., interviewer's name, interview number, date, length of interview, time spent on editing).
- The address is correct on the sample label.
- Every attempted call to the household is recorded, as well as the re-contact information.

The interviewer should submit the completed form to the survey supervisor promptly, so that any errors in administration can be noted and procedures corrected before other interviews are completed incorrectly.

Section 3

QUESTION-BY-QUESTION SPECIFICATIONS

This purpose of this section is to indicate what is intended by each question. The questionnaire is designed to identify difficulties according to a range of severity in a number of domains — seeing, hearing, mobility, self-care, fine motor, communication, learning, remembering, affect, behaviour, attention and concentrating, accepting change, relationships and playing.

This section describes each domain, the reason the domain is included in the survey and the specific questions used to identify if the child has difficulty in the domain. Interviewers will have two questionnaires, one for use when referring to children aged 2 to 4 years and one for children aged 5 to 17 years. For the most part, the domains and rationales for children aged 2 to 4 years are the same as those for domains included for children aged 5 to 17 years. However, some of the questions differ to address age appropriate behaviours and expectations. This section identifies and explains the differences between the two sets of questions. Interviewers should use this information when respondents request clarification about specific questions and should not offer their own interpretations.

1. Basic Instructions

To collect valid and reliable data, it is important to adhere to the following rules.

Ensure that the translation is appropriate: All translation should be done before the survey is fielded. Translation should never be left to the interviewer, since small differences in interpretation can compromise the reliability and validity of the data. If the survey has been translated from English into the local language, prior to going into the field, check that the intended concepts are captured in the translation. This may involve more than a simple word-for-word translation of the question even if checked by back translation. The translated question should be tested to ensure that the intended meaning of each one is easily understood in the colloquial language of the respondents.

Ask the questions exactly as written: The extensive cognitive testing done on the module revealed that minor variations in question wording can lead to a

significant response variation, that is, responses that do not meet the intent of the question. UNICEF and the WG, in consultation with an international group of experts, have put the survey module through a rigorous development and evaluation process, including drafting, revising and validating the questions as described in the concept note. Through this process many different formulations of the questions were considered and evaluated using a cognitive testing approach. Over 250 parents and/or guardians in five countries shared their interpretations of the questions with the survey designers.

Do not ask a screening question: The interviewer must ask the respondent all questions in the module for each child in the sample. The interviewer must not first ask if any of the children has a disability and then administer the questionnaire only to those children. Nor should the interviewer assume that children have or do not have a disability simply by observing them.

The goal of the questionnaire is to identify a range of functional difficulties; even those that the respondent or the interviewer may not consider to be a 'disability'.

Maintain the age categories as written: While some questions are appropriate across all ages, others are specifically for younger children (2-4 years) or school-age children (5-17 years). Children's development in each domain proceeds through a series of stages and typically involves mastering simple skills before more complex skills can be learned. Each question has been carefully designed and tested to address the appropriate developmental stage. For example, the expectation of a child's ability to speak and use verbal language to communicate varies by age. While all cultures expect children aged 5 years and over to speak fluently there is great variation in speech among younger children aged 2 to 4 years so the questions are written to reflect that difference.

Follow the skip-patterns carefully: The survey directs the interviewer to skip certain questions based on certain responses. These skip patterns, described in more detail in the next section, fall into two categories:

- Skip patterns that direct the interviewer to different questions based on age.
- Skip patterns related to whether the child uses assistive devices.

2. Domains

Functional domains selected for the module

Based on the International Classification of Functioning (ICF) framework, 14 domains were selected for inclusion in the Module on Child Functioning. Questions were derived to measure functioning in each domain.

Seeing

Domain: The purpose of this domain is to identify children with varying degrees of vision difficulties. Seeing difficulties include problems seeing things in day or night, close up or far away, reduced ability to see out of one or both eyes and limited peripheral vision.

Rationale: Seeing is measured with the use of corrective lenses if those lenses are used. Corrective lenses include glasses and contact lenses. Both terms are used in the questionnaire for children and youth aged 5 to 17 years, but only the term 'glasses' is used in the questionnaire for younger children (2-4 years). This is because (a) young children are rarely given the

use of contact lenses and (b) cognitive testing has shown that the general usage of the term 'glasses' includes both glasses and contact lenses, so young children using contact lenses will be identified by this question.

Properly prescribed glasses are very effective in restoring vision. Moreover, glasses are close to being 'within the skin' and are considered to be like corrective surgery in the way they affect functioning. The question about seeing with glasses is only asked if glasses are worn. In many countries, access to glasses is widespread, so asking questions about seeing without corrective lenses would take valuable survey time but not produce much useful information. The use of glasses that do not correct vision would still be reported as a difficulty as would seeing problems where no glasses are worn. The most effective way to clarify this issue is to first ask whether the child wears glasses and then ask about their ability to see with glasses if they wear them. If the child does not wear glasses, the question omits any reference to glasses.

With the exception of the inclusion of contact lenses, the questions for children aged 2 to 4 years are the same as those for children aged 5 to 17. This is because seeing develops rapidly over the first months of life and is well developed by 2 years of age.

Questions within the domain:

Questionnaire for children aged 2 to 4 years

CF1. Does (*name*) wear glasses?

CF2. When wearing his/her glasses, does (*name*) have difficulty seeing?

CF3. Does (*name*) have difficulty seeing?

Questionnaire for children aged 5 to 17 years

CF1. Does (*name*) wear glasses or contact lenses?

CF2. When wearing his/her glasses or contact lenses, does (*name*) have difficulty seeing?

CF3. Does (*name*) have difficulty seeing?

Hearing

Domain: The purpose of the hearing domain is to identify children who have hearing loss or auditory problems of any kind. This includes reduced hearing in one or both ears, the inability to hear in a noisy environment or to distinguish sounds from different sources. The question is not intended to capture children who can hear the sounds but either do not understand or choose to ignore what is being said to them. Those concepts are captured in the communication domain.

Rationale: As was the case for seeing, hearing is evaluated with the use of hearing aids if these are worn. It is acknowledged that hearing aids are not as successful in restoring hearing as glasses are for seeing and the use is not as widespread. Therefore, this question is structured in the same way as question CF1 with the respondent first asked if the child wears a hearing aid and then, if one is worn, if the child has difficulty hearing with the hearing aid. If the child does not wear a hearing aid, the question omits any reference to hearing aids. In areas where hearing aids are rare, the question on use of hearing aids can be omitted.

The questions for children aged 2 to 4 years are the same as for children aged 5 to 17 years because processing of the intensity, frequency, and temporal characteristics of sound has reached adult levels of functioning by 6 months of age.

Questions within the domain:

Questionnaire for children aged 2 to 4 years:

- CF4.** Does (*name*) use a hearing aid?
- CF5.** When using his/her hearing aid, does (*name*) have difficulty hearing sounds like people's voices or music?
- CF6.** Does (*name*) have difficulty hearing sounds like people's voices or music?

Questionnaire for children aged 5 to 17 years:

- CF4.** Does (*name*) use a hearing aid?
- CF5.** When using his/her hearing aid, does (*name*) have difficulty hearing sounds like people's voices or music?
- CF6.** Does (*name*) have difficulty hearing sounds like people's voices or music?

Mobility

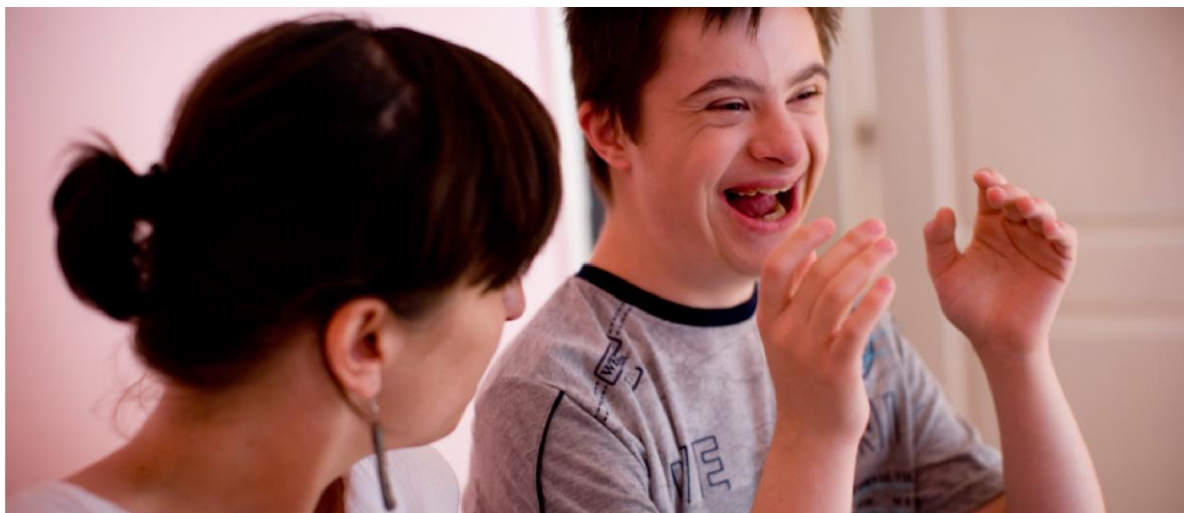
Domain: The purpose of this domain is to identify children with varying degrees of gross motor difficulties. Walking is a good measure of gross motor skills because it requires a mix of strength, balance and the ability to control body movements against gravity, and because it is the primary mode used to move around and cover distances without the use of assistive devices.

Rationale: If the child uses an assistive device, this series of questions captures the child's ability to walk both with and without his/her equipment. Questions about walking without equipment capture a child's capacity to walk, while asking about walking with equipment, captures walking performance.

These questions differ from the seeing and hearing questions that measure the child's ability to function only with their assistive devices. Mobility aids differ from seeing and hearing aids in two important ways. As noted in the section on seeing, glasses are more readily available and accessible than mobility aids in many countries due to their cost. They also are more successful in correcting the functional difficulty than are mobility devices in most contexts. In addition, while glasses and hearing aids are connected to the person (almost 'within-the-skin'), mobility aids vary widely. Aids such as canes improve walking ability, while wheelchairs provide a different means of getting from one place to another and therefore could be considered more of a substitute for walking.

The success with which mobility devices improve functioning in this domain is also a function of the environment where the person lives. The survey is interested in capturing the child's functionality with and without the assistance but cannot address how the device affects functioning in different environments. For example, a school may need a ramp for a child who uses a wheelchair to attend. The wheelchair could improve the child's mobility but not affect school participation if the school environment cannot accommodate the wheelchair.

The questions in the mobility domain differ for children aged 2 to 4 years because young children may still be in the process of developing walking endurance and may not be willing to walk longer distances. From a developmental standpoint, it is expected that a child will walk independently by the age of 2 years. Therefore, the question focuses on the physical activity (walking) rather than distance.



For children aged 5 to 17 years, the walking questions are more specific. A clear reference to distance (e.g., short and long distances) was added. Increasing the specificity is beneficial because it captures more variability in the ability to walk. A child with no difficulty walking a short distance but who is unable to walk longer distances may not be able to walk far enough to attend school. The question on the longer distance is more directly related to the ability to participate in society. By including both distance questions, the results provide a better differentiation in the population of the severity of walking difficulties experienced by children. While respondents may not have accurate knowledge of distances, the use of a common example for 100 metres/yards (length of a football field) does give the respondent a good idea of the distance of interest. Asking about 100 metres/yards first, followed by the question on 500 metres/yards, gives an indicator of relative size that the respondent can use in forming an answer. This said, it is strongly advised that country specific examples are used to facilitate greater understanding of the actual distance.

Questions within the domain:

Questionnaire for children aged 2 to 4 years:

- CF7.** Does (*name*) use any equipment or receive assistance for walking?
- CF8.** Without his/her equipment or assistance, does (*name*) have difficulty walking?
- CF9.** With his/her equipment or assistance, does (*name*) have difficulty walking?
- CF10.** Compared with children of the same age, does (*name*) have difficulty walking?

Questionnaire for children aged 5 to 17 years:

- CF7.** Does (*name*) use any equipment or receive assistance for walking?
- CF8.** Without his/her equipment or assistance, does (*name*) have difficulty walking 100 yards/meters on level ground? That would be about the length of 1 football field. [Or insert country specific example].
- CF9.** Without his/her equipment or assistance, does (*name*) have difficulty walking 500 yards/meters on level ground? That would be about the length of 5 football fields. [Or insert country specific example].
- CF10.** With his/her equipment or assistance, does (*name*) have difficulty walking 100 yards/meters on level ground? That would be about the length of 1 football field. [Or insert country specific example].
- CF11.** With his/her equipment or assistance, does (*name*) have difficulty walking 500 yards/meters on level ground? That would be about the length of 5 football fields. [Or insert country specific example].
- CF12.** Compared with children of the same age, does (*name*) have difficulty walking 100 yards/meters on level ground? That would be about the length of 1 football field. [Or insert country specific example].
- CF13.** Compared with children of the same age, does (*name*) have difficulty walking 500 yards/meters on level ground? That would be about the length of 5 football fields. [Or insert country specific example].

Note: *Since wheelchairs serve as a mobility aid providing a substitute for walking, they are acceptable for inclusion as equipment for walking. Children who use wheelchairs will be identified as having functional difficulty walking in the questions asking about walking without equipment.*

Self-Care

Domain: This domain identifies children who have difficulty taking care of themselves as the result of functional difficulties in other areas, such as cognition. Such difficulty could also be the result of problems with the coordination of small muscle movements in the upper body.

Rationale: This question assesses whether the child has difficulty performing self-care tasks. The question specifies feeding and dressing because these represent tasks that occur on a daily basis and are considered basic activities across cultures. There is a great deal of normal variation in the ability of young children to perform self-care tasks and the expectations may vary significantly by culture so the module does not include any questions in the domain of self-care for children aged 2 to 4 years.

Questions within the domain:

Questionnaire for children aged 5 to 17 years:

CF14. Does (*name*) have difficulty with self-care such as feeding or dressing him/herself?

Fine Motor

Domain: The purpose of this domain is to identify children with difficulty in the coordination of small muscle movements (i.e., fine motor difficulties).

Rationale: Picking up small objects (e.g., marble, button, small stone) is a good measure of basic fine motor skills because the task requires a mix of grip strength, motor control and dexterity. Fine motor development of children 5 to 17 years of age is captured in the self-care question as both dressing and feeding oneself requires such skills, so the module does not include any questions for that age range in this domain. This fine motor task was selected because in typical development, we expect that by about 12 months, children will be able to pick up small objects using the tip of the index finger and the thumb. The type of grasp (e.g., ‘pincer’, ‘tripod’) is not differentiated because between the ages of 2 and 4 years the grasp used to pick up objects can differ significantly.

Questions within the domain:

Questionnaire for children aged 2 to 4 years:

CF11. Compared with children of the same age, does (*name*) have difficulty picking up small objects with his/her hand?

Communication/Comprehension

Domain: The purpose of this domain is to identify children who have difficulty exchanging information or ideas with others at home, school or in the community through the use of spoken language.

If a child does not have spoken language and does not have an available accommodation it will be very difficult for him or her to communicate, particularly outside of the immediate family.

There are two important aspects of communication that are measured in the module: understanding others (receptive communication) and being understood by others (expressive communication).

Rationale: For children aged 2 to 4 years, the survey addresses both receptive communication (Does (*name*) have difficulty understanding you?) and expressive communication (When (*name*) speaks, do you have difficulty understanding him/her?). The questions for children aged 5 to 17 years focus only on expressive communication because the receptive communication questions picked up different constructs (i.e., emotions, point of view) in cognitive testing and it was determined this skill was being captured in the hearing and cognition domains.

For children aged 5 to 17 years, the survey first addresses whether people inside the household can understand the child’s speech and second whether it can be understood by people outside the household. Children who are non-verbal or have difficulties with speech may be able to communicate with household members who are attuned to the child’s gestures or the idiosyncrasies of their speech but may have difficulty being understood by people with whom they are less familiar. The survey makes this distinction because difficulty communicating with people outside the family can have a significant impact on the child’s ability to participate in his/her community.

Questions within the domain:

Questionnaire for children aged 2 to 4 years:

CF12. Does (*name*) have difficulty understanding you?

CF13. When (*name*) speaks, do you have difficulty understanding him/her?

Questionnaire for children aged 5 to 17 years

CF15. When (*name*) speaks, does he/she have difficulty being understood by people inside of this household?

CF16. When (*name*) speaks, does he/she have difficulty being understood by people outside of this household?



Learning

Domain: The questions in this domain identify children with cognitive difficulties that make it hard to learn. All aspects of learning are included. The information or skills learned could be used for school or for play or any other activity.

Rationale: This question is the same for both groups of children and is designed to capture the child's ability to learn.

Questions within the domain:

Questionnaire for children aged 2 to 4 years:

CF14. Compared with children of the same age, does (*name*) have difficulty learning things?

Questionnaire for children aged 5 to 17 years:

CF17. Compared with children of the same age, does (*name*) have difficulty learning things?

Remembering

Domain: The question refers to the use of memory to recall incidents or events, and identifies children with cognitive difficulties. Remembering should not be equated with memorizing.

Rationale: The question for school age children, 5 to 17 years, is associated with remembering rather than memorizing. This may include remembering new people, songs and games, routines, etc., as well as the kind of learning that traditionally occurs within an academic environment.

Questions within the domain:

Questionnaire for children aged 5 to 17 years:

CF18. Compared with children of the same age, does (*name*) have difficulty remembering things?

Playing

Domain: This question is meant to capture difficulty in playing that is related to any functional difficulty.

Playing is a complex domain as it involves several functional capacities, from seeing to cognition. It is also heavily influenced by the child's environment.

Rationale: Play is recognized to be one of the most important activities for the development of young children. Whether alone or in the company of others, a child's ability to play is a building block to the development of social, emotional, cognitive and physical skills. The module does not include any questions in the domain of play for children aged 5 to 17 years as those skills are captured in the attention and relationship domains.

Questions within the domain:

Questionnaire for children aged 2 to 4 years:

CF15. Compared with children of the same age, does (*name*) have difficulty playing?

Attention and Concentrating

Domain: The purpose of this question is to identify children with attention difficulties that limit their ability to learn, interact with others and participate in their community. Children with difficulties in attention cannot concentrate on a task, often make careless mistakes, lose interest very quickly, do not listen and may be disorganized, forgetful and easily distracted.

This kind of difficulty is often associated with attention deficit, hyperactivity or learning difficulties and is manifest in school as an inability to read, calculate or learn new things.

Rationale: Toddlers and younger pre-schoolers typically do not have the ability to stay focused for more than a few minutes. As a result, this domain is not measured for children aged 2 to 4 years.

Questions within the domain:

Questionnaire for children aged 5 to 17 years:

CF19. Does (*name*) have difficulty concentrating on an activity that he/she enjoys doing?

Coping with Change

Domain: The purpose of this question is to identify children with cognitive or emotional difficulties that make them very resistant to change. This question is intended to identify those who have significant problems transitioning from one activity to another on a consistent basis, and with changes to their routine to the extent that it undermines their ability to participate in standard childhood activities.

For example, it should capture children who are on the autism spectrum—a disorder that is often characterized by inflexible routines and rituals. This question is not intended to identify children who at times can be stubborn.

Rationale: For toddlers and younger pre-schoolers difficulty in understanding and responding to change is part of normal development. Therefore, this domain is not measured for children aged 2 to 4 years.

Questions within the domain:

Questionnaire for children aged 5 to 17 years:

CF20. Does (*name*) have difficulty accepting changes in his/her routine?

Controlling Behaviour

Domain: The purpose of this question is to identify children with behavioural difficulties that limit their ability to interact with other people in an appropriate manner. For young children, this can include kicking, biting and hitting. For older children, this can include telling lies, fighting, bullying, running away from home, or skipping school/playing truant.

The question designed to measure the behavior domain for young children differs from the question for older children because the inability to exhibit selfcontrol is a normal behaviour for young children.

Rationale: Since all children may express some behavioural difficulties at one time or another, the question is preceded by the phrase ‘compared with children of the same age’ and the response options capture the degree to which demonstrated behavior is, according to the mother or primary caregiver, deemed excessive.

Questions within the domain:

Questionnaire for children aged 2 to 4 years:

CF16. Compared with children of the same age, how much does (*name*) kick, bite or hit other children or adults?

Questionnaire for children aged 5 to 17 years:

CF21. Compared with children of the same age, does (*name*) have difficulty controlling his/her behaviour?

Relationships

Domain: This domain identifies children who have difficulty socializing with other children to an extent that it impacts their ability to participate in standard childhood activities.

The ability to form relationships is an important indicator of normal development. Difficulties in this domain may also reflect other functional limitations because the inability to get along may be the result of emotional, behavioural, communication or cognitive difficulties.

Rationale: Since toddlers and younger pre-schoolers typically have not formed relationships outside of those with their caregivers and immediate family, this domain is not measured for children aged 2 to 4 years.

Questions within the domain:

Questionnaire for children aged 5 to 17 years:

CF22. Does (*name*) have difficulty making friends?



Affect

Domain: These questions attempt to identify children having difficulties expressing and managing emotions. All children have some worries and may feel sad, but when these worries result in the child being restless, tired, inattentive, irritable, tense, and having sleep problems, they may interfere with the child's schooling and social development.

Young children may deal with many of the same emotions as older children but they often do not have a way to share these feelings with others through either words or actions. Any attempt to ask caregivers about the emotions of toddlers and young children would yield unreliable results. Therefore, this set of questions is not included in the questionnaire for children aged 2 to 4 years.

Rationale: Emotional difficulties may be manifested by worry, sadness or anxiety or they may be episodic in nature, but frequent enough and significant enough to place the child at a higher risk of dropping out of school, not participating in family or community life, or harming themselves.

This question is not meant to capture the response to a transitory event such as the anxiety of taking a school entrance exam or the normal grieving process such as one that accompanies the death of a parent, although such an event could be a trigger of a more pronounced problem with worry or sadness.

The response categories for this domain are different from the previous, reflecting the frequency of the emotional difficulty rather than the intensity.

Questions within the domain:

Questionnaire for children aged 5 to 17 years:

CF23. How often does (*name*) seem very anxious, nervous or worried?

CF24. How often does (*name*) seem very sad or depressed?

3. Questionnaire administration for children 2-4 years of age

Opening statement

I would like to ask you some questions about difficulties your child may have.

Seeing

Children aged 2 to 4 years

CF1. Does *(name)* wear glasses?

1) Yes 2) No

If 'No' skip to CF3

CF2. When wearing his/her glasses, does *(name)* have difficulty seeing?

Would you say *(name)* has:

1) no difficulty 2) some difficulty

3) a lot of difficulty 4) cannot do at all

Skip to CF4

CF3. Does *(name)* have difficulty seeing?

Would you say *(name)* has:

1) no difficulty 2) some difficulty 3) a lot of difficulty 4) cannot do at all

Skip patterns: If the respondent answers 'Yes' to CF1 (the child wears glasses) then the interviewer should ask **CF2** ('When wearing his/her glasses...') and then move to CF4.

If the respondent answers 'No' to CF1 (the child does not wear glasses) then the interviewer should ask CF3 ('Does *(name)* have difficulty seeing...').

The interviewer should not ask both CF2 and CF3.

Hearing

Children aged 2 to 4 years

CF4. Does *(name)* use a hearing aid?

1) Yes 2) No

If 'No' skip to CF6

CF5. When using his/her hearing aid, does *(name)* have difficulty hearing sounds like people's voices or music?

Would you say *(name)* has:

1) no difficulty 2) some difficulty

3) a lot of difficulty 4) cannot do at all

Skip to CF7

CF6. Does *(name)* have difficulty hearing sounds like people's voices or music?

Would you say *(name)* has:

1) no difficulty 2) some difficulty

3) a lot of difficulty 4) cannot do at all

Skip patterns: This question is structured like the seeing question. If the respondent answers 'Yes' to CF4 (the child does use a hearing aid) then the interviewer should ask CF5 (*When using his/her hearing aid...*) and then move to CF7.

If the respondent answers 'No' to CF4 (the child does not use a hearing aid) then the interviewer should skip to CF6 (Does *(name)* have difficulty hearing sounds...)

The interviewer should not ask both CF5 and CF6.

Mobility

Children aged 2 to 4 years

CF7. Does (*name*) use any equipment or receive assistance for walking?

1) Yes 2) No

If 'No' skip to CF10

CF8. Without his/her equipment or assistance, does (*name*) have difficulty walking?

Would you say (*name*) has:

2) some difficulty 3) a lot of difficulty
4) cannot do at all

CF9. With his/her equipment or assistance, does (*name*) have difficulty walking?

Would you say (*name*) has:

1) no difficulty 2) some difficulty 3) a lot of difficulty
4) cannot do at all

Skip to CF11

CF10. Compared with children of the same age, does (*name*) have difficulty walking?

Would you say (*name*) has:

1) no difficulty 2) some difficulty
3) a lot of difficulty 4) cannot do at all

Skip patterns for children aged 2 to 4 years: The interviewer asks all respondents if the child receives assistance for walking or uses assistive devices (question CF7).

If the respondent answers 'Yes' to question CF7 (the child does use equipment or receive assistance), the interviewer should ask both CF8 and CF9. These questions capture the child's ability to walk both with and without his/her equipment.

If the respondent answers 'No' to question CF7 (the child does not use equipment or receive assistance), the interviewer should skip to CF10 (Compared with children of the same age, does (*name*) have difficulty walking?). Question CF10 is only asked for these children who do not receive assistance for walking nor use assistive devices.

Fine Motor

Children aged 2 to 4 years

CF11. Compared with children of the same age, does (*name*) have difficulty picking up small objects with his/her hand?

Would you say (*name*) has:

1) no difficulty 2) some difficulty
3) a lot of difficulty 4) cannot do at all

Skip patterns: None

Communication/Comprehension

Children aged 2 to 4 years

CF12. Does (*name*) have difficulty understanding you?
Would you say (*name*) has:
1) no difficulty 2) some difficulty
3) a lot of difficulty 4) cannot do at all

CF13. When (*name*) speaks, do you have difficulty understanding him/her?
Would you say you have:
1) no difficulty 2) some difficulty
3) a lot of difficulty 4) cannot do at all

Skip patterns: None

Learning

Children aged 2 to 4 years

CF14. Compared with children of the same age, does (*name*) have difficulty learning things?

Would you say (*name*) has:
1) no difficulty 2) some difficulty
3) a lot of difficulty 4) cannot do at all

Skip patterns: None

Playing

Children aged 2 to 4 years

CF15. Compared with children of the same age, does (*name*) have difficulty playing?

Would you say (*name*) has:
1) no difficulty 2) some difficulty
3) a lot of difficulty 4) cannot do at all

Skip patterns: None

Controlling Behaviour

Children aged 2 to 4 years

CF16. Compared with children of the same age, how much does (*name*) kick, bite or hit other children or adults?

Would you say:
1) not at all 2) the same or less
3) more 4) a lot more?

Skip patterns: None

4. Questionnaire administration for children 5-17 years of age

Opening statement

I would like to ask you some questions about difficulties your child may have.

Seeing

Children aged 5 to 17 years

CF1. Does (*name*) wear glasses or contact lenses?

1) Yes 2) No

If 'No' skip to CF3

CF2. When wearing his/her glasses or contact lenses, does (*name*) have difficulty seeing?

Would you say (*name*) has:

1) no difficulty 2) some difficulty

3) a lot of difficulty 4) cannot do at all

Skip to CF4

CF3. Does (*name*) have difficulty seeing?

Would you say (*name*) has:

1) no difficulty 2) some difficulty 3) a lot of difficulty 4) cannot do at all

Skip patterns: If the respondent answers 'Yes' to CF1 (the child wears glasses or contact lenses) then the interviewer should ask CF2 (When wearing his/her glasses...) and then move to CF4.

If the respondent answers 'No' to CF1 (the child does not wear glasses or contact lenses) then the interviewer should ask CF3 (Does (*name*) have difficulty seeing...).

The interviewer should not ask both CF2 and CF3.

Hearing

Children aged 5 to 17 years

CF4. Does (*name*) use a hearing aid?

1) Yes 2) No

If 'No' skip to CF6

CF5. When using his/her hearing aid, does (*name*) have difficulty hearing sounds like people's voices or music?

Would you say (*name*) has:

1) no difficulty 2) some difficulty

3) a lot of difficulty 4) cannot do at all

Skip to CF7

CF6. Does (*name*) have difficulty hearing sounds like people's voices or music?

Would you say (*name*) has:

1) no difficulty 2) some difficulty 3) a lot of difficulty 4) cannot do at all

Skip patterns: This question is structured the same as the seeing question. If the respondent answers 'Yes' to CF4 (the child does use a hearing aid) then the interviewer should ask CF5 (When using his/her hearing aid...) and then move to CF7.

If the respondent answers 'No' to CF4 (the child does not use a hearing aid) then the interviewer should skip to CF6 (Does (*name*) have difficulty hearing sounds...).

The interviewer should not ask both CF5 and CF6.

Mobility

Children aged 5 to 17 years

CF7. Does (*name*) use any equipment or receive assistance for walking?

1) Yes 2) No

If 'No' skip to CF12

CF8. Without his/her equipment or assistance, does (*name*) have difficulty walking 100 yards/ metres on level ground? That would be about the length of 1 football field or [insert country specific example].

Would you say (*name*) has:

2) some difficulty 3) a lot of difficulty

4) cannot do at all

If 3 or 4 skip to CF10

CF9. Without his/her equipment or assistance, does (*name*) have difficulty walking 500 yards/ metres on level ground? That would be about the length of 5 football fields or [insert country specific example].

Would you say (*name*) has:

2) some difficulty 3) a lot of difficulty

4) cannot do at all

CF10. With his/her equipment or assistance, does (*name*) have difficulty walking 100 yards/ metres on level ground? That would be about the length of 1 football field or [insert country specific example].

Would you say (*name*) has:

1) no difficulty 2) some difficulty

3) a lot of difficulty 4) cannot do at all

If 3 or 4 skip to CF14

CF11. With his/her equipment or assistance, does (*name*) have difficulty walking 500 yards/ metres on level ground? That would be about the length of 5 football fields or [insert country specific example].

Would you say (*name*) has:

1) no difficulty 2) some difficulty

3) a lot of difficulty 4) cannot do at all

Skip to CF14

CF12. Compared with children of the same age, does (*name*) have difficulty walking 100 yards/ metres on level ground? That would be about the length of 1 football field or [insert country specific example].

Would you say (*name*) has:

1) no difficulty 2) some difficulty

3) a lot of difficulty 4) cannot do at all

If 3 or 4 skip to CF14

CF13. Compared with children of the same age, does (*name*) have difficulty walking 500 yards/ metres on level ground? That would be about the length of 5 football fields or [insert country specific example].

Would you say (*name*) has:

1) no difficulty 2) some difficulty

3) a lot of difficulty 4) cannot do at all

Skip patterns for children aged 5 to 17 years: The interviewer asks all respondents if the child uses assistive devices (question CF7).

If the respondent answers 'Yes' to question CF7 (the child does use equipment or receive assistance), the interviewer should ask both CF8 and CF10. These questions capture the child's ability to walk both with and without his/her equipment.

If the respondent answers 'No' to question CF7 (the child does not use equipment or receive assistance), the interviewer should skip to CF12.

If the respondent answers 'a lot of difficulty' or 'cannot do at all' to CF8 (walking 100 yards/metres without using his/her equipment or assistance), the interviewer should skip to CF10 as it is assumed that the child will have functional difficulty with CF9 (walking 500 yards/metres without using his/her equipment or assistance).

If the respondent answers 'a lot of difficulty' or 'cannot do at all' to CF10 (walking 100 yards/metres when using his/her equipment or assistance), the interviewer should skip to CF14 as it is assumed that the child will have functional difficulty with CF11 (walking 500 yards/metres when using his/her equipment or assistance).

Regardless of the response to question CF11 (walking 500 yards/metres when using his/her equipment or assistance), the interviewer should skip to CF14.

If the respondent answers 'a lot of difficulty' or 'cannot do at all' to CF12 (the child has a lot of difficulty or cannot walk 100 yards/metres at all), the interviewer should skip to CF14.

If the respondent answers 'no difficulty' to question CF13 (walking 500 yards/metres), the interviewer should skip to CF14.

Self-Care

Children aged 5 to 17 years

CF14. Does (*name*) have difficulty with selfcare such as feeding or dressing him/herself?

Would you say (*name*) has:
1) no difficulty 2) some difficulty
3) a lot of difficulty 4) cannot do at all

Skip patterns: None

Communication/Comprehension

Children aged 5 to 17 years

CF15. When (*name*) speaks, does he/she have difficulty being understood by people inside of this household?

Would you say (*name*) has:
1) no difficulty 2) some difficulty
3) a lot of difficulty 4) cannot do at all

CF16. When (*name*) speaks, does he/she have difficulty being understood by people outside of this household?

Would you say (*name*) has:
1) no difficulty 2) some difficulty
3) a lot of difficulty 4) cannot do at all

Skip patterns: None

Learning

Children aged 5 to 17 years

CF17. Compared with children of the same age, does (*name*) have difficulty learning things?

Would you say (*name*) has:

1) no difficulty 2) some difficulty
3) a lot of difficulty 4) cannot do at all

Skip patterns: None

Remembering

Children aged 5 to 17 years

CF18. Compared with children of the same age, does *(name)* have difficulty remembering things?

Would you say *(name)* has:
1) no difficulty 2) some difficulty
3) a lot of difficulty 4) cannot do at all

Skip patterns: None

Attention and Concentrating

Children aged 5 to 17 years

CF19. Does *(name)* have difficulty concentrating on an activity that he/she enjoys doing?

Would you say *(name)* has:
1) no difficulty 2) some difficulty
3) a lot of difficulty 4) cannot do at all

Skip patterns: None

Coping with Change

Children aged 5 to 17 years

CF20. Does *(name)* have difficulty accepting changes in his/her routine?

Would you say *(name)* has:
1) no difficulty 2) some difficulty
3) a lot of difficulty 4) cannot do at all

Skip patterns: None

Controlling Behaviour

Children aged 5 to 17 years

CF21. Compared with children of the same age, does *(name)* have difficulties controlling his/her behaviour?

Would you say *(name)* has:
1) no difficulty 2) some difficulty
3) a lot of difficulty 4) cannot do at all?

Skip patterns: None

Relationships

Children aged 5 to 17 years

CF22. Does (*name*) have difficulty making friends?

Would you say (*name*) has:

- 1) no difficulty 2) some difficulty
- 3) a lot of difficulty 4) cannot do at all

Skip patterns: None

Affect

Children aged 5 to 17 years

CF23. How often does (*name*) seem very anxious, nervous or worried?

Would you say:

- 1) daily 2) weekly 3) monthly
- 4) a few times a year 5) never

CF24. How often does (*name*) seem very sad or depressed?

Would you say:

- 1) daily 2) weekly 3) monthly
- 4) a few times a year 5) never

Skip patterns: None

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