

# Disability (WHODAS 2.0)

Date of form filling \_\_\_\_\_

1. Who are you interviewing?

- ☐ Patient participant  
☐ Patient representative  
(Requires opt-in consent, not routinely recorded.  
Source: Interview)

2. What is the relationship between the representative and the participant?

- ☐ Husband or wife  
☐ Parent  
☐ Son or daughter  
☐ Brother or sister  
☐ Other relative  
☐ Friend  
☐ Professional carer  
☐ Other (specify)  
(Requires opt-in consent, not routinely recorded.  
Source: Interview)

3. If other, please specify \_\_\_\_\_

**Instructions to the interviewer are written in bold - do not read these aloud.**

**Text for the respondent to hear is written in italic print in blue. Read this text aloud.**

**Say to respondent:**

**The interview is about difficulties people have because of health conditions.**

**By health condition I mean diseases or illnesses, or other health problems that may be short or long lasting; injuries; mental or emotional problems; and problems with alcohol or drugs.**

**Remember to keep all of your health problems in mind as you answer the questions. When I ask you about difficulties in doing an activity think about...**

**Increased effort Discomfort or pain Slowness Changes in the way you do the activity When answering, I'd like you to think back over the past 30 days. I would also like you to answer these questions thinking about how much difficulty you have had, on average, over the past 30 days, while doing the activity as you usually do it.**

**Use this scale when responding: None, mild, moderate, severe, extreme or cannot do.**

**In the past 30 days, how much difficulty did you have in:**