



## WHODAS 2.0

### World Health Organization Disability Assessment Schedule 2.0

36-item version, proxy-administered

Patient Name \_\_\_\_\_ DOB \_\_\_\_\_ Female \_\_\_\_\_ Other \_\_\_\_\_  
 Provider Name \_\_\_\_\_ Date \_\_\_\_\_ Male \_\_\_\_\_

This questionnaire asks about difficulties due to health/mental health conditions experienced by the person about whom you are responding in your role as friend, relative, or carer. Health conditions include diseases or illnesses, other health problems that may be short or long lasting, injuries, mental or emotional problems, and problems with alcohol or drugs. Think back over the past 30 days and, to the best of your knowledge, answer these questions thinking about how much difficulty your friend, relative, or carer had while doing the following activities. (Note: the questionnaire uses the term “relative” to mean “friend,” “relative,” or “carer.”) For each question, please circle only one response.

H4 <sup>a</sup>	I am the _____ (choose one) of this person	1 = husband or wife 2 = parent 3 = son or daughter 4 = brother or sister	5 = other relative 6 = friend 7 = professional carer 8 = other (specify)										
						<b>Clinician Use Only</b>							
Numeric scores assigned to each of the items:						1	2	3	4	5	Raw Item Score	Raw Domain Score	Average Domain Score
In the last 30 days, how much difficulty did your relative have in:													
<b>Understanding and communicating</b>													
D1.1	Concentrating on doing something for ten minutes?	None	Mild	Moderate	Severe	Extreme or cannot do					30	5	
D1.2	Remembering to do important things?	None	Mild	Moderate	Severe	Extreme or cannot do							
D1.3	Analyzing and finding solutions to problems in day-to-day life?	None	Mild	Moderate	Severe	Extreme or cannot do							
D1.4	Learning a new task, for example, learning how to get to a new place?	None	Mild	Moderate	Severe	Extreme or cannot do							
D1.5	Generally understanding what people say?	None	Mild	Moderate	Severe	Extreme or cannot do							
D1.6	Starting and maintaining a conversation?	None	Mild	Moderate	Severe	Extreme or cannot do							
<b>Getting around</b>													
D2.1	Standing for long periods, such as 30 minutes?	None	Mild	Moderate	Severe	Extreme or cannot do				25	5		
D2.2	Standing up from sitting down?	None	Mild	Moderate	Severe	Extreme or cannot do							
D2.3	Moving around inside their home?	None	Mild	Moderate	Severe	Extreme or cannot do							
D2.4	Getting out of their home?	None	Mild	Moderate	Severe	Extreme or cannot do							
D2.5	Walking a long distance, such as a kilometer (or equivalent)?	None	Mild	Moderate	Severe	Extreme or cannot do							
<b>Self-care</b>													
D3.1	Washing his or her whole body?	None	Mild	Moderate	Severe	Extreme or cannot do				20	5		
D3.2	Getting dressed?	None	Mild	Moderate	Severe	Extreme or cannot do							
D3.3	Eating?	None	Mild	Moderate	Severe	Extreme or cannot do							
D3.4	Staying by himself or herself for a few days?	None	Mild	Moderate	Severe	Extreme or cannot do							

Numeric scores assigned to each of the items:							Clinician Use Only		
		1	2	3	4	5	Raw Item Score	Raw Domain Score	Average Domain Score
Because of their health condition, in the past <u>30 days</u> , how much <u>difficulty</u> did your relative have in									
<b>Getting along with people</b>									
D4.1	Dealing with people <u>he or she</u> does not know?	None	Mild	Moderate	Severe	Extreme or cannot do		25	5
D4.2	Maintaining a <u>friendship</u> ?	None	Mild	Moderate	Severe	Extreme or cannot do			
D4.3	Getting along with people who are <u>close</u> to him or her?	None	Mild	Moderate	Severe	Extreme or cannot do			
D4.4	Making new <u>friends</u> ?	None	Mild	Moderate	Severe	Extreme or cannot do			
D4.5	<u>Sexual</u> activities?	None	Mild	Moderate	Severe	Extreme or cannot do			
<b>Life activities—Household</b>									
D5.1	Taking care of his or her <u>household responsibilities</u> ?	None	Mild	Moderate	Severe	Extreme or cannot do		20	5
D5.2	Doing his or her most important household tasks <u>well</u> ?	None	Mild	Moderate	Severe	Extreme or cannot do			
D5.3	Getting all the household work <u>done</u> that is needed?	None	Mild	Moderate	Severe	Extreme or cannot do			
D5.4	Getting the household work done as <u>quickly</u> as needed?	None	Mild	Moderate	Severe	Extreme or cannot do			
<b>Life activities—School/Work</b>									
If your relative works (paid, non-paid, self-employed) or goes to school, complete questions D5.5-D5.8, below. Otherwise, skip to D6.1.									
In the past <u>30 days</u> , how much <u>difficulty</u> did your relative have in:									
D5.5	His or her day-to-day <u>work/school</u> ?	None	Mild	Moderate	Severe	Extreme or cannot do		20	5
D5.6	Doing his or her most important work/school tasks <u>well</u> ?	None	Mild	Moderate	Severe	Extreme or cannot do			
D5.7	Getting all of the work <u>done</u> that is needed?	None	Mild	Moderate	Severe	Extreme or cannot do			
D5.8	Getting all the work done as <u>quickly</u> as needed?	None	Mild	Moderate	Severe	Extreme or cannot do			
<b>Participation in society</b>									
Participation in society in the <u>past 30 days</u> :									
D6.1	How much of a problem did your relative have in <u>joining in community activities</u> (for example, festivities, religious, or other activities) in the same way as anyone else can?	None	Mild	Moderate	Severe	Extreme or cannot do		40	5
D6.2	How much of a problem did your relative have because of <u>barriers or hindrances</u> around him or her?	None	Mild	Moderate	Severe	Extreme or cannot do			
D6.3	How much of a problem did your relative have <u>living with dignity</u> because of the attitudes and actions of others?	None	Mild	Moderate	Severe	Extreme or cannot do			
D6.4	How much <u>time</u> did <u>your relative</u> spend on his or her health condition or its consequences?	None	Some	Moderate	A Lot	Extreme or cannot do			
D6.5	How much has <u>your relative</u> been <u>emotionally affected</u> by his or her health condition?	None	Mild	Moderate	Severe	Extreme or cannot do			
D6.6	How much has his or her health been a <u>drain on his or her financial resources</u> or the financial resources of other relatives?	None	Mild	Moderate	Severe	Extreme or cannot do			

D6.7	How much of a problem did <u>you</u> or the <u>rest of his or her family</u> have because of his or her health problems?	None	Mild	Moderate	Severe	Extreme or cannot do			
D6.8	How much of a problem did your relative have in doing things <u>by himself or herself</u> for <u>relaxation or pleasure</u> ?	None	Mild	Moderate	Severe	Extreme or cannot do			
General Disability Score (Total):								180	5

NOTES:

**WHODAS 2.0**  
**World Health Organization Disability Assessment Schedule 2.0**  
36-item version, proxy-administered

The proxy-administered version of the World Health Organization Disability Assessment Schedule 2.0 (WHODAS 2.0) is a 36-item measure that assesses disability in adults age 18 and older who are of impaired capacity and/or unable to complete the form (e.g., an individual with dementia). It assesses disability across six domains, including understanding and communicating, getting around, self-care, getting along with people, life activities (i.e., household, work, and/or school activities), and participation in society. It is completed by a knowledgeable informant (i.e., friend, relative, or professional carer). Each item on the proxy-administered version of the WHODAS 2.0 asks the friend, relative, or professional carer to rate, to the best of his or her knowledge, how much difficulty the individual has had in specific areas of functioning during the past 30 days.

**WHODAS 2.0 Scoring Instructions Provided by World Health Organization**

**WHODAS 2.0 Summary Scores:** There are two basic options for computing the summary scores for the WHODAS 2.0 36-item full version.

**Simple:** The scores assigned to each of the items—“none” (1), “mild” (2), “moderate” (3), “severe” (4), and “extreme” (5)—are summed. This method is referred to as simple scoring because the scores from each of the items are simply added up without recoding or collapsing of response categories; thus, there is no weighting of individual items. This approach is practical to use as a hand-scoring approach, and may be the method of choice in busy clinical settings or in paper-and-pencil interview situations. As a result, the simple sum of the scores of the items across all domains constitutes a statistic that is sufficient to describe the degree of functional limitations.

**Complex:** The more complex method of scoring is called “item-response-theory” (IRT)-based scoring. It takes into account multiple levels of difficulty for each WHODAS 2.0 item. It takes the coding for each item response as “none,” “mild,” “moderate,” “severe,” and “extreme” separately, and then uses a computer to determine the summary score by differentially weighting the items and the levels of severity. The computer program is available from the WHO Web site.

The scoring has three steps:

- Step 1—Summing of recoded item scores within each domain.
- Step 2—Summing of all six domain scores.
- Step 3—Converting the summary score into a metric ranging from 0 to 100 (where 0 = no disability; 100 = full disability).

**WHODAS 2.0 Domain Scores:** WHODAS 2.0 produces domain-specific scores for six different functioning domains: cognition, mobility, self-care, getting along, life activities (household and work/school) and participation.

**WHODAS 2.0 Population Norms:** For the population norms for IRT-based scoring of the WHODAS 2.0 and for the population distribution of IRT-based scores for WHODAS 2.0, please see

[http://www.who.int/classifications/icf/Pop\\_norms\\_distrib\\_IRT\\_scores.pdf](http://www.who.int/classifications/icf/Pop_norms_distrib_IRT_scores.pdf)

**Additional Scoring and Interpretation Guidance for DSM-5 Users**

The clinician is asked to review the individual’s response on each item on the measure during the clinical interview and to indicate the proxy-reported score for each item in the section provided for “Clinician Use Only.” However, if the clinician determines that the score on an item should be different based on the clinical interview and other information available, he or she may indicate a corrected score in the raw item score box. Based on findings from the DSM-5 Field Trials in adult patient samples across six sites in the United States and one in Canada, DSM-5 recommends calculation and use of average scores for each domain and for general disability. The **average scores** are comparable to the WHODAS 5-point scale, which allows the clinician to think of the individual’s disability in terms of none (1), mild (2), moderate (3), severe (4), or extreme (5). The average domain and general disability scores were found to be reliable, easy to use, and clinically useful to the clinicians in the DSM-5 Field Trials. The **average domain score** is calculated by dividing the raw domain score by the number of items in the domain (e.g., if all the items within the “understanding and communicating” domain are rated as being moderate then the average domain score would be  $18/6 = 3$ , indicating moderate disability). The average general disability score is calculated by dividing the raw overall score by number of items in the measure (i.e., 36). The individual’s friend, relative, or professional carer should be encouraged to complete all of the items on the WHODAS 2.0. If no response is given on 10 or more items of the measure (i.e., more than 25% of the 36 total items), calculation of the simple and average general disability scores may not be helpful. If 10 or more of the total items on the measure are missing but the items for some of the domains are 75%–100% complete, the simple or average domain scores may be used for those domains.

**Frequency of Use:**

To track change in the individual’s level of disability over time, the measure may be completed at regular intervals as clinically indicated, depending on the stability of the individual’s symptoms and treatment status. Consistently high scores on a particular domain may indicate significant and problematic areas for the individual that might warrant further assessment and intervention.

The APA is offering a number of “emerging measures” for further research and clinical evaluation. These patient assessment measures were developed to be administered at the initial patient interview and to monitor treatment progress. They should be used in research and evaluation as potentially useful tools to enhance clinical decision-making and not as the sole basis for making a clinical diagnosis. Instructions, scoring information, and interpretation guidelines are provided; further background information can be found in DSM-5. The APA requests that clinicians and researchers provide further data on the instruments’ usefulness in characterizing patient status and improving patient care at <http://www.dsm5.org/Pages/Feedback-Form.aspx>.

**Measure:** WHODAS 2.0 (World Health Organization Disability Assessment Schedule 2.0): 36-item version, proxy-administered

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