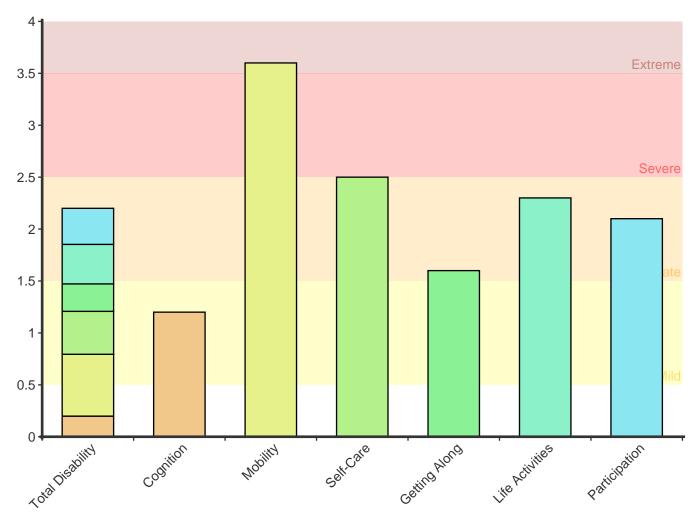


World Health Organisation Disability Assessment Schedule 2.0 - Proxy (WHODAS-proxy)

Client Name	Generic Client	Date administered	25 Mar 2022
Date of birth (age)	14 Dec 1980 (43)	Time taken	6 min 12s
Assessor	Dr David Hegarty		

Results

	Score (0 to 100)	Percentile	Average Score (0 to 4)	Descriptor
Overall Disability	58	94.7	2.2	Moderate
Cognition	30	88.4	1.2	Mild
Mobility	94	99.9	3.6	Extreme
Self-Care	70	98.1	2.5	Severe
Getting Along	50	94.7	1.6	Moderate
Life Activities	54	94.7	2.3	Moderate
Participation	63	98.1	2.1	Moderate



Average Scores

Assessment powered by NovoPsych



Interpretation

According to the WHODAS-proxy total score, the client is experiencing an overall level of disability in the 'moderate' range.

In comparison to the other domains, the client is experiencing the most disability in the Mobility domain. Conversely, the client shows a relative strength in the Cognition domain.

Cognition Domain

The client's cognitive functioning is within the 'mild' range. A descriptor of 'mild' suggests that the client may encounter occasional challenges in cognition and/or communication. Despite these mild difficulties, they generally exhibit some level of cognitive functioning and problem-solving skills. However, they may experience occasional struggles in specific areas such as remembering details, staying focused for extended periods, or processing complex information. With some support and accommodations, such as organisational strategies, this client can participate meaningfully in cognitive tasks and daily activities, albeit with some limitations.

Mobility Domain

The client's mobility is within the 'extreme' range. A severity descriptor of 'extreme' indicates that the client experiences profound and pervasive deficits in mobility. Within this domain, this client exhibits severe impairments that significantly impact their daily lives. They may have limited or no ability to walk or stand independently, requiring constant assistance or specialised equipment for mobility. This client typically requires intensive, multidisciplinary interventions and ongoing support to accommodate their mobility challenges and promote their overall well-being and participation in daily activities.

Self-Care Domain

The client's self-care abilities are within the 'severe' range. A severity descriptor of 'severe' implies that the client faces significant challenges in self-care. Within this domain, this client exhibits notable impairments that severely impact their ability to perform basic self-care tasks independently. They may require extensive assistance or supervision from caregivers for activities such as bathing, dressing, grooming, or feeding.

Getting Along Domain

The client's ability to get along with others is within the 'moderate' range. A severity descriptor of 'moderate' indicates notable impairments in getting along with people. They may experience significant difficulties in forming and maintaining relationships, understanding social cues, or communicating effectively with others. These challenges can impact their ability to engage in social interactions, cooperate with peers, and establish friendships. They may require structured interventions, social skills training, or support from caregivers to address their social skills deficits and enhance their social functioning.

Life Activities Domain

The client scored in the 'moderate' range with clinically significant strengths and weaknesses. However, there was a large amount of variability in responses within the Life Activities domain, so it is recommended that the individual items be inspected rather than only relying on the broader domain level rating. For example, item 21 ('Taking care of his or her household responsibilities?') was a clinically significant weakness, marked as extreme, while item 25 ('In the past 30 days, how much difficulty did your relative have in: His or her day-to-day work/school?') was a significant strength, scored as mild.

Participation Domain



Interpretation (cont.)

The client scored in the 'moderate' range with clinically significant strengths and weaknesses. However, there was a large amount of variability in responses within the Participation domain, so it is recommended that the individual items be inspected rather than only relying on the broader domain level rating. For example, item 29 ('How much of a problem did your relative have in joining in community activities (for example, festivities, religious or other activities) in the same way as anyone else can?') was a clinically significant weakness, marked as severe, while item 31 ('How much of a problem did your relative have living with dignity because of the attitudes and actions of others?') was a significant strength, scored as none.

Questions 37 - 39

The client indicated that they experienced these difficulties for 100% (30 days) of the time in the past 30 days. The client indicated that they were unable to carry out their usual activities or work for 83% (25 days) of the time in the past 30 days due to health conditions. The client indicated that they had to cut back or reduce their usual activities or work for 100% (30 days) of the time in the past 30 days due to health conditions.

Scoring and Interpretation Information

For comprehensive information on the WHODAS-proxy, see here.

There are three scoring methods used for the WHODAS 2.0:

1. Simple score

- 2. Complex score (and its percentile)
- 3. Average score (and its descriptor)

In simple scoring, the scores assigned to each of the items (1-36) are simply added up without recoding or collapsing of response categories; thus, there is no weighting of individual items. Simple scoring of WHODAS is specific to the sample at hand and should not be assumed to be comparable across populations. 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. The domain scores provide more detailed information than the summary score and may be useful for comparing individuals or groups against one another or against population standards, and across time (e.g. before and after interventions or other comparisons).

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 (1-36). This type of scoring for WHODAS 2.0 allows for more fine-grained analyses that make use of the full information of the response categories for comparative analysis across populations or subpopulations. It takes the coding for each item response as "none", "mild", "moderate", "severe" and "extreme" separately, and then summarises the score by differentially weighting the items and the levels of severity. Converting the summary score into a metric ranging from 0 to 100 (where 0 = no disability; 100 = full disability). A percentile is provided that allows for a comparison to a large sample (n = 1,431) from a wide variety of populations (general population, populations with physical problems, populations with mental or emotional problems, populations with alcohol and drug use problems) from over 21 countries (WHO, 2010). A percentile of 50 indicates that an individual is experiencing an average level of disability when compared to other members of the sample.



Scoring and Interpretation Information (cont.)

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 (0-0.49), mild (0.5-1.49), moderate (1.5-2.49), severe (2.5-3.49), or extreme (3.5-4). 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 (APA, 2021). 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). Average scores should be emphasised when the client misses optional items as its scoring caters for these missing items, whereas the complex scoring method does not.

The three scoring methods are used for each of the 6 domains:

1. Cognition – Assesses communication and thinking activities; specific areas assessed include concentrating, remembering, problem solving, learning and communicating.

2. Mobility – Assesses activities such as standing, moving around inside the home, getting out of the home and walking a long distance.

3. Self-care – Assesses hygiene, dressing, eating and staying alone.

4. Getting along – Assesses interactions with other people and difficulties that might be encountered with this life domain due to a health condition; in this context, "other people" includes those known intimately or well (e.g. spouse or partner, family members or close friends) and those not known well (e.g. strangers).

5. Life activities – Assesses difficulty with day-to-day activities (i.e. those that people do on most days, including those associated with domestic responsibilities, leisure, work and school).
6. Participation – Assesses social dimensions, such as community activities; barriers and hindrances in the world around the respondent; and problems with other issues, such as maintaining personal dignity.

	Cheft Responses					
		None	Mild	Moderate	Severe	Extreme or cannot do
1	In the past 30 days, how much difficulty did your relative have in: Concentrating on doing something for ten minutes?	0	1	2	3	4
2	Remembering to do important things?	0	1	2	3	4
3	Analysing and finding solutions to problems in day-to- day life?	0	1	2	3	4
4	Learning a new task, for example, learning how to get a new place?	0	1	2	3	4
5	Generally understanding what people say?	0	1	2	3	4
6	Starting and maintaining a conversation?	0	1	2	3	4

Client Responses



Client Responses (cont.)						
		None	Mild	Moderate	Severe	Extreme or cannot do
7	Standing for long periods such as 30 minutes?	0	1	2	3	4
8	Standing up from sitting down?	0	1	2	3	4
9	Moving around inside their home?	0	1	2	3	4
10	Getting out of their home?	0	1	2	3	4
11	Walking a long distance such as a kilometre (or equivalent)?	0	1	2	3	4
12	Because of their health condition, in the past 30 days, how much difficulty did your relative have in: Washing his or her whole body?	0	1	2	3	4
13	Getting dressed?	0	1	2	3	4
14	Eating?	0	1	2	3	4
15	Staying by himself or herself for a few days?	0	1	2	3	4
16	Dealing with people he or she does not know?	0	1	2	3	4
17	Maintaining a friendship?	0	1	2	3	4
18	Getting along with people who are close to him or her?	0	1	2	3	4
19	Making new friends?	0	1	2	3	4
20	Sexual activities?	0	1	2	3	4
21	Taking care of his or her household responsibilities?	0	1	2	3	4
22	Doing his or her most important household tasks well?	0	1	2	3	4
23	Getting all the household work done that is needed?	0	1	2	3	4
24	Getting the household work done as quickly as needed?	0	1	2	3	4
25	If your relative works (paid, non-paid, self-employed) or goes to school, complete questions 25-28 below. Otherwise, skip to question 29. In the past 30 days, how much difficulty did your relative have in: His or her day-to-day work/school?	0	1	2	3	4

Client Responses (cont.)





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