

# WHO Disability Assessment Schedule (WHODAS) 2.0

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ADMINISTRATION AND SCORING FOR PURPOSE OF 1915(I) ELIGIBILITY DETERMINATION

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# Intended Audience

- The information presented today is intended for anyone administering (or preparing to administer) the WHODAS for the purpose of determining 1915(i) eligibility.
- This training is in addition to the required general training on the WHO website, and additional training resources available on the 1915(i) website.
- It is expected that individuals preparing to administer the WHODAS as part of determining 1915(i) eligibility have completed the WHODAS Training: Part I – 1915(i) Medicaid Policy and Procedures.

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# Self-Administration

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**Interview**

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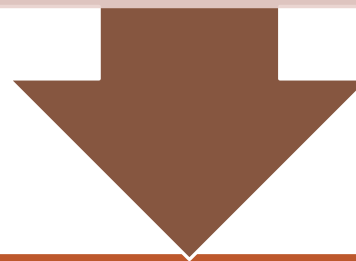
**Proxy**

Modes  
Administering the  
WHODAS

## Interview: Essential Components

Standardization: WHODAS 2.0 interviews should be conducted in the same way with each participant.

Such standardization helps to ensure that differences in participants' responses are not due to differences in the way the interview is conducted.



Privacy: This ensures a high comfort level, which in turn gives the most accurate responses. When WHODAS 2.0 is administered through an interview, this should be conducted in a closed room where responses cannot be overheard.

# Frames of Reference

For all WHODAS 2.0 versions, respondents should answer questions with the following frames of reference in mind:

- Frame 1 – degree of difficulty
- Frame 2 – due to health conditions
- Frame 3 – in the past 30 days
- Frame 4 – averaging good and bad days
- Frame 5 – as the respondent usually does the activity
- Frame 6 – items not experienced in the past 30 days are not rated.

# Frame of Reference 1: Degree of Difficulty

During the interview, respondents are asked questions about the degree of difficulty that they experience in doing different activities. For WHODAS 2.0, having difficulty with an activity means:

- increased effort
- discomfort or pain
- slowness
- changes in the way the person does the activity.

## Frame of Reference 2: Due to Health Conditions

Respondents are asked to answer about difficulties due to any **health conditions**, such as:

- diseases, illnesses or other health problems
- injuries
- mental or emotional problems
- problems with alcohol
- problems with drugs.

## Frame of Reference 3: In the Past 30 Days

Recall abilities are most accurate for the period of one month. The past 30 days was therefore selected as the timeframe for WHODAS 2.0.



## Frame of Reference 4: Averaging Good Days and Bad Days

Some respondents will experience variability in the degree of difficulty that they experience over 30 days. In these cases, respondents should be asked to give a rating that averages good and bad days.

Frame of  
Reference 5: As  
the Respondent  
Usually Does  
the Activity

Respondents should rate the difficulty experienced by taking into consideration how they usually do the activity.

If assistive devices or personal assistance are usually available, respondents should keep this in mind.

## Frame of Reference 6: Items Rated as Not Applicable

WHODAS 2.0 seeks to determine the amount of difficulty encountered in activities that a person actually does, as opposed to activities that the person would like to do or can do, but does not actually do. Interviewers should determine whether responses are applicable.

# Six Domains



Domain 1: Cognition



Domain 2: Mobility



Domain 3: Self-Care



Domain 4: Getting Along with Others



Domain 5: Life Activities



Domain 6: Participation

# Actual Administration:

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It is recommended that you complete the WHODAS using the appropriate assessment available on the 1915(i) website:

- [Interview](#)
- [Proxy](#)

# Typographical Conventions

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## INTERVIEWER INSTRUCTIONS

- Anything written in **standard blue print** is meant to be read to the respondent.

**Example:** A4 **What is your current marital status?**

## SKIPS WITHIN QUESTIONS

- “Skip instructions” are printed in ***bold and italics***.

**Example:** Before D5.7: ***If box is checked, continue, otherwise, skip to Domain 6 on the next page.***

# Typographical Conventions

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## UNDERLINED TYPE

- Within questions, words in underlined typeface are key words or phrases that are to be emphasized when read to the respondent.
- Example: D1.1, Concentrating on doing something for ten minutes.

## VERBATIM ENTRIES

- A blank line is provided when the interviewer is to record the respondent's answer.
- Responses should be recorded exactly as stated. This type of response is requested when further detail is needed:

Example: A3: How many years in all did you spend studying in school, college or university?

\_\_\_\_\_ Years

# Typographical Conventions

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## PARENTHESES

- Parentheses ( ) contain examples to illustrate a point.
- All items in the parentheses are to be read to the respondent.

**Example: S4** How much of a problem did you have joining in community activities (for example, festivities, religious or other activities) in the same way as anyone else can?

## SQUARE BRACKETS

- Square brackets [ ] contain instructions to translators. English-speaking interviewers may also follow these guidelines if needed to increase the clarity of the question or the applicability in the respondent's culture.

**Example: D2.5** Walking a long distance such as a kilometre [or equivalent]



# Recording Data

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## INTERVIEWER CORRECTIONS

- If an incorrect answer is circled because respondents change their mind or made a mistake, put a slash (/) through the incorrect answer and circle the correct answer.

## CLOSED QUESTIONS AND CIRCLING ANSWERS

- Write or type all answers in the spaces provided.
- Most questions require that an answer be circled. Make sure that the circle encloses only one number, because the computer will allow only one response selection.

# Introduction & Demographic/ Background Information

“This interview has been developed by the World Health Organization to better understand the difficulties people may have due to their health conditions.”

“I will start with some background questions”

A1	<b>Record sex as observed</b>	Female	1
		Male	2
A2	How old are you now?	_____ years	
A3	How many years in all did you spend <u>studying in school, college or university?</u>	_____ years	
A4	<b>What is your <u>current marital status?</u> (Select the single best option)</b>	Never married	1
		Currently married	2
		Separated	3
		Divorced	4
		Widowed	5
		Cohabiting	6
A5	<b>Which describes your <u>main work status</u> best? (Select the single best option)</b>	Paid work	1
		Self employed, such as own your business or farming	2
		Non-paid work, such as volunteer or charity	3
		Student	4
		Keeping house/ homemaker	5
		Retired	6
		Unemployed (health reasons)	7
		Unemployed (other reasons)	8
		Other (specify) _____ _____	9

# Preamble

“This interview is about difficulties people have because of health conditions.”

Provide Flashcard#1

Point to flashcard #1 and explain that “difficulty with an activity” means:

- Increased effort
- Discomfort or pain
- Slowness
- Changes in the way you do the activity



## **WHODAS 2.0**

WORLD HEALTH ORGANIZATION  
DISABILITY ASSESSMENT SCHEDULE 2.0

*Flashcard 1*

### **Health conditions:**

- **Diseases, illnesses or other health problems**
- **Injuries**
- **Mental or emotional problems**
- **Problems with alcohol**
- **Problems with drugs**

### **Having difficulty with an activity means:**

- **Increased effort**
- **Discomfort or pain**
- **Slowness**
- **Changes in the way you do the activity**

**Think about the past 30 days only.**

# Flashcard #2

“Use this scale when responding”

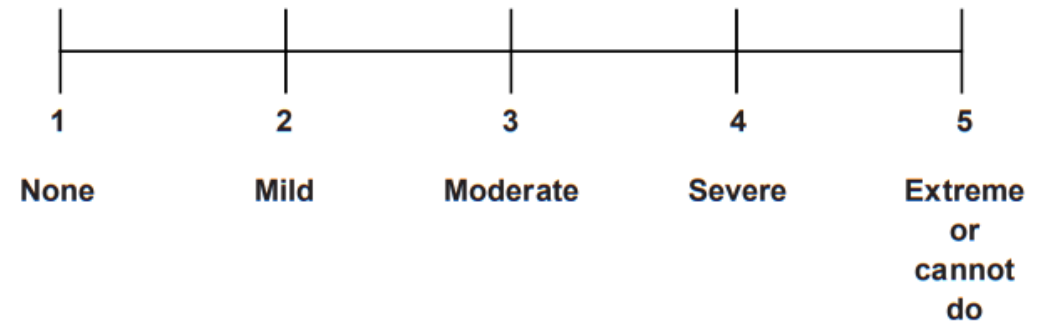
Read the scale aloud:

“None, mild, moderate, severe, extreme or cannot do”

## WHODAS 2.0

WORLD HEALTH ORGANIZATION  
DISABILITY ASSESSMENT SCHEDULE 2.0

*Flashcard 2*



# Asking the Question

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## READ QUESTIONS AS THEY ARE WRITTEN

Read questions to the respondents exactly as they appear in the questionnaire. There are two exceptions to this rule in the administration of WHODAS 2.0 – grammatical changes and verifying responses

Grammatical changes If necessary, adjust the wording of a question to make it grammatically correct. This mainly occurs when only one difficulty is identified in a domain.

**Example:** In response to the question “How much did these difficulties interfere with your life?” if a respondent indicates only one difficulty in the domain, change the word “difficulties” to the singular “difficulty” and “these” to “this”

Verifying responses If necessary, modify the form of the word used in the rating scale to make better sense.

**Example:** In response to the question “How much have you been emotionally affected by your health condition?” the answer “none” would be odd and grammatically incorrect. In this case, “none” can be changed to “not at all” to be grammatically correct. Many respondents make this shift automatically but the interviewer can provide guidance if necessary

# Asking the Question

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## READ THE ENTIRE QUESTION

- Before accepting an answer, make sure that the respondent has heard the entire question, to ensure that the person is considering all concepts in the question. If the respondent interrupts before hearing the whole question, repeat the question, making sure that the respondent hears it through to the end. Do not assume that a premature response applies to the question as written.

## USE LEAD-IN PHASES

- The phrase “how much difficulty did you have in ...” is used frequently throughout the interview. Repeat this phrase more or less frequently, as necessary, to help the respondent to complete the interview or to make the line of questioning flow more smoothly.

# Asking the Question

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## USE FLASHCARDS WHEN INSTRUCTED

- Most questions use flashcards to remind the respondent of key information. The text (point to flashcard #) appears at each point where a flashcard is to be shown.
- Do not make assumptions about the respondent's answers.
  - Based on assumptions or knowledge of respondent, it may be tempting to skip those questions or to introduce them with a phrase like "I know this probably doesn't apply to you, but ..." Practices such as these make it impossible to get accurate information or to learn to what extent answers to earlier questions actually do predict answers to later ones.

# Clarifying Unclear Responses

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## RULES FOR CLARIFICATION AND PROBING

- (a) If you doubt that respondents heard the entire question, repeat it. For example, if respondents answer irrelevantly or do not appear to understand all aspects of the question, re-read either the whole question or the portion that was not understood.
- (b) When respondents ask about a specific part of the question, repeat only that part. Do not make assumptions about the respondent's answers.
- (c) When asked to repeat one response option, repeat all response options, only omitting a response option if respondents have already clearly eliminated that option.
- (d) Use only the question text or neutral probes to avoid introducing bias into the question.
- (e) In repeating a question, it is sometimes helpful to use a neutral introduction to make a smoother transition; for example, preface the repeated question with:
  - Overall ...
  - Let me repeat the question ...
  - Well, in general ...
  - Generally speaking ...



# Clarifying Unclear Responses

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## RULES FOR CLARIFICATION AND PROBING

- (f) If respondents ask for clarification about what is being asked, first simply repeat the question. If respondents do not find this approach helpful, use the explanations as they are written in the question-by-question specifications given in Chapter 7; do not use any other definition of terms or explanations.
- (g) If respondents request a definition for a term or an explanation that is not in the question-by question objectives, instruct them to answer the question using their own definition or interpretation of the word, phrase or concept in question. To do this, use phrases such as:
  - Whatever ... means to you.
  - Whatever you think of as ....

# Probes

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## TYPES OF PROBES

Use neutral probes as necessary to help respondents provide descriptions when requested as part of the interview:

- Can you give me your best guess?
- Can you provide one overall rating?
- What is your best estimate?
- What do you think?

# Common Probing Situations

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## NOT APPLICABLE

- Respondents may sometimes feel that a question does not apply to their situation. In this case, record with N/A on the left margin of the form.
- *Probe all questions of N/A. If in the process of probing it appears that respondents feel a question is not applicable because they cannot do the activity, score the item as a "5" on the scale "Cannot do."*

## DON'T KNOW

- The general rule when respondents give a response of "I don't know" is to repeat the question. If this is unsuccessful, probe respondents once before accepting the "don't know" (DK). An effort at recall should be encouraged with a probe such as "Could you give me your best estimate?" If respondents still cannot respond, "DK" is recorded in the left margin. The computerized version of the instrument provides a DK response category.

# Common Probing Situations

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## DISCREPANCIES

- Discrepancies Look out for discrepant responses. Refer respondents back to information on the flashcards as often as necessary if it seems that such information is being forgotten. For example, where respondents are clearly answering questions, but are indicating difficulties for reasons other than the health condition. It can be helpful to use the information on the flashcards as a reminder.

# Domain 5 Call Out

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Domain 5 (Life Activities) has two sections:

- Household Activities
- Work or School Activities.

Only complete the Work or School Activities section if the respondent works (paid, non-paid, self-employed) or goes to school.

- Otherwise skip this section and proceed to Domain 6
  - How to manage scoring for this circumstance will be discussed below.

# Domain 6 Call Out

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- Domain 6 represents a shift from the line of questioning used in the first five domains.
- In this domain, respondents are asked to consider how other people and the world around them make it difficult for them to take part in society.
- Here, they are reporting not on their activity limitations but rather on the restrictions they experience from people, laws and other features of the world in which they find themselves.
- The underlined phrases in the introduction must be emphasized to help respondents shift their mindset and understand what is being asked.
- Respondents need to understand that the focus of these questions is on problems encountered because of the society in which they live rather than because of their own difficulties

## EXAMPLE

*How much of a problem did you have joining in community activities (for example, festivities, religious or other activities) in the same way anyone else can?*

# Common Questions

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## FAMILIARIZE YOURSELF

The manual for the WHODAS 2.0 includes question by question specifications.

- Available for all 36 items.

It is your responsibility as someone who administers the WHODAS to be familiar with these frequently asked questions and responses.

- To keep close at hand during administration.

## EXAMPLE

D2.3: In the Past 30 days how much difficulty did you have in moving around inside your home.

**Manual Guidance:** *This item refers to moving from room to room, and moving within rooms, using assistive devices or personal help that is usually in place. If a respondent lives in a house with multiple floors, this question also includes getting from one floor to another, as needed.*

# Problems and Solutions

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PROBLEM: WHEN TO CODE N/A VS. “CANNOT DO”

Solution:

- If a respondent is prevented from doing an activity due to a health condition, rate the item as
  - “5” for “Extreme or cannot do”.
- If a respondent has not experienced an activity in the past 30 days, but this is not due to a health condition, code the item as “N/A” for “Not applicable”.

THE RESPONDENT GIVES AN ANSWER THAT DOES NOT CORRESPOND WITH MY (OR OTHERS) UNDERSTANDING OF THE RESPONDENT’S CURRENT FUNCTIONING

- WHODAS 2.0 measures responses from the perspective of the respondent or – in the case of proxy versions – from a proxy respondent referring to the primary respondent’s functioning. Although an interviewer might not always agree with the respondent’s answer, the answer given must be the one recorded.



# Problems and Solutions

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**PROBLEM: THE RESPONDENT DOES NOT GIVE A CLEARLY CODABLE ANSWER.**

**Solution:**

If the respondent does not give clear answers, probe the respondent for further clarification.

- Please reference the “Probes” slide above for examples of how to do this.

**PROBLEM: THE RESPONDENT BECOMES ANNOYED BY REPETITIOUS QUESTIONS.**

**Solution:**

Some of the WHODAS 2.0 questions sound similar. In some cases, the respondent may become annoyed and assume that the interviewer was not listening to a previous response. In this situation, the interviewer has two options:

Ask the question with a preface – that is, read the question with a preface that acknowledges previous responses; for example - “You told me before that...., but I still need to ask you this question as it is written.”

Confirm the response – that is, reword the question in a way that confirms the information that the respondent already gave; for example - “You told me before that....Is that correct?”

# Youth Specific Administration

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Per guidance from a consultant with the WHO, the WHODAS can be used for individuals “Across the life span” including those under 18 years of age.

- Due to the language level of this tool it is recommended that when completing the WHODAS with youth ages 12 and under, the Proxy version is utilized with guardian unless there is clinical indication otherwise.
- For youth ages 13 to 18, either the Interview or Proxy (with guardian as respondent) version may be used as determined appropriate

Examples may require modification to match to age-appropriate expectations.

- E.g., D3.4: “Staying by yourself for a few days.” Can be introduced as “Staying safe when you are alone or not putting yourself in danger when there are no adults around?”
- E.g., D5.7: “Getting all your work done as quickly as needed.” Can be reminded that this includes school work.

# Scoring Overview

## Simple Scoring

In Simple Scoring the scores assigned to each of the items (“None” - 1, “Mild” - 2, “Moderate” - 3, “Severe” - 4, and “Extreme or Cannot Do” - 5) are summed. There is no weighting of individual items

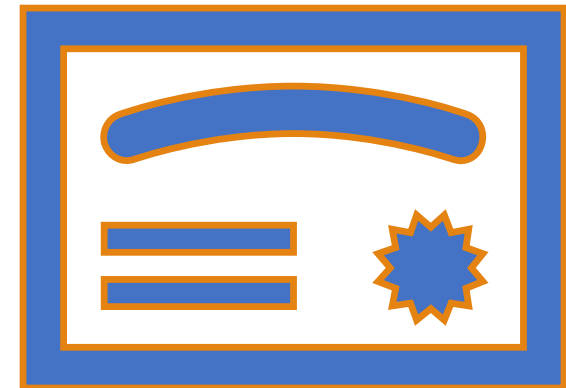
## Complex

Based on Item Response Theory (IRT). This allows for differential weighting of each item based on severity or contribution to disability and allows comparative analysis across populations or subpopulations.

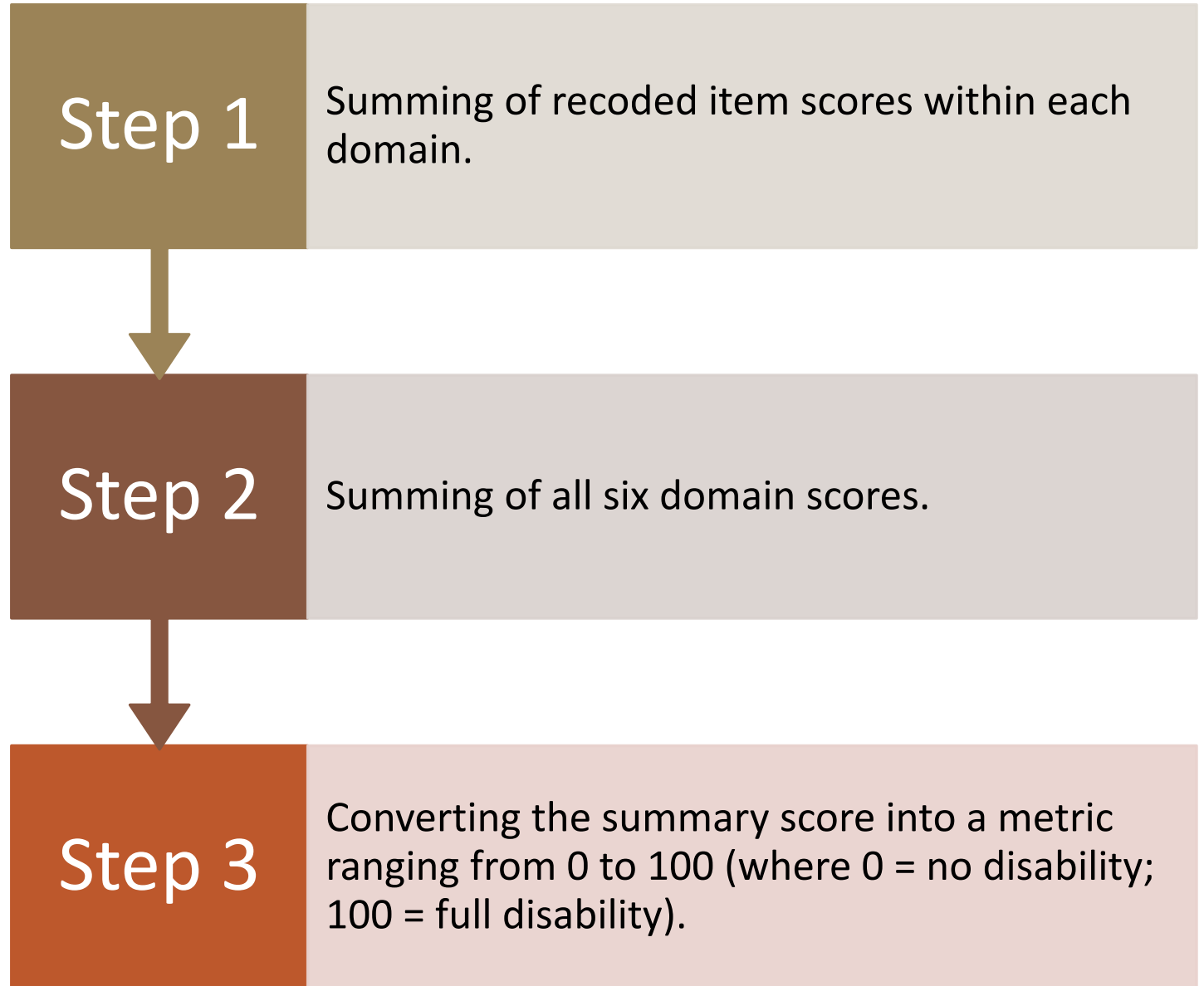
# Scoring – Application to Eligibility

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- When being used to determine eligibility for 1915(i):
  - An Overall **Complex** score of 25 or greater is required.
  - In addition to the Overall Score, individual domain scores can be used to assist the 1915(i) Care Coordinator in identifying unique areas of deficit/impairment and so inform which services would be authorized through the Plan of Care.



# Complex Scoring Expanded



# Missing Answers

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If the client is not working and has given responses to the 32-item WHODAS 2.0, the score can be used as it is (further details of this will be provided in the spreadsheet/data entry overview) and will be comparable to that of the full 36-item version.

In all other situations where one or two items are missing, the mean score across all items within the domain should be assigned to the missing items.

This method **should not be used if more than two items are missing**. In addition, if domain-wise scores are being computed for domains, **the two missing items should not come from the same domain**.

# WHODAS COMPLEX SCORING SHEET

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The version of the WHODAS Complex Scoring Sheet that must be used is located on the 1915(i) website and is named:

[WHODAS Complex Scoring Sheet](#)

Do not use any other version of the WHODAS Complex Scoring Sheet.