



# WHODAS 2.0

WORLD HEALTH ORGANIZATION  
DISABILITY ASSESSMENT SCHEDULE 2.0

## 36-item version, self-administered

This questionnaire asks about difficulties due to health conditions. 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 answer these questions, thinking about how much difficulty you had doing the following activities. For each question, please circle only one response.

|  |   |      |      |          |        |                      |
|--|---|------|------|----------|--------|----------------------|
| In the past <u>30 days</u> , how much <u>difficulty</u> did you have in: |   |      |      |          |        |                      |
| <b>Understanding and communicating</b>                                   |   |      |      |          |        |                      |
| D1.1   | <u>Concentrating</u> on doing something for <u>ten minutes</u> ?              | None | Mild | Moderate | Severe | Extreme or cannot do |
| D1.2   | <u>Remembering</u> to do <u>important things</u> ?                            | None | Mild | Moderate | Severe | Extreme or cannot do |
| D1.3   | <u>Analysing and finding solutions to problems</u> in day-to-day life?        | None | Mild | Moderate | Severe | Extreme or cannot do |
| D1.4   | <u>Learning a new task</u> , for example, learning how to get to a new place? | None | Mild | Moderate | Severe | Extreme or cannot do |
| D1.5   | <u>Generally understanding</u> what people say?                               | None | Mild | Moderate | Severe | Extreme or cannot do |
| D1.6   | <u>Starting and maintaining a conversation</u> ?                              | None | Mild | Moderate | Severe | Extreme or cannot do |
| <b>Getting around</b>  |   |      |      |          |        |                      |
| D2.1   | <u>Standing</u> for <u>long periods</u> such as <u>30 minutes</u> ?           | None | Mild | Moderate | Severe | Extreme or cannot do |
| D2.2   | <u>Standing up</u> from sitting down?   | None | Mild | Moderate | Severe | Extreme or cannot do |
| D2.3   | <u>Moving</u> around <u>inside your home</u> ?                                | None | Mild | Moderate | Severe | Extreme or cannot do |
| D2.4   | <u>Getting out</u> of your <u>home</u> ?                                      | None | Mild | Moderate | Severe | Extreme or cannot do |
| D2.5   | <u>Walking a long distance</u> such as a <u>kilometre</u> [or equivalent]?    | None | Mild | Moderate | Severe | Extreme or cannot do |

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Self

|  |   |      |      |          |        |                      |
|--|---|------|------|----------|--------|----------------------|
| In the past <u>30 days</u> , how much <u>difficulty</u> did you have in: |   |      |      |          |        |                      |
| <b>Self-care</b>   |   |      |      |          |        |                      |
| D3.1   | Washing your <u>whole body</u> ?                                  | None | Mild | Moderate | Severe | Extreme or cannot do |
| D3.2   | Getting <u>dressed</u> ?  | None | Mild | Moderate | Severe | Extreme or cannot do |
| D3.3   | <u>Eating</u> ?   | None | Mild | Moderate | Severe | Extreme or cannot do |
| D3.4   | Staying <u>by yourself</u> for a <u>few days</u> ?                | None | Mild | Moderate | Severe | Extreme or cannot do |
| <b>Getting along with people</b>   |   |      |      |          |        |                      |
| D4.1   | <u>Dealing</u> with people <u>you do not know</u> ?               | None | Mild | Moderate | Severe | Extreme or cannot do |
| D4.2   | <u>Maintaining a friendship</u> ?                                 | None | Mild | Moderate | Severe | Extreme or cannot do |
| D4.3   | <u>Getting along</u> with people who are <u>close</u> to you?     | None | Mild | Moderate | Severe | Extreme or cannot do |
| D4.4   | <u>Making new friends</u> ?                                       | None | Mild | Moderate | Severe | Extreme or cannot do |
| D4.5   | <u>Sexual activities</u> ?  | None | Mild | Moderate | Severe | Extreme or cannot do |
| <b>Life activities</b>   |   |      |      |          |        |                      |
| D5.1   | Taking care of your <u>household responsibilities</u> ?           | None | Mild | Moderate | Severe | Extreme or cannot do |
| D5.2   | Doing 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 you needed to do? | None | Mild | Moderate | Severe | Extreme or cannot do |
| D5.4   | Getting your household work done as <u>quickly</u> as needed?     | None | Mild | Moderate | Severe | Extreme or cannot do |

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If you work (paid, non-paid, self-employed) or go to school, complete questions D5.5–D5.8, below. Otherwise, skip to D6.1.

| Because of your health condition, in the past <u>30 days</u> , how much <u>difficulty</u> did you have in: |   |      |      |          |        |                      |
|--|---|------|------|----------|--------|----------------------|
| D5.5   | Your day-to-day <u>work/school</u> ?                      | None | Mild | Moderate | Severe | Extreme or cannot do |
| D5.6   | Doing your most important work/school tasks <u>well</u> ? | None | Mild | Moderate | Severe | Extreme or cannot do |
| D5.7   | Getting all the work <u>done</u> that you need to do?     | None | Mild | Moderate | Severe | Extreme or cannot do |
| D5.8   | Getting your work done as <u>quickly</u> as needed?       | None | Mild | Moderate | Severe | Extreme or cannot do |

| <b>Participation in society</b> |  |      |      |          |        |                      |
|---------------------------------|--|------|------|----------|--------|----------------------|
| In the past <u>30 days</u> :    |  |      |      |          |        |                      |
| D6.1                            | How much of a problem did you 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 |
| D6.2                            | How much of a problem did you have because of <u>barriers or hindrances</u> in the world around you?   | None | Mild | Moderate | Severe | Extreme or cannot do |
| D6.3                            | How much of a problem did you 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>you</u> spend on your health condition, or its consequences?   | None | Mild | Moderate | Severe | Extreme or cannot do |
| D6.5                            | How much have <u>you</u> been <u>emotionally affected</u> by your health condition?  | None | Mild | Moderate | Severe | Extreme or cannot do |
| D6.6                            | How much has your health been a <u>drain on the financial resources</u> of you or your family?   | None | Mild | Moderate | Severe | Extreme or cannot do |
| D6.7                            | How much of a problem did your <u>family</u> have because of your health problems?   | None | Mild | Moderate | Severe | Extreme or cannot do |
| D6.8                            | How much of a problem did you have in doing things <u>by yourself</u> for <u>relaxation or pleasure</u> ?  | None | Mild | Moderate | Severe | Extreme or cannot do |

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|    |  |                                   |
|----|--|-----------------------------------|
| H1 | Overall, in the past 30 days, <u>how many days</u> were these difficulties present?  | <b>Record number of days</b> ____ |
| H2 | In the past 30 days, for how many days were you <u>totally unable</u> to carry out your usual activities or work because of any health condition?  | <b>Record number of days</b> ____ |
| H3 | In the past 30 days, not counting the days that you were totally unable, for how many days did you <u>cut back</u> or <u>reduce</u> your usual activities or work because of any health condition? | <b>Record number of days</b> ____ |

This completes the questionnaire. Thank you.