FUNCTIONING (FNQ) Target Group: SPs 5+

BOX 1

CHECK ITEM FNQ.005 IF SP AGE ≥ 18 YEARS, GO TO FNQ.410. ELSE, CONTINUE.

FNQ.021 Please look at card FNQ1. I would like to ask you some questions about difficulties {you/SP} may have. {Do you/Does SP} have difficulty seeing even if wearing glasses or contact lenses? Would you say {you have/SP has}: no difficulty, some difficulty, a lot of difficulty, or cannot do at all?

HAND CARD FNQ1

NO DIFFICULTY	1
SOME DIFFICULTY	2
A LOT OF DIFFICULTY	3
CANNOT DO AT ALL	4
REFUSED	7
DON'T KNOW	9

FNQ.041 {Do you/Does SP} have difficulty hearing sounds like peoples' voices or music even if using a hearing aid? [Would you say {you have/SP has}: no difficulty, some difficulty, a lot of difficulty, or cannot do at all?]

HAND CARD FNQ1

NO DIFFICULTY	1
SOME DIFFICULTY	2
A LOT OF DIFFICULTY	3
CANNOT DO AT ALL	4
REFUSED	7
DON'T KNOW	9

FNQ.050 {Do you/Does SP} use any equipment or receive assistance for walking?

YES	1	
NO	2	(FNQ.080)
REFUSED	7	(FNQ.080)
DON'T KNOW	9	(FNQ.080)

FNQ.060 Please look at card FNQ2. Without {your/his/her/SP's} equipment or assistance, {do you/does SP} have difficulty walking 100 yards/meters on level ground? That would be about the length of 1 football field. Would you say {you have/SP has}: some difficulty, a lot of difficulty, or cannot do at all?

HAND CARD FNQ2

SOME DIFFICULTY	2	(FNQ.160)
A LOT OF DIFFICULTY	3	(FNQ.160)
CANNOT DO AT ALL	4	(FNQ.160)
REFUSED	7	(FNQ.160)
DON'T KNOW	9	(FNQ.160)

FNQ.080 Compared with children of the same age, {do you/does SP} have difficulty walking 100 yards/meters on level ground? That would be about the length of 1 football field. [Would you say {you have/SP has}: no difficulty, some difficulty, a lot of difficulty, or cannot do at all?]

HAND CARD FNQ1

NO DIFFICULTY	1
SOME DIFFICULTY	2
A LOT OF DIFFICULTY	3
CANNOT DO AT ALL	4
REFUSED	7
DON'T KNOW	9

FNQ.160 [Turn back to card FNQ1.} {Do you/Does SP} have difficulty with self-care such as feeding or dressing {him/herself/SP}? [Would you say {you have/SP has}: no difficulty, some difficulty, a lot of difficulty, or cannot do at all?]

HAND CARD FNQ1

NO DIFFICULTY	1
SOME DIFFICULTY	2
A LOT OF DIFFICULTY	3
CANNOT DO AT ALL	4
REFUSED	7
DON'T KNOW	9

CAPI INSTRUCTIONS; DISPLAY "Turn back to card FNQ1." IF FNQ.050 = 1.

FNQ.100 When {you speak/SP speaks}, {do you/does he/does she/does SP} have difficulty being understood by people inside of this household? [Would you say {you have/SP has}: no difficulty, some difficulty, a lot of difficulty, or cannot do at all?]

HAND CARD FNQ1

NO DIFFICULTY	1
SOME DIFFICULTY	2
A LOT OF DIFFICULTY	3
CANNOT DO AT ALL	4
REFUSED	7
DON'T KNOW	9

FNQ.110 When {you speak/SP speaks}, {do you/does he/does she/does SP} have difficulty being understood by people outside of this household? [Would you say {you have/SP has}: no difficulty, some difficulty, a lot of difficulty, or cannot do at all?]

HAND CARD FNQ1

NO DI	FICULTY	1
SOME	DIFFICULTY	2
A LOT	OF DIFFICULTY	3
CANN	OT DO AT ALL	4
REFUS	SED	7
DON'T	KNOW	9

FNQ.120 Compared with children of the same age, {do you/does SP} have difficulty learning things? [Would you say {you have/SP has}: no difficulty, some difficulty, a lot of difficulty, or cannot do at all?]

HAND CARD FNQ1

NO DIFFICULTY	1
SOME DIFFICULTY	2
A LOT OF DIFFICULTY	3
CANNOT DO AT ALL	4
REFUSED	7
DON'T KNOW	9

FNQ.170 Compared with children of the same age, {do you/does SP} have difficulty remembering things? [Would you say {you have/SP has}: no difficulty, some difficulty, a lot of difficulty, or cannot do at all?]

NO DIFFICULTY	1
SOME DIFFICULTY	2
A LOT OF DIFFICULTY	3
CANNOT DO AT ALL	4
REFUSED	7
DON'T KNOW	9

FNQ.180 {Do you/Does SP} have difficulty concentrating on an activity that he/she enjoys doing? [Would you say {you have/SP has}: no difficulty, some difficulty, a lot of difficulty, or cannot do at all?]

HAND CARD FNQ1

NO DIFFICULTY	1
SOME DIFFICULTY	2
A LOT OF DIFFICULTY	3
CANNOT DO AT ALL	4
REFUSED	7
DON'T KNOW	9

FNQ.190 {Do you/Does SP} have difficulty accepting changes in {your/his/her/SP's} routine? [Would you say {you have/SP has}: no difficulty, some difficulty, a lot of difficulty, or cannot do at all?]

HAND CARD FNQ1

NO DIFFICULTY	1
SOME DIFFICULTY	2
A LOT OF DIFFICULTY	3
CANNOT DO AT ALL	4
REFUSED	7
DON'T KNOW	9

FNQ.130 Compared with children of the same age, {do you/does SP} have difficulty controlling {your/his/her/SP's} behavior? [Would you say {you have/SP has}: no difficulty, some difficulty, a lot of difficulty, or cannot do at all?]

HAND CARD FNQ1

NO DIFFICULTY	1
SOME DIFFICULTY	2
A LOT OF DIFFICULTY	3
CANNOT DO AT ALL	4
REFUSED	7
DON'T KNOW	9

FNQ.200 {Do you/Does SP} have difficulty making friends? Would you say {you have/SP has}: [no difficulty, some difficulty, a lot of difficulty, or cannot do at all?]

NO DIFFICULTY	1
SOME DIFFICULTY	2
A LOT OF DIFFICULTY	3
CANNOT DO AT ALL	4
REFUSED	7
DON'T KNOW	9

FNQ.140 How often {do you feel/does SP seem} very anxious, nervous or worried? Would you say daily, weekly, monthly, a few times a year or never?

DAILY	1
WEEKLY	2
MONTHLY	3
A FEW TIMES A YEAR	4
NEVER	5
REFUSED	7
DON'T KNOW	9

FNQ.150 How often {do you feel/does SP seem} very sad or depressed? Would you say daily, weekly, monthly, a few times a year or never?

DAILY	1 (END OF SECTION)
WEEKLY	2 (END OF SECTION)
MONTHLY	
A FEW TIMES A YEAR	4 (END OF SECTION)
NEVER	
REFUSED	
DON'T KNOW	

FNQ.410 Please look at card FNQ1. The next questions ask about difficulties {you/SP} may have doing certain activities because of a **health problem.** {Do you/Does SP} have difficulty seeing even if wearing glasses or contact lenses? Would you say no difficulty, some difficulty, a lot of difficulty, or {you/he/she/SP} cannot do this at all?

HAND CARD FNQ1

NO DIFFICULTY	1
SOME DIFFICULTY	2
A LOT OF DIFFICULTY	3
CANNOT DO AT ALL	4
REFUSED	7
DON'T KNOW	9

FNQ.430 {Do you/Does SP} have difficulty hearing even if using a hearing aid? [Would you say no difficulty, some difficulty, a lot of difficulty, or {you/he/she/SP} cannot do this at all?]

NO DIFFICULTY	1
SOME DIFFICULTY	2
A LOT OF DIFFICULTY	3
CANNOT DO AT ALL	4
REFUSED	7
DON'T KNOW	9

FNQ.440 {Do you/Does SP} have difficulty walking or climbing steps? [Would you say no difficulty, some difficulty, a lot of difficulty, or {you/he/she/SP} cannot do this at all?]

HAND CARD FNQ1

NO DIFFICULTY	1
SOME DIFFICULTY	2
A LOT OF DIFFICULTY	3
CANNOT DO AT ALL	4
REFUSED	7
DON'T KNOW	9

FNQ.450 Using {your/his/her/SP's} usual language, {do you/does SP} have difficulty communicating, for example, understanding or being understood? [Would you say no difficulty, some difficulty, a lot of difficulty, or {you/he/she/SP} cannot do this at all?]

HAND CARD FNQ1

NO DIFFICULTY	1
SOME DIFFICULTY	2
A LOT OF DIFFICULTY	3
CANNOT DO AT ALL	4
REFUSED	7
DON'T KNOW	9

FNQ.460 {Do you/Does SP} have difficulty remembering or concentrating? [Would you say no difficulty, some difficulty, a lot of difficulty, or {you/he/she/SP} cannot do this at all?]

HAND CARD FNQ1

NO DIFFICULTY	1
SOME DIFFICULTY	2
A LOT OF DIFFICULTY	3
CANNOT DO AT ALL	4
REFUSED	7
DON'T KNOW	9

FNQ.470 {Do you/Does SP} have difficulty with self-care, such as washing all over and dressing? [Would you say no difficulty, some difficulty, a lot of difficulty, or {you/he/she/SP} cannot do this at all?]

NO DIFFICULTY	1
SOME DIFFICULTY	2
A LOT OF DIFFICULTY	3
CANNOT DO AT ALL	4
REFUSED	7
DON'T KNOW	9

FNQ.480 {Do you/Does SP} have difficulty raising a 2 liter bottle of water or soda from waist to eye level? [Would you say no difficulty, some difficulty, a lot of difficulty, or {you/he/she/SP} cannot do this at all?]

HAND CARD FNQ1

NO DIFFICULTY	1
SOME DIFFICULTY	2
A LOT OF DIFFICULTY	3
CANNOT DO AT ALL	4
REFUSED	7
DON'T KNOW	9

FNQ.490 {Do you/Does SP} have difficulty using {your/his/her/SP's} hands and fingers, such as picking up small objects, for example, a button or pencil, or opening or closing containers or bottles? [Would you say no difficulty, some difficulty, a lot of difficulty, or {you/he/she/SP} cannot do this at all?]

HAND CARD FNQ1

NO DIFFICULTY	1
SOME DIFFICULTY	2
A LOT OF DIFFICULTY	3
CANNOT DO AT ALL	4
REFUSED	7
DON'T KNOW	9

FNQ.510 How often {do you/does SP} feel worried, nervous, or anxious? Would you say...

daily,	1	
weekly,	2	
monthly,	3	
a few times a year, or	4	
never?	5	(FNQ.530)
REFUSED	7	(FNQ.530)
DON'T KNOW	9	(FNQ.530)

FNQ.520 Thinking about the last time {you/SP} felt worried, nervous, or anxious, how would {you/he/she/SP} describe the level of these feelings? Would you say...

a little,	1
a lot, or	2
somewhere in between a little and a lot?	3
REFUSED	7
DON'T KNOW	9

FNQ.530 How often {do you/does SP} feel depressed? Would you say...

daily,	1	
weekly,	2	
monthly,	3	
a few times a year, or	4	
never?	5	(END OF SECTION))
REFUSED	7	(END OF SECTION))
DON'T KNOW	9	(END OF SECTION))

FNQ.540 Thinking about the last time {you/SP} felt depressed, how depressed did {you/he/she/SP} feel? Would you say...

a little,	1
a lot, or	2
somewhere in between a little and a lot?	3
REFUSED	7
DON'T KNOW	9