

Assessment of Life Habits

General Short Version - 16 Items



Developped by

Patrick Fougeyrollas
Luc Noreau

In collaboration with

Céline Lepage
Ginette St-Michel

Kathryn Boschen

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INDCP
525, boul. Wilfrid-Hamel Est, local A-08
Québec (Québec)
Canada G1M 2S8

Email: riph@irdpq.qc.ca

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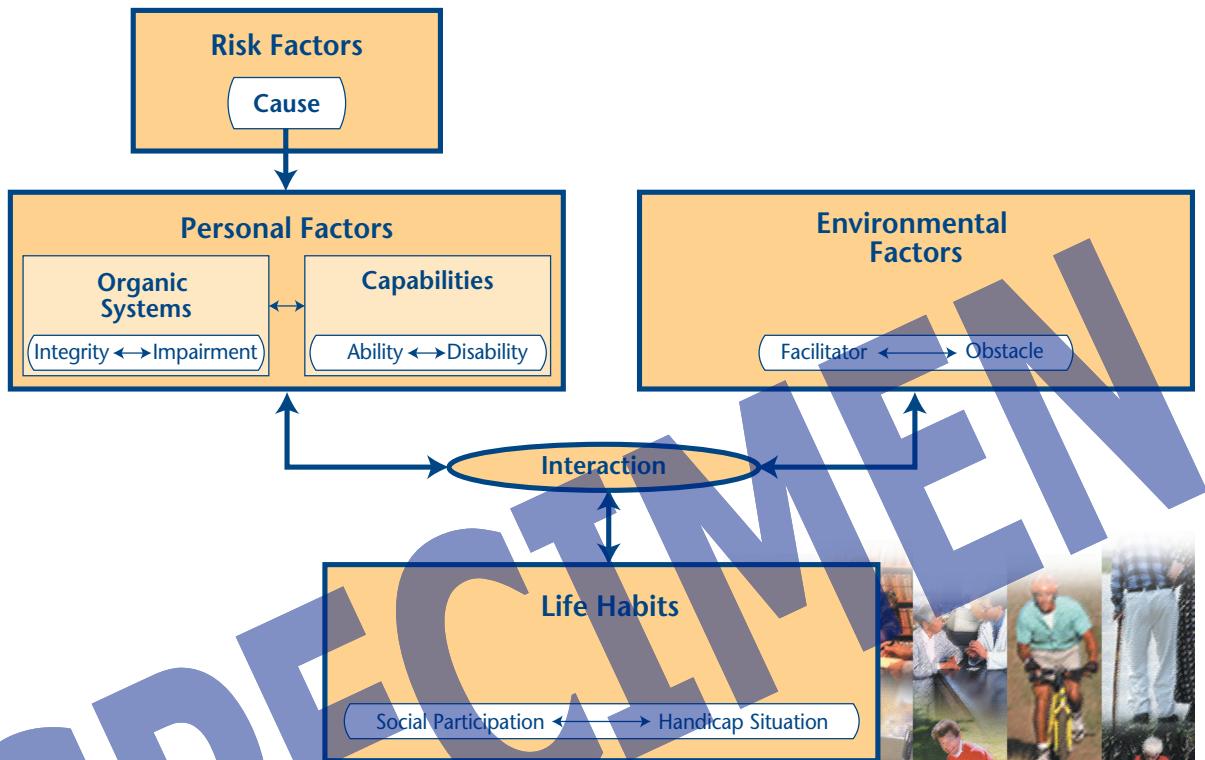
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The Disability Creation Process: The Reference Model



This model, known as the DCP, enables one to identify and explain the causes and consequences of disease, trauma, and disruptions to the development of a person.

The DCP demonstrates that the accomplishment of life habits is not only the result of our identity, our choices, impairments to our organs, our abilities and disabilities, but also the characteristics of our living environment.

As such, life habit accomplishment may be influenced by the reinforcement of our capabilities and compensation of our disabilities through rehabilitation, as well as by the reduction of obstacles due to prejudice, a lack of assistance or resources, or the absence of accessibility within the home or school.

Therefore, measuring the accomplishment of life habits involves identifying the result of the interaction between the person and his or her environment. We are thus talking about the quality of the person's social participation or the intensity of the handicap situations experienced by that person.

The DCP is thus a positive model that does not place responsibility for handicaps on the person.

Instructions for Respondents

Please read these instructions very carefully. They will familiarize you with the questionnaire and allow you to complete it more easily.

Generally speaking, this questionnaire is intended to gather information on a group of life habits that people accomplish in their environments (home, work, school and neighborhood).

Life Habits are *regular activities* (eating meals, communicating with others, moving around) and *social roles* (holding a job, studying) that ensure a person's survival and well-being in society throughout his/her lifetime. The accomplishment of life habits depends on the person's age, expectations of his/her environment, and cultural factors.

Respondents are asked to indicate how they generally accomplish each life habit in day to day living. **The purpose of this questionnaire is to determine the way in which respondents most commonly accomplish these life habits.** In addition, respondents are asked to indicate the level of satisfaction with how they accomplish the life habit.

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Note to respondents

Please respond freely to this questionnaire, according to your own perceptions; there are no right or wrong answers. If you are not comfortable responding to some of the more personal items, feel free to skip over them.

Questions and Format of the Questionnaire

There are two (2) questions for each life habit.

Question 1

will determine, for each of the person's life habits,

- A** The level of accomplishment,
and
- B** The type of assistance required to
accomplish it.

Please note that the answers to sub-questions (**A** & **B**) are interrelated.

Question 2

will determine the level of satisfaction with each of the person's life habits (respondent, next of kin, care provider).

This is the rating scale you will find at the top of each page of the questionnaire.

**Answer the following two questions.
(Check the appropriate boxes.)**

- 1** For each of the following life habits, indicate
 - A. How the person generally accomplishes it, and
 - B. The type of assistance required to accomplish it.
- 2** For each of the following life habits, indicate the level of satisfaction with the way it is accomplished.

Note: Keep in mind that answers should reflect the person's usual way of carrying out life habits.

Question 1		Question 2
A Level of Accomplishment (Check only 1)	B Type of Assistance (Check 1 or more, as required)	Level of Satisfaction (Check only 1)
No difficulty		Very dissatisfied
With difficulty		Dissatisfied
Accomplished by a proxy		More or less satisfied
Not accomplished		Satisfied
Not applicable		Very satisfied
No assistance		
Assistive device		
Adaptation		
Human assistance		

Levels of Accomplishment

Question 1 A

For each of the following life habits, indicate the way in which the person usually accomplishes it.

For this sub-question, please check **only one level of accomplishment** for each life habit in the grid. The following descriptions explain how each level of accomplishment is defined.

No difficulty

The person accomplishes the life habit easily or with little difficulty even if it requires an adaptation*, an assistive device*, or human assistance*, as applicable.

With difficulty

The person accomplishes the life habit with difficulty (discomfort, much effort, etc.) even if it requires an assistive device, adaptation, or human assistance, as applicable.

Accomplished by a proxy

The person cannot actively participate in the completion of the life habit due to disabilities that are too severe or obstacles that are too great. Since this habit is essential in the majority of cases (e.g., washing, dressing, moving around), it is **entirely accomplished by another person**.

Not accomplished

The person cannot accomplish the life habit because

- 1) The disabilities are too severe,
- 2) The obstacles are too great, or
- 3) There is a lack of assistance.

Since this is a **non-essential** life habit in the majority of cases (e.g., holding a job, going to the movies), it cannot be accomplished by someone else.

Not applicable

This life habit is not part of the person's daily activities because of

- 1) Never having done it or needed to do it (e.g., flown in a plane, planned a move, used public transport),
- 2) Age or gender (e.g., for a child respondent, planning a budget),
- 3) The person's environment (e.g., using a balcony or patio if he/she does not have one), or
- 4) A personal, family, or socio-cultural choice (e.g., taking a course if the person is not in school, taking part in artistic activities: music, painting, dance, etc.).

* Definitions of these terms can be found on the following page.

Type of Assistance Required

Question 1 B

For each of the following life habits, indicate which type of assistance is required.

You may check more than one box (under **Type of Assistance**) if they all correspond to the way the person accomplishes the life habit. Here are definitions of each type of assistance:

No assistance

The person accomplishes the life habit by himself/herself without an assistive device, adaptation, or human assistance. In this situation, no other box should be checked.

Assistive device

Any (nonhuman) support used to assist in the accomplishment of life habits such as a wheelchair, a visual aid, a hearing aid, a bath seat, medication, or other accessories. Generally speaking, **the person can take the assistive device with him/her**.

Adaptation

Any modification to the person's environment or task to facilitate the accomplishment of the life habit such as an access ramp, a wider doorway, lighting modifications, adaptation of the task, modification of the life habit, or the **time allotted to accomplish it** (having more time to complete it). Generally speaking, **the person cannot take physical adaptations with him/her**.

Human assistance

This is defined as any person who assists in the accomplishment of the life habits of the person, including family members, friends, medical personnel, etc. This includes physical assistance or supervision, verbal cues, encouragement, etc. This assistance must be necessary given **the person's disabilities or environmental obstacles**.

Note

The **Assistive device box** should only be checked if the accomplishment of the life habit by the person requires its use. (e.g., a wheelchair for moving around, a hearing aid for communicating).

Examples of the Accomplishment of Some Life Habits

Preparing a meal

If the person easily accomplishes this life habit, check the **No difficulty** box.

If it is difficult for the person to prepare meals, check the **With difficulty** box.

If the person does not actively participate in the accomplishment of the life habit "Preparing a meal" because of disabilities that are too severe or obstacles that are too great, check the **Accomplished by a proxy** box.

If the person cannot prepare a meal because of disabilities that are too severe or obstacles that are too great, check the **Not accomplished** box.

If the person is not usually responsible for preparing meals by personal choice (and not because of disabilities or obstacles) this life habit is not part of their daily activities and the **Not applicable** box should be checked.

If the person generally accomplishes this life habit alone, check the **No assistance** box. The life habit may be accomplished without assistance, even if you checked **With difficulty** on the accomplishment scale.

If the person uses special devices (tongs, orthotics, lid-opener, etc.) to prepare a meal, check the **Assistive device** box.

If the person requires more time to accomplish this life habit, check the **Adaptation** box.

If the person is helped by someone else either because of their disability or because the kitchen is not adapted for preparing a meal, check the **Human assistance** box.

No difficulty	With difficulty	Accomplished by a proxy	Not accomplished	Not applicable	No assistance	Assistive device	Adaptation	Human assistance	Very dissatisfied	Dissatisfied	More or less satisfied	Satisfied	Very satisfied
✓													
	✓												
		✓											
			✓										
				✓									
					✓								
						✓							
							✓						
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											✓		
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													✓

Examples of the Accomplishment of Some Life Habits

(continued)

Taking a bath or shower

If the person uses a shower seat to accomplish this life habit, check the **Assistive device** box. If the person requires help to accomplish this life habit, check the **Human Assistance** box as well. Similarly, if the person's bathroom is adapted, check the **Adaptation** box.

Entering and exiting your residence

Entering and moving around in recreation facilities in your neighborhood

If the person moves around in a wheelchair and wishes to gain access to a building but cannot (no access ramp or elevator), check the **Not accomplished** box. This signifies that the life habit is not accomplished due to large obstacles or a lack of assistance.

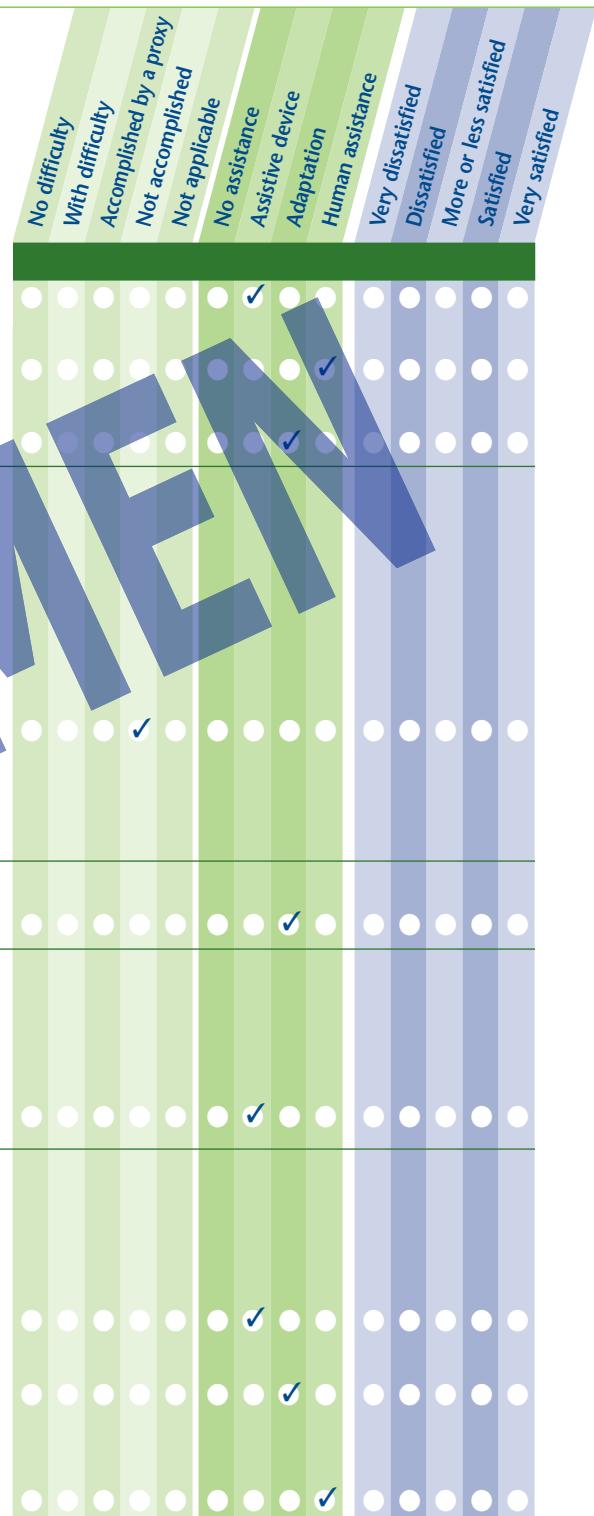
If the person uses an access ramp to accomplish these life habits, check the **Adaptation** box.

Using a telephone (at home or in a familiar place)

If the person uses a hearing aid to make the call, check the **Assistive device** box.

Using a computer

If the person uses a visual aid (telescopic system, copyholder, enlarged pointer, font enlargement software, etc.) check the **Assistive device** box. If the person requires more time to accomplish the task, check the **Adaptation** box. If the person needs verbal cues or encouragement to accomplish this life habit, which others of the same age perform alone, check the **Human assistance** box.



Examples of the Accomplishment of Some Life Habits

(continued)

Written communication (writing a letter, a message, etc.)

If the person takes more time to accomplish this life habit, check the **Adaptation** box.



For certain life habits, the **Accomplished by a proxy**, **Not accomplished** and **Not applicable** boxes should not be checked (e.g., falling asleep and sleeping properly, waking) because these life habits are essential for survival.

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Note

For certain life habits listed in the questionnaire, specific examples have been put in parentheses for information purposes only but do not include all the activities related to these life habits. Moreover, certain life habits may not correspond to the lifestyle or characteristics of the person. In such cases. Check the **Not applicable** box since there is no obligation to accomplish all life habits, only those that are relevant to the person.

Level of Satisfaction

Question 2

For each of the following life habits, indicate the level of satisfaction with the way it is accomplished.

This second question relates to the evaluation of the level of accomplishment of the person's life habits. Please answer freely based on your daily reality and life experience. The evaluation refers to the appraisal of the respondent identified on the following page (question #7). Where the respondent is the person himself/herself, this question concerns his/her personal appraisal of the accomplishment of the life habit.

The **More or less satisfied** level of satisfaction means that in certain situations or on certain days you are satisfied and on others you are dissatisfied with the level of accomplishment.

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Identification of the Person

1 Name

DD MM YYYY

2 Date of birth

/ /

3 Gender Female Male

DD MM YYYY

4 Date of evaluation

/ /

5 How the questionnaire was completed

- Self-administered
- Interview

6 The respondent is

- The person
- A significant other
- A professional (name and discipline)

7 The level of satisfaction is that of

- The person
- The significant other
- The professional

Questionnaire

**Answer the following two questions.
(Check the appropriate boxes.)**

- 1 For each of the following life habits, indicate
 - A. How the person generally accomplishes it, and
 - B. The type of assistance required to accomplish it.

- 2 For each of the following life habits, indicate the level of satisfaction with the way it is accomplished.

Note: Keep in mind that answers should reflect the person's usual way of carrying out life habits.

	Question 1					Question 2								
	A Level of Accomplishment (Check only 1)		B Type of Assistance (Check 1 or more, as required)			Level of Satisfaction (Check only 1)								
	<i>No difficulty</i>	<i>With difficulty</i>	<i>Accomplished by a proxy</i>	<i>Not accomplished</i>	<i>Not applicable</i>	<i>No assistance</i>	<i>Assistive device</i>	<i>Adaptation</i>	<i>Human assistance</i>	<i>Very dissatisfied</i>	<i>Dissatisfied</i>	<i>More or less satisfied</i>	<i>Satisfied</i>	<i>Very satisfied</i>
1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Answer the following two questions.
(Check the appropriate boxes.)**

- 1 For each of the following life habits, indicate

 - A. How the person generally accomplishes it, and
 - B. The type of assistance required to accomplish it.
 - 2 For each of the following life habits, indicate the level of satisfaction with the way it is accomplished.

Note: Keep in mind that answers should reflect the person's usual way of carrying out life habits.

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Comments

Use the following lines for general comments or remarks related specifically to one or more of the categories in terms of

- a) The level of accomplishment
- b) The type of assistance required
- c) The level of satisfaction

or for general comments pertaining to any other aspect of this questionnaire.

The form consists of a series of ten horizontal green lines spaced evenly down the page, intended for handwritten input. A large, tilted blue stamp with the word "SPECIMEN" in bold, sans-serif capital letters is overlaid on the top half of the lines, obscuring them.

Summary of Results

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