

Assessment of Life Habits

(LIFE-H for children 5-13, 1.0)

Adapted for children 5 to 13 years
Children Long Form



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SPECIMEN

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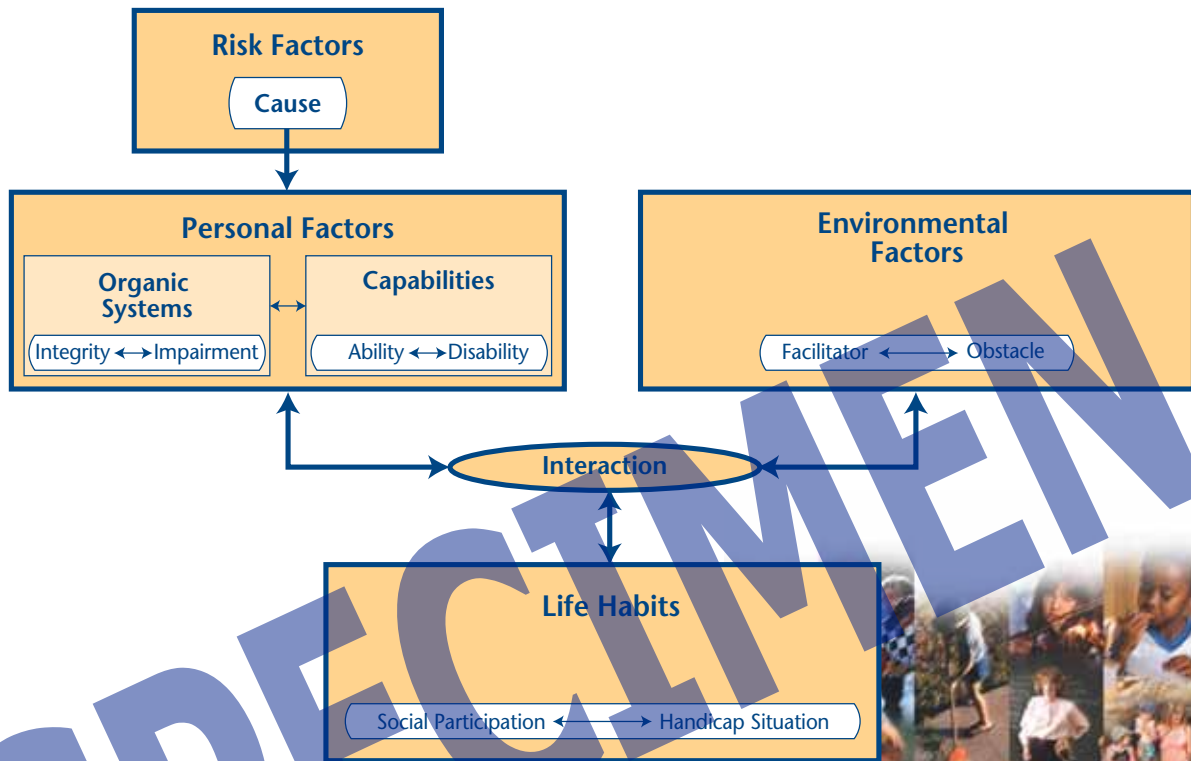
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Table of Contents

The Disability Creation Process: The Reference Model	4
Instructions for Respondents	5
Questions and Format of the Questionnaire	6
Levels of Accomplishment	7
Type of Assistance Required	8
Examples of the Accomplishment of Some Life Habits	9
Level of Satisfaction	12
Identification of the Young Person	13
Questionnaire	14
Comments	26
Summary of Results	27

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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 are characteristic of a young person in his or her environment (home, school, and neighborhood). It was designed for persons between the ages of 5 and 13.

Life Habits are *regular activities* (eating meals, communicating with others, moving around) and *social roles* (going to school, engaging in social relationships, participating in recreational activities) that allow young people to survive and achieve their potential in society throughout their lives. The accomplishment of life habits depends on the young person's age, expectations of his/her environment, and cultural factors.

You are asked to indicate how the young person generally accomplishes each life habit in day to day living, giving an average level of accomplishment. **The purpose of this questionnaire is to determine the way in which the young person accomplishes the life habits.**

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 young 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, for each of the young person's life habits, your level of satisfaction as the respondent (parent, professional, or the young person).

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 young person usually accomplishes it, and
B. The type of assistance required to accomplish it.
- 2** For each of the following life habits, indicate your level of satisfaction with the way the young person accomplishes it.

* This refers to human assistance in addition to the assistance a young person of the same age usually requires.

N.B. Keep in mind that answers should reflect the young 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	No assistance	Very dissatisfied
With difficulty	Assistive device	Dissatisfied
Accomplished by a proxy	Adaptation	More or less satisfied
Not accomplished	Additional human assistance*	Satisfied
Not applicable		Very satisfied

Levels of Accomplishment

Question 1 A

For each of the following life habits, indicate the way the young 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 young 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 young person accomplishes the life habit with difficulty (discomfort, much effort, etc.) even if it requires an adaptation, an assistive device, or human assistance, as applicable.

Accomplished by a proxy

The young 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 (washing, dressing, moving around, etc.), it is **entirely accomplished by another person**.

Not accomplished

The young 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.

As this is a **non-essential** life habit in the majority of cases (e.g., taking part in extra-curricular activities, going to the movies, etc.), it cannot be accomplished by someone else.

Not applicable

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

- 1) Never having done it or needed to do it (e.g., using public transit),
- 2) Age or gender (e.g., using menstrual hygiene products),
- 3) The young person's environment (e.g., using a balcony or patio if the family does not have one), or
- 4) A personal, family, or socio-cultural choice (e.g., 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 young person accomplishes the life habit. Here are definitions of each type of assistance:

No assistance

The young 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, visual aid, hearing aid, bath seat, medication, or other accessories. Generally speaking, **the young person can take the assistive device with him/her.**

Adaptation

Any modification to the young 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 young person cannot take physical adaptations with him/her.**

Additional human assistance

This is assistance required because of the young person's disabilities or obstacles in the environment and is in addition to the assistance required because of the person's age. It is defined as any individual who assists the young person in the accomplishment of life habits, including parents**, friends, staff members, etc. This includes physical assistance, supervision, verbal instruction, encouragement, etc. If the young person requires no assistance over and above the assistance required by a person of the same age without disabilities, do not check the **Additional human assistance** box.

* Note 1

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

** Note 2

The term "parents" includes all people who are legally responsible for the young person.

Examples of the Accomplishment of Some Life Habits

Taking part in meal preparation

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

If it is difficult for the young person to take part in preparing meals, check the **With difficulty** box.

If the young person does not actively participate in this life habit because of disabilities that are too severe or obstacles that are too great and another person does it for the young person, check the **Accomplished by a proxy** box.

If the young person cannot take part in meal preparation because of disabilities that are too severe or obstacles that are too great, check the **Not accomplished** box.

If the young person is not in the habit of taking part in meal preparation by choice and not because of disability or obstacles, then the life habit is not part of the young person's daily activities and you should check the **Not applicable** box.

If the young person does not need assistance to accomplish this life habit, check the **No assistance** box. It is possible that the young person requires no assistance even if the **With difficulty** box has been checked. If the young person has to use adapted utensils to take part in meal preparation, check the **Assistive device** box.

If the young person uses special devices (tongs, orthotics, lid-opener, etc.) for taking part in meal preparation, check the **Assistive device** box.

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

	No difficulty	With difficulty	Accomplished by a proxy	Not accomplished	Not applicable	No assistance	Assistive device	Adaptation	Additional human assistance*	Very dissatisfied	Dissatisfied	More or less satisfied	Satisfied	Very satisfied
If the young person easily accomplishes this life habit, check the No difficulty box.	<input checked="" 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"/>
If it is difficult for the young person to take part in preparing meals, check the With difficulty box.	<input type="checkbox"/>	<input checked="" 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"/>
If the young person does not actively participate in this life habit because of disabilities that are too severe or obstacles that are too great and another person does it for the young person, check the Accomplished by a proxy box.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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"/>
If the young person cannot take part in meal preparation because of disabilities that are too severe or obstacles that are too great, check the Not accomplished box.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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"/>
If the young person is not in the habit of taking part in meal preparation by choice and not because of disability or obstacles, then the life habit is not part of the young person's daily activities and you should check the Not applicable box.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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"/>
If the young person does not need assistance to accomplish this life habit, check the No assistance box. It is possible that the young person requires no assistance even if the With difficulty box has been checked. If the young person has to use adapted utensils to take part in meal preparation, check the Assistive device box.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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"/>
If the young person uses special devices (tongs, orthotics, lid-opener, etc.) for taking part in meal preparation, check the Assistive device box.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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"/>
If the young person needs more time to accomplish this life habit, check the Adaptation box.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Examples of the Accomplishment of Some Life Habits (continued)

Taking part in meal preparation (continued)

If the young person needs someone else's assistance to take part in meal preparation because of his or her disability or because the kitchen has not been adapted, check the **Additional human assistance** box. If the young person needs assistance for this life habit only because of his or her age, do not check the **Additional human assistance** box.

Getting to, entering and moving about in local recreational facilities*

If the young person uses an access ramp for this life habit, mark the **Adaptation** box.

Using a telephone (at home or in familiar surroundings)

If the young person uses an auditory device to use the phone, check the **Assistive device** box.

No difficulty	With difficulty	Accomplished by a proxy	Not accomplished	Not applicable	No assistance	Assistive device	Adaptation	Additional human assistance*	Very dissatisfied	Dissatisfied	More or less satisfied	Satisfied	Very satisfied
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* Note

If the young person uses a wheelchair and would like to go to a recreational facility that is not wheelchair accessible (no ramp or elevator (lift), etc.), check the **Not accomplished** box. This means that the life habit is not accomplished because of obstacles that are too great or because of a lack of assistance. However, if going to recreational facilities is not required (no interest, no need, etc.), check the **Not applicable** box.

Examples of the Accomplishment of Some Life Habits (continued)

Using a computer

If the young person uses a visual aid (telescopic system, reading support, larger pointer, character enlargement software, etc.), check the **Assistive device** box. If the young person needs more time to accomplish this activity, check the **Adaptation** box. If the young person needs verbal instructions or encouragement not required by a person without disabilities of the same age, check the **Additional human assistance** box.

Communicating in writing (writing words, sentences, a short text, etc.)

If the young person needs 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 cannot be checked (e.g., sleeping) because they are essential for the young person's survival.

Examples are given in parentheses for all life habits (p. 9 to 11). However, the examples are not exhaustive. Moreover, there is no need to accomplish all the life habits, only those that are relevant for the young person.

No difficulty	With difficulty	Accomplished by a proxy	Not accomplished	Not applicable	No assistance	Assistive device	Adaptation	Additional human assistance*	Very dissatisfied	Dissatisfied	More or less satisfied	Satisfied	Very satisfied
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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"/>	<input type="checkbox"/>	<input checked="" 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"/>	<input type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Level of Satisfaction

Question 2

For each of the following life habits, indicate your level of satisfaction with the way the young person accomplishes it.

This second question relates to your personal evaluation of the young person's level of accomplishment of life habits. Please answer freely based on your daily life and personal experience. If the respondent is the young person himself or herself, the question relates to the young person's own evaluation of his or her level of accomplishment of life habits.

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.

Each life habits satisfaction level is only an indicator; mainly, to decide the relevance of an intervention on the modification of a life habit.

Presently, this tool does not include an integration modality to implement the satisfaction level into the normalised results of the accomplishment of life habits.

Identification of the Young Person

1 Name

2 Date of birth DD MM YYYY
/ /

3 Gender Female Male

4 Date of evaluation DD MM YYYY
/ /

5 How the questionnaire was completed

- Self-administered
- Interview

6 The respondent is

- The young person
- A parent
- A professional (name and discipline)

7 The level of satisfaction is that of

- The young person
- The parent
- The professional

Questionnaire

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

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

2 For each of the following life habits, indicate
your level of satisfaction with the way the
young person accomplishes it.

* This refers to human assistance in addition to the assistance a young person of the same age usually requires.

N.B. Keep in mind that answers should reflect the young 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	With difficulty	Accomplished by a proxy	Not accomplished	Not applicable	No assistance	Assistive device	Adaptation	Additional human assistance*	Very dissatisfied	Dissatisfied	More or less satisfied	Satisfied	Very satisfied		
Nutrition																
Mentioning preferences, tastes or needs in relation to grocery shopping	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1.1.1	<input type="checkbox"/>
Selecting appropriate food for snacks and meals, according to taste or particular needs (quantity, type of food, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1.1.2	<input type="checkbox"/>
Meal Preparation																
Preparing a snack, breakfast, a sandwich	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1.2.1	<input type="checkbox"/>
Taking part in the preparation of a meal (first course, main course, dessert, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1.2.2	<input type="checkbox"/>
Following a simple recipe	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1.2.3	<input type="checkbox"/>
Using a stove (cooking elements)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1.2.4	<input type="checkbox"/>
Using an oven	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1.2.5	<input type="checkbox"/>
Using a microwave oven	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1.2.6	<input type="checkbox"/>
Using a refrigerator (including freezer)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1.2.7	<input type="checkbox"/>
Using other electric kitchen appliances (toaster, can opener, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1.2.8	<input type="checkbox"/>
Setting and clearing the table	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1.2.9	<input type="checkbox"/>
Serving oneself or helping to serve the food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1.2.10	<input type="checkbox"/>
Taking part in washing and drying the dishes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1.2.11	<input type="checkbox"/>
Taking part in loading and unloading the dishwasher	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1.2.12	<input type="checkbox"/>
Eating Meals																
Conforming to table manners according to the context (eating tidily, using proper etiquette, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1.3.1	<input type="checkbox"/>
Using a glass or cup	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1.3.2	<input type="checkbox"/>

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

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

2 For each of the following life habits, indicate your level of satisfaction with the way the young person accomplishes it.

* This refers to human assistance in addition to the assistance a young person of the same age usually requires.

N.B. Keep in mind that answers should reflect the young 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	With difficulty	Accomplished by a proxy	Not accomplished	Not applicable	No assistance	Assistive device	Adaptation	Additional human assistance*	Very dissatisfied	Dissatisfied	More or less satisfied	Satisfied	Very satisfied		
Eating with utensils or hands (depending on the food)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1.3.3	<input type="checkbox"/>
Cutting up food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1.3.4	<input type="checkbox"/>
Eating at a restaurant (table service)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1.3.5	<input type="checkbox"/>
Eating at a restaurant (fast food)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1.3.6	<input type="checkbox"/>
Using a vending machine	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1.3.7	<input type="checkbox"/>
Rest																
Getting in and out of bed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2.1.1	<input type="checkbox"/>
Changing positions in bed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2.1.2	<input type="checkbox"/>
Going to sleep and sleeping properly (comfort, duration, continuity, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2.1.3	<input type="checkbox"/>
Waking up	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2.1.4	<input type="checkbox"/>
Fitness																
Engaging in indoor physical activities to maintain or improve health or fitness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2.2.1	<input type="checkbox"/>
Engaging in outdoor physical activities to maintain or improve health or fitness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2.2.2	<input type="checkbox"/>
Mental Well-being																
Carrying out relaxation or leisure activities (listening to music or a story, reading or looking at a book, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2.3.1	<input type="checkbox"/>
Carrying out activities that require attention or concentration (memory or association games, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2.3.2	<input type="checkbox"/>
Personal Care																
Taking a bath or shower	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	3.1.1	<input type="checkbox"/>
Washing and towelling off	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	3.1.2	<input type="checkbox"/>
Washing and drying hands	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	3.1.3	<input type="checkbox"/>
Washing and drying face	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	3.1.4	<input type="checkbox"/>
Washing hair	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	3.1.5	<input type="checkbox"/>
Drying hair	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	3.1.6	<input type="checkbox"/>

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

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

2 For each of the following life habits, indicate your level of satisfaction with the way the young person accomplishes it.

* This refers to human assistance in addition to the assistance a young person of the same age usually requires.

N.B. Keep in mind that answers should reflect the young 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	With difficulty	Accomplished by a proxy	Not accomplished	Not applicable	No assistance	Assistive device	Adaptation	Additional human assistance*	Very dissatisfied	Dissatisfied	More or less satisfied	Satisfied	Very satisfied
Combing or brushing hair	<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"/>
Brushing teeth	<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"/>
Shaving, defuzzing	<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"/>
Blowing nose	<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"/>
Cleaning and cutting nails	<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"/>
Putting on make-up	<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"/>
Taking part in maintenance of orthoses, prostheses or other devices (hearing aid, wheelchair, eyeglasses, etc.)	<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"/>
Elimination														
Undressing to use the toilet and re-dressing	<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"/>
Using the toilet at home (including transfer)	<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"/>
Using the toilet elsewhere than at home	<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"/>
Using equipment for urinating (catheter, diaper, etc.)	<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"/>
Using equipment for eliminating the contents of the bowel	<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"/>
Taking part in maintaining the material required for urinating and bowel elimination	<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"/>
Using feminine hygiene products	<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"/>
Dressing														
Dressing and undressing upper half of body (including buttons, zippers, etc.)	<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"/>
Dressing and undressing lower half of body (including buttons, zippers, etc.)	<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"/>
Putting on and taking off shoes	<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"/>
Choosing appropriate clothes (according to weather, type of activity)	<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"/>
Changing clothes when they are soiled or dirty	<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"/>
Getting clothes out of dresser drawers	<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 young person usually accomplishes it,
and
B. The type of assistance required to accomplish it.

2 For each of the following life habits, indicate
your level of satisfaction with the way the
young person accomplishes it.

* This refers to human assistance in addition to the assistance a young person of the same age usually requires.

N.B. Keep in mind that answers should reflect the young 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	With difficulty	Accomplished by a proxy	Not accomplished	Not applicable	No assistance	Assistive device	Adaptation	Additional human assistance*	Very dissatisfied	Dissatisfied	More or less satisfied	Satisfied	Very satisfied		
Getting clothes out of the closet or locker	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	3.3.7	<input type="checkbox"/>
Putting on and taking off jewellery	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	3.3.8	<input type="checkbox"/>
Putting on and taking off orthoses and prostheses (tibial orthosis, hearing aid, eyeglasses, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	3.3.9	<input type="checkbox"/>
Health Care																
Recognizing and reporting health problems (injury, acne, allergy, stress, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	3.4.1	<input type="checkbox"/>
Taking part in treating health problems (bandages, medication, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	3.4.2	<input type="checkbox"/>
Taking part in following up therapeutic instructions (diet, exercises to be done at home, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	3.4.3	<input type="checkbox"/>
Asking for help in an emergency situation (adult, neighbour, 911, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	3.4.4	<input type="checkbox"/>
Using the services of a medical clinic, a hospital	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	3.4.5	<input type="checkbox"/>
Using the services of a rehabilitation centre	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	3.4.6	<input type="checkbox"/>
Oral and Sign Communication																
Expressing needs at home or with close family members	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	4.1.1	<input type="checkbox"/>
Expressing needs outside the home or with people other than close family members	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	4.1.2	<input type="checkbox"/>
Maintaining a conversation with an adult at home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	4.1.3	<input type="checkbox"/>
Maintaining a conversation with a young person at home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	4.1.4	<input type="checkbox"/>
Maintaining a conversation with an adult in the community	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	4.1.5	<input type="checkbox"/>
Maintaining a conversation with a young person in the community	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	4.1.6	<input type="checkbox"/>
Maintaining a conversation with a group of people at home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	4.1.7	<input type="checkbox"/>
Maintaining a conversation with a small group of young people in the community	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	4.1.8	<input type="checkbox"/>

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

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B. The type of assistance required to accomplish it.

2 For each of the following life habits, indicate your level of satisfaction with the way the young person accomplishes it.

* This refers to human assistance in addition to the assistance a young person of the same age usually requires.

N.B. Keep in mind that answers should reflect the young 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	With difficulty	Accomplished by a proxy	Not accomplished	Not applicable	No assistance	Assistive device	Adaptation	Additional human assistance*	Very dissatisfied	Dissatisfied	More or less satisfied	Satisfied	Very satisfied
Maintaining a conversation with a larger group of young people in the community (classroom, playground, etc.)	<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"/>
Receiving and understanding oral instructions or information at home	<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"/>
Receiving and understanding oral instructions or information in a small group of people within the community	<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"/>
Receiving and understanding oral instructions or information in a larger group of people within the community (classroom, playground, etc.)	<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"/>
Written Communication														
Communicating through writing (writing words, sentences, a short text, etc.)	<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"/>
Reading and understanding written information (words, books, pictographs, written instructions, signs, etc.)	<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"/>
Reading words, short texts, books, magazines, etc.	<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"/>
Telecommunication														
Using a telephone (at home or in a familiar setting)	<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"/>
Using a telephone elsewhere than at home (mobile, public phone, etc.)	<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"/>
Using a television set	<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"/>
Using a radio, a Discman	<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"/>
Using a computer	<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"/>
Using a video or sound system	<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"/>
Home-Centered Activities														
Taking part in laying out the room	<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 young person usually accomplishes it, and
B. The type of assistance required to accomplish it.

2 For each of the following life habits, indicate your level of satisfaction with the way the young person accomplishes it.

* This refers to human assistance in addition to the assistance a young person of the same age usually requires.

N.B. Keep in mind that answers should reflect the young 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	With difficulty	Accomplished by a proxy	Not accomplished	Not applicable	No assistance	Assistive device	Adaptation	Additional human assistance*	Very dissatisfied	Dissatisfied	More or less satisfied	Satisfied	Very satisfied

Home Maintenance

Taking part in cleaning up damage	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5.2.1	<input type="checkbox"/>
Taking part in sweeping or vacuuming inside the home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5.2.2	<input type="checkbox"/>
Taking part in cleaning furniture, counters, accessories (dusting, washing, wiping, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5.2.3	<input type="checkbox"/>
Taking part in washing clothes, folding and putting away laundry	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5.2.4	<input type="checkbox"/>
Making a bed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5.2.5	<input type="checkbox"/>
Putting away personal effects (games, books, school materials, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5.2.6	<input type="checkbox"/>
Taking part in emptying waste-baskets and taking out the garbage	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5.2.7	<input type="checkbox"/>
Taking part in lawn care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5.2.8	<input type="checkbox"/>
Taking part in snow removal	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5.2.9	<input type="checkbox"/>
Picking up mail at letter box	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5.2.10	<input type="checkbox"/>
Using light tools (hammer, screwdriver, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5.2.11	<input type="checkbox"/>

Furniture and Other Domestic Equipment

Entering and exiting the home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5.3.1	<input type="checkbox"/>
Moving from one room to another in the home (on same the floor)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5.3.2	<input type="checkbox"/>
Moving around in the bathroom	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5.3.3	<input type="checkbox"/>
Moving around other rooms in the home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5.3.4	<input type="checkbox"/>
Moving from one floor to another in the home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5.3.5	<input type="checkbox"/>
Opening and closing doors in the home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5.3.6	<input type="checkbox"/>
Opening and closing windows in the home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5.3.7	<input type="checkbox"/>
Using different lights in the home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5.3.8	<input type="checkbox"/>
Using storage space (cupboards, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5.3.9	<input type="checkbox"/>
Using furniture (chair, armchair, table, taps, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5.3.10	<input type="checkbox"/>

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

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B. The type of assistance required to accomplish it.

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* This refers to human assistance in addition to the assistance a young person of the same age usually requires.

N.B. Keep in mind that answers should reflect the young 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	With difficulty	Accomplished by a proxy	Not accomplished	Not applicable	No assistance	Assistive device	Adaptation	Additional human assistance*	Very dissatisfied	Dissatisfied	More or less satisfied	Satisfied	Very satisfied
Using balcony or patio	<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"/>	5.3.11 <input type="checkbox"/>
Getting from the street to the entrance of the home	<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"/>	5.3.12 <input type="checkbox"/>
Moving around the grounds of the home during the summer	<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"/>	5.3.13 <input type="checkbox"/>
Moving around the grounds of the home during the winter	<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"/>	5.3.14 <input type="checkbox"/>
Using equipment outside the home (patio furniture, swimming pool, play unit, etc.)	<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"/>	5.3.15 <input type="checkbox"/>
Using safety systems and equipment (alarm system, etc.)	<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"/>	5.3.16 <input type="checkbox"/>
Short-Distance Movement in the Community														
Getting around on the sidewalk	<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"/>	6.1.1 <input type="checkbox"/>
Getting around on the street	<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"/>	6.1.2 <input type="checkbox"/>
Crossing an intersection with a traffic light	<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"/>	6.1.3 <input type="checkbox"/>
Crossing an intersection without a traffic light	<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"/>	6.1.4 <input type="checkbox"/>
Mobility on uneven surfaces (grass, gravel, sand, etc.)	<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"/>	6.1.5 <input type="checkbox"/>
Getting around on slippery or snowy surfaces (ice, wet surface, snow, etc.)	<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"/>	6.1.6 <input type="checkbox"/>
Using Transportation														
Walking as means of transportation (a wheelchair is considered an assistive device)	<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"/>	6.2.1 <input type="checkbox"/>
Being a passenger in a vehicle (getting in and out, fastening seat belt, etc.)	<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"/>	6.2.2 <input type="checkbox"/>
Using public transportation (adapted transportation is considered an Adaptation)	<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"/>	6.2.3 <input type="checkbox"/>
Using school transportation (adapted school transportation is considered an Adaptation)	<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"/>	6.2.4 <input type="checkbox"/>
Taking a taxi (adapted taxis are considered an Adaptation)	<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"/>	6.2.5 <input type="checkbox"/>
Riding a bicycle as means of transportation	<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"/>	6.2.6 <input type="checkbox"/>

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

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A. How the young person usually accomplishes it, and
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2 For each of the following life habits, indicate your level of satisfaction with the way the young person accomplishes it.

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N.B. Keep in mind that answers should reflect the young 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	With difficulty	Accomplished by a proxy	Not accomplished	Not applicable	No assistance	Assistive device	Adaptation	Additional human assistance*	Very dissatisfied	Dissatisfied	More or less satisfied	Satisfied	Very satisfied
Taking a train	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Taking a plane	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Taking a boat (ferry)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Using long-distance bus services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Financial Responsibilities														
Using different coins and bills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Recognising the value of money	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Managing pocket money (savings, small purchases, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Using a bank card (debit card, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Shopping, running errands (choosing and paying for merchandise, access to stores, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Civil Responsibilities														
Respecting other people's rights (rules of conduct, regulations, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Respecting other people's property (toys, personal effects, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Standing up for rights (taking one's place, being assertive, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Respecting own property (toys, personal effects, school materials, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Following safety measures (awareness of danger, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Family Responsibilities														
Taking charge of himself or herself (well-being, remaining alone for short periods, requesting assistance, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Helping out parents (doing them a service, taking their needs into account, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Accepting parents' help	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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

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

* This refers to human assistance in addition to the assistance a young person of the same age usually requires.

N.B. Keep in mind that answers should reflect the young person's usual way of carrying out life habits.

	Question 1							Question 2				ID	Form			
	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	With difficulty	Accomplished by a proxy	Not accomplished	Not applicable	No assistance	Assistive device	Adaptation	Additional human assistance*	Very dissatisfied	Dissatisfied	More or less satisfied	Satisfied	Very satisfied		
Helping out other family members or relatives (doing them a service, taking their needs into account, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	7.3.4	<input type="checkbox"/>
Helping to take care of pets	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	7.3.5	<input type="checkbox"/>
Interpersonal Relationships																
Maintaining a loving relationship with parents	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	8.1.1	<input type="checkbox"/>
Maintaining a loving relationship with brothers and sisters	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	8.1.2	<input type="checkbox"/>
Maintaining a loving relationship with other relatives	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	8.1.3	<input type="checkbox"/>
Creating or maintaining friendships	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	8.1.4	<input type="checkbox"/>
Being involved or participating in sexual awakening activities (information, discussions, physical contact, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	8.1.5	<input type="checkbox"/>
Social Relationships																
Participating in social activities with parents	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	8.2.1	<input type="checkbox"/>
Participating in social activities with other members of the family or relatives	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	8.2.2	<input type="checkbox"/>
Maintaining social ties with other young people (school, recreational activities, neighbourhood, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	8.2.3	<input type="checkbox"/>
Maintaining social ties with other adults (teachers, instructors, neighbours, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	8.2.4	<input type="checkbox"/>
Respecting hierarchical relationships at school, in recreational activities (teachers, principal, instructors, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	8.2.5	<input type="checkbox"/>
Community Life																
Participating in activities of community groups, student associations, etc. (scouts, class committees, various associations, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	9.1.1	<input type="checkbox"/>
Participating in religious or spiritual activities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	9.1.2	<input type="checkbox"/>

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

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

* This refers to human assistance in addition to the assistance a young person of the same age usually requires.

N.B. Keep in mind that answers should reflect the young 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	With difficulty	Accomplished by a proxy	Not accomplished	Not applicable	No assistance	Assistive device	Adaptation	Additional human assistance*	Very dissatisfied	Dissatisfied	More or less satisfied	Satisfied	Very satisfied

Education

Getting to school (including carrying a schoolbag)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	10.1	<input type="checkbox"/>
Entering and moving around in the school and schoolyard (including carrying a schoolbag)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	10.2	<input type="checkbox"/>
Taking part in classes or learning activities at school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	10.3	<input type="checkbox"/>
Taking specialized classes (physical education, music, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	10.4	<input type="checkbox"/>
Taking notes (noting down lessons and homework, class notes)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	10.5	<input type="checkbox"/>
Using school materials (books, exercise books, diary, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	10.6	<input type="checkbox"/>
Doing practical work at school (science, computer workshop, art, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	10.7	<input type="checkbox"/>
Taking part in group workshops, teamwork	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	10.8	<input type="checkbox"/>
Doing tests, exams	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	10.9	<input type="checkbox"/>
Taking part in day nursery activities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	10.10	<input type="checkbox"/>
Using school facilities (cafeteria, schoolyard, gymnasium, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	10.11	<input type="checkbox"/>
Using student services (special education, remedial education, psychology, guidance counselling, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	10.12	<input type="checkbox"/>
Doing homework	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	10.13	<input type="checkbox"/>
Taking part in school activities (extracurricular, outings, field days, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	10.14	<input type="checkbox"/>

Work

Seeking a small job	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	11.1.1	<input type="checkbox"/>
Performing small paid or unpaid jobs (babysitting, delivering newspapers, mowing lawns, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	11.1.2	<input type="checkbox"/>
Doing volunteer work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	11.1.3	<input type="checkbox"/>

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

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

* This refers to human assistance in addition to the assistance a young person of the same age usually requires.

N.B. Keep in mind that answers should reflect the young 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	With difficulty	Accomplished by a proxy	Not accomplished	Not applicable	No assistance	Assistive device	Adaptation	Additional human assistance*	Very dissatisfied	Dissatisfied	More or less satisfied	Satisfied	Very satisfied

Recreation

Choosing sports activities and games	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12.1.1 <input type="checkbox"/>
Taking part in planning sports activities and games (schedule and equipment, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12.1.2 <input type="checkbox"/>
Practicing individual physical or sports activities indoors (swimming, skating, gymnastics, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12.1.3 <input type="checkbox"/>
Practicing individual physical or sports activities outdoors (swimming, inline skating, skiing, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12.1.4 <input type="checkbox"/>
Playing individual games indoors (Lego, Barbie dolls, video games, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12.1.5 <input type="checkbox"/>
Playing individual games outdoors (sandbox, swing, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12.1.6 <input type="checkbox"/>
Practicing group physical or sports activities indoors (basketball, volleyball, racket sports, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12.1.7 <input type="checkbox"/>
Practicing group physical or sports activities outdoors (soccer, baseball, hockey, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12.1.8 <input type="checkbox"/>
Playing parlour games or group games indoors (role-playing, card games, chess, Dungeons and Dragons, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12.1.9 <input type="checkbox"/>
Playing group games outdoors (ball, hide and seek, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12.1.10 <input type="checkbox"/>
Taking part in outdoor activities (camping, summer camp, hiking, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12.1.11 <input type="checkbox"/>
Attending sporting events (hockey, soccer, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12.1.12 <input type="checkbox"/>
Using local sports facilities (swimming pool, gymnasium, parks, playgrounds, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12.1.13 <input type="checkbox"/>

Arts and Culture

Choosing artistic or cultural activities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12.2.1 <input type="checkbox"/>
Taking part in planning artistic or cultural activities (schedule, materials and equipment, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12.2.2 <input type="checkbox"/>
Practicing artistic activities (music, painting, dance, theatre, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12.2.3 <input type="checkbox"/>

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

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

2 For each of the following life habits, indicate
your level of satisfaction with the way the
young person accomplishes it.

* This refers to human assistance in addition to the assistance
a young person of the same age usually requires.

N.B. Keep in mind that answers should reflect the young 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	With difficulty	Accomplished by a proxy	Not accomplished	Not applicable	No assistance	Assistive device	Adaptation	Additional human assistance*	Very dissatisfied	Dissatisfied	More or less satisfied	Satisfied	Very satisfied		
Going to a movie, attending a show	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12.2.4	<input type="checkbox"/>
Visiting an exhibition (museum, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12.2.5	<input type="checkbox"/>
Practicing arts and crafts or other activities (pastime, do-it-yourself activities, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12.2.6	<input type="checkbox"/>
Getting to local recreational facilities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12.2.7	<input type="checkbox"/>
Entering and moving around in local recreational facilities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12.2.8	<input type="checkbox"/>
Using local recreational facilities (library, municipal recreation centre, recreation club, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12.2.9	<input type="checkbox"/>
Taking part in tourist activities (visiting historic or natural sites)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12.2.10	<input type="checkbox"/>
Taking part in a trip and its preparation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12.2.11	<input type="checkbox"/>

SPECIMEN

Comments

Use the following lines for general comments or remarks related specifically to one or more of the following topics regarding the young person:

- 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.

SPECIMEN

Summary of Results

SPECIMEN

Life Habits Accomplishment Scale

Score	Difficulty Level	Assistance Type
9	No difficulty	No assistance
8	No difficulty	Assistive device (or adaptation)
7	With difficulty	No assistance
6	With difficulty	Assistive device (or adaptation)
5	No difficulty	Human assistance
4	No difficulty	Assistive device (or adaptation) and human assistance
3	With difficulty	Human assistance
2	With difficulty	Assistive device (or adaptation) and human assistance
1	Accomplished by a proxy	
0	Not accomplished	
N/A	Not applicable	

Formula: Calculation of the Accomplishment Level (Weighted Score)

$$\left(\sum \text{Scores} \times 10 \right) \div \left(\text{Number of Applicable Life Habits} \times 9 \right)$$

Example: Calculation of the Accomplishment Level
(LIFE-H Adapted for children 5 to 13 years, Children Long Form 1.0)

Score Calculation			Example		
Categories	Number of Applicable Life Habits	Score (range)	Number of Applicable Life Habits	Raw Score	Weighted Score (0-10)
Nutrition	21	0-189	21	105	5,6
Fitness	8	0-72	6	36	6,7
Personal Care	35	0-315	24	74	3,4
Communication	21	0-189	17	120	7,8
Housing	28	0-252	20	85	4,7
Mobility	16	0-144	14	58	4,6
Responsibilities	15	0-135	11	25	2,5
Interpersonal Relationships	10	0-90	9	55	6,8
Community Life	2	0-18	2	4	2,2
Education	14	0-126	12	49	4,5
Employment	3	0-27	1	3	3,3
Recreation	24	0-216	18	91	5,6
Total	197	0-1773	155	705	5,1/10

Life Habits Category Accomplishment Level

