

About My Child – Information Sheet

What is About My Child?

About My Child is a tool that asks a family to describe their child’s strengths and share their concerns about their child’s functioning and health. It is based on the World Health Organization’s International Classification of Functioning, Disability, and Health (ICF) framework, and incorporates family-centred, strength-based, functional, developmental, and life-course principles and approaches. *About My Child’s* psychometric qualities have been established (Reitzma et al., 2016; Williams et al., 2018).

Who is About My Child appropriate for?

- Can be used with parents of all children regardless of diagnoses
- Appropriate for children of all ages (birth to 18), however, versions for babies and youth self-report are being developed

Who completes About My Child?

- Responses are from the caregiver’s perspective
- Can be self-completed by the caregiver
 - Paper and pencil (fillable, accessible pdf available soon)
 - Online is possible, but not yet developed
 - Average completion time is 10 minutes
- Can be interview administered
 - No specific qualifications required for administration – recommended skills and knowledge are included in Figure 3
 - Can be used in a conversational manner, questions can be asked in any order
 - Words can be explained or stated in ways that are understood by the caregiver
 - Average completion time is 20-30 minutes

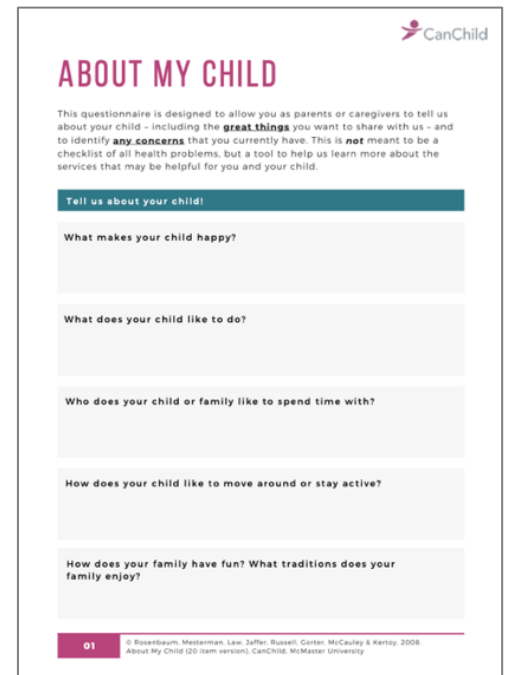


Figure 1: About My Child (first page)

What type of questions are asked?

The first section has five questions for families to share their child’s story (see Figure 1). These questions are based on the F-words for Child Development (www.canchild.ca/f-words).

The second section has 20 questions about the child’s functioning in everyday activities, in real-life situations. The caregiver indicates whether they are ‘concerned about’ their child’s functioning by choosing yes/no. If they respond ‘yes’, they rate the impact on their child’s ability to participate in everyday activities. There is space to provide additional information after each question and/or at the end of the tool.

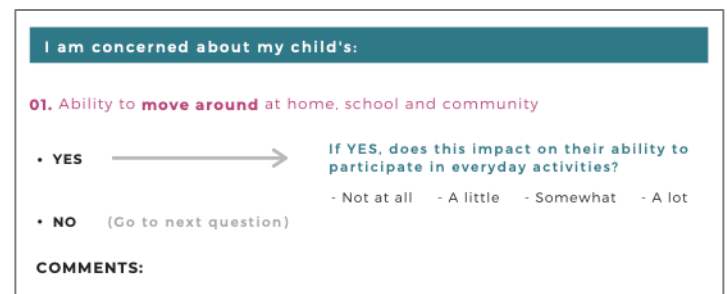


Figure 2: About My Child (sample question)

How is About My Child scored?

About My Child can be scored to describe two types of ‘complexity’:

- | | |
|---|---|
| <p>(i) The number of concerns</p> <ul style="list-style-type: none"> • Add up the number of ‘yes’ answers • The range for this score is 0-20 | <p>(ii) The impact of concerns on participation</p> <ul style="list-style-type: none"> • Multiply the ‘yes’ responses by the ‘participation impact’ rating (1 = not at all...4 = a lot) • The range for this score is 0-80 |
|---|---|

Single or multi-centre data can be used to inform service delivery. For example, if many families indicate they have concerns about their child’s sleep, practices could be reviewed and shared within and among centres, educational materials could be developed, and group sessions offered.

How will About My Child be used in Ontario?

- *About My Child* has been chosen for use as a common tool for exploratory conversations at Ontario SmartStart Hubs. The ways in which *About My Child* will be used will be specific to local settings and resources.
- Areas of concern identified by parents will be used to help direct families to services available in CTCs and/or the broader community.
- *About My Child* is intended to allow sharing of information with consent so families do not have to repeat their stories.
- CanChild’s *Access and Equity Inquiry* can be used as a companion document to support exploration of factors known to present barriers to accessing services. The *Access and Equity Inquiry* is available free of charge on the CanChild website: <https://canchild.ca/en/resources/350-access-and-equity-inquiry>
- While there are no specific qualifications required for administering *About My Child*, people who are using it for exploratory conversations should have the knowledge and skills in Figure 3.

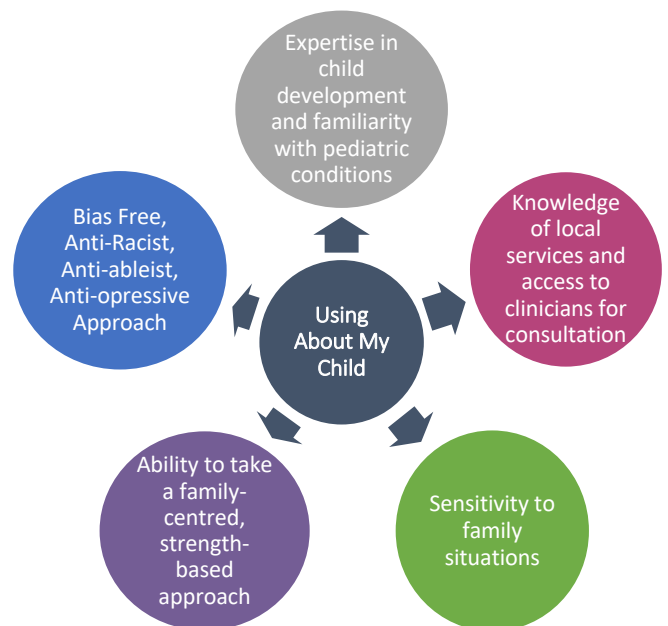


Figure 3: Knowledge and Skills for Interview Administration of About My Child

References

- CanChild Access and Equity document <https://canchild.ca/en/resources/350-access-and-equity-inquiry>
- CanChild F-words Knowledge Hub: <https://www.canchild.ca/en/research-in-practice/f-words-in-childhood-disability>. Accessed 19-04-2022.
- Ministry of Children, Community and Social Services. SmartStart Hubs – connecting families with child development services – Policy and Practice Guidelines. Early Intervention and Special Needs Modernization, 2022.
- Rietzema AM, Lach LM, Rosenbaum P, Nicholas D. About My Child: measuring ‘Complexity in neurodisability. Evidence of reliability and validity. Child: care, health and development. 2016;42(3):402-409. Doi:10.1111/cch.1236
- Williams U, Rosenbaum P, Gorter JW, McCauley D, Gulko R. Psychometric properties and parental reported utility of the 19-item ‘About My Child’ (AMC-19) measure. BMC Pediatrics. 2018;18:174. Doi.org/10.1186/s12887-018-1147-2.

ABOUT MY CHILD

This questionnaire is designed to allow you as parents or caregivers to tell us about your child – including the **great things** you want to share with us – and to identify **any concerns** that you currently have. This is **not** meant to be a checklist of all health problems, but a tool to help us learn more about the services that may be helpful for you and your child.

Tell us about your child!

What makes your child happy?

What does your child like to do?

Who does your child or family like to spend time with?


How does your child like to move around or stay active?

How does your family have fun? What traditions does your family enjoy?

Please answer every question by checking “**yes**” or “**no**”. If yes, then please indicate **to what extent** it impacts your child’s ability to participate in everyday activities. There are 20 items in this questionnaire.


I am concerned about my child's:

01. Ability to **move around** at home, school and community

- **YES**  **If YES, does this impact on their ability to participate in everyday activities?**
 - Not at all - A little - Somewhat - A lot
- **NO** (Go to next question)


COMMENTS:

02. Ability to **use their hands and arms** to do the things they want to do

- **YES**  **If YES, does this impact on their ability to participate in everyday activities?**
 - Not at all - A little - Somewhat - A lot
- **NO** (Go to next question)

COMMENTS:

03. Ability to **feed/eat**

- **YES**  **If YES, does this impact on their ability to participate in everyday activities?**
 - Not at all - A little - Somewhat - A lot
- **NO** (Go to next question)

COMMENTS:

04. Ability to carry out toileting

• YES 

If YES, does this impact on their ability to participate in everyday activities?

- Not at all - A little - Somewhat - A lot

• NO (Go to next question)

COMMENTS:

05. Ability to dress or undress themselves

• YES 

If YES, does this impact on their ability to participate in everyday activities?

- Not at all - A little - Somewhat - A lot

• NO (Go to next question)

COMMENTS:

06. Ability to sleep each night

• YES 

If YES, does this impact on their ability to participate in everyday activities?

- Not at all - A little - Somewhat - A lot

• NO (Go to next question)

COMMENTS:

07. Seeing

• YES 


If YES, does this impact on their ability to participate in everyday activities?

- Not at all - A little - Somewhat - A lot

• NO (Go to next question)


COMMENTS:

08. Hearing

- **YES**  **If YES, does this impact on their ability to participate in everyday activities?**
 - Not at all - A little - Somewhat - A lot
- **NO** (Go to next question)


COMMENTS:

09. Ability to **understand** other people

- **YES**  **If YES, does this impact on their ability to participate in everyday activities?**
 - Not at all - A little - Somewhat - A lot
- **NO** (Go to next question)


COMMENTS:

10. Ability to **tell** people what they want

- **YES**  **If YES, does this impact on their ability to participate in everyday activities?**
 - Not at all - A little - Somewhat - A lot
- **NO** (Go to next question)

COMMENTS:

11. Behaviour

- **YES**  **If YES, does this impact on their ability to participate in everyday activities?**
 - Not at all - A little - Somewhat - A lot
- **NO** (Go to next question)

COMMENTS:

12. Mood

- **YES** 
- **NO** (Go to next question)

If YES, does this impact on their ability to participate in everyday activities?

- Not at all - A little - Somewhat - A lot

COMMENTS:

13. Pain

- **YES** 
- **NO** (Go to next question)

If YES, does this impact on their ability to participate in everyday activities?

- Not at all - A little - Somewhat - A lot

COMMENTS:

14. Ability to **learn** new things

- **YES** 
- **NO** (Go to next question)

If YES, does this impact on their ability to participate in everyday activities?

- Not at all - A little - Somewhat - A lot

COMMENTS:

15. Ability to **remember** things they know


- **YES** 
- **NO** (Go to next question)

If YES, does this impact on their ability to participate in everyday activities?

- Not at all - A little - Somewhat - A lot


COMMENTS:

16. Ability to get along with other children

- **YES**  **If YES, does this impact on their ability to participate in everyday activities?**
 - Not at all - A little - Somewhat - A lot
- **NO** (Go to next question)


COMMENTS:

17. Ability to get along with adults

- **YES**  **If YES, does this impact on their ability to participate in everyday activities?**
 - Not at all - A little - Somewhat - A lot
- **NO** (Go to next question)


COMMENTS:

18. Participation in activities at home

- **YES**  **If YES, does this impact on their ability to participate in everyday activities?**
 - Not at all - A little - Somewhat - A lot
- **NO** (Go to next question)

COMMENTS:


19. Participation in activities at school

- **YES**  **If YES, does this impact on their ability to participate in everyday activities?**
 - Not at all - A little - Somewhat - A lot
- **NO** (Go to next question)

COMMENTS:

I am concerned about my child's:

20. Participation in activities in the community

- **YES**  **If YES, does this impact on their ability to participate in everyday activities?**
 - Not at all
 - A little
 - Somewhat
 - A lot
- **NO** (Go to next question)

COMMENTS:

Are there other things that worry you and you would like to see your child do that he/she is not currently doing? Please describe:

Empty text area for comments.