



Description of the KIDSCREEN-27

Health-Related Quality of Life Questionnaire for Children and Young People
Short Version



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The **KIDSCREEN** generic health related quality of life measures for children and adolescents were developed within an European project "Screening and Promotion for Health-related Quality of Life in Children and Adolescents - A European Public Health Perspective" funded by the European Commission. The project has taken place over 3 years (2001-2004) and participants of the project are Austria, Czech Republic, France, Germany, Greece, Hungary, Ireland, Poland, Spain, Sweden, Switzerland, The Netherlands, and the United Kingdom (Acknowledgement: The KIDSCREEN project was financed by the European Commission grant number QLG-CT-2000- 00751 within the EC 5th Framework-Programme "Quality of Life and Management of Living Resources"). Three different KIDSCREEN instruments were developed to assess health related quality of life in children and adolescents (HRQoL) aged between 8-18 years. The instruments can be used as a generic instrument to assess quality of life in children and adolescents with a chronic illness. They aim to identify children at risk, in terms of their subjective health, and to suggest appropriate early interventions by including the instruments in health services research and health reporting. For epidemiological studies and surveys, for monitoring child and adolescent health related quality of life (HRQoL) a short KIDSCREEN questionnaire was provided.

The **KIDSCREEN project** used a simultaneous approach to include 13 European countries in the cross-cultural harmonisation and development of the measure. The generation of the questionnaires was based on literature reviews, expert consultation, and children's focus groups in all participating countries to identify dimensions and items of HRQoL which were relevant to respondents in all countries. The final instruments were used in representative mail surveys of HRQoL in 1800 children and their parents per country (total n > 20.000).

The **KIDSCREEN-27** was developed to construct a shorter version of the KIDSCREEN-52 with a minimum of information loss and with good psychometric properties. Firstly basic item analyses were calculated. One psychometric approach used confirmatory and explorative factor analyses, and in a next step the item reduction process was carried out on the background of Item Response Theory Models (IRT).

The **KIDSCREEN-27** with five dimensions resulted. All five dimensions are Rasch scales: Physical Well-Being (5 items), Psychological Well-Being (7 items),

Autonomy & Parents (7 items), Peers & Social Support (4 items), and School Environment (4 items).

The construct validity of the **KIDSCREEN-27** is satisfying; the calculation of a factor analysis explains 56% of the variance, and for the reliability of each of the five dimensions Cronbach's Alpha is >0.70. Analyses to test the external validity show results in the expected theoretical direction: females show lower HRQoL on the dimensions physical and psychological well-being; older adolescents show lower HRQoL on all dimensions than younger children; children and adolescents with special health care needs display a lower HRQoL in all dimensions in comparison to healthy children and adolescents; and children and adolescents who have spent more than two nights in hospital in the last year display a lower HRQoL in all dimensions in comparison to healthy children and adolescents.

Answering the **KIDSCREEN-27** requires only 10-15 minutes. It provides a profile and allows an interpretation of the five dimensions. A proxy measure for parents or primary care-givers is also available. The KIDSCREEN measure is currently available in the languages Czech, Dutch, English, French, German, Greek, Hungarian, Polish, Spanish, and Swedish. A score can be calculated, t-values and percentages will be available for each country stratified by age and gender. It can be used in national and international epidemiological studies and surveys to assess health related quality in children and adolescents.

CONTACT

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