

Functional Disability Inventory-Parent Form (FDI)

Availability	Please email the authors for information about obtaining the instrument: lynn.walker@vanderbilt.edu
Classification:	Core for Headache
Short Description of Instrument:	<p>The Functional Disability Inventory (FDI) was developed by Walker and Greene to assess illness-related activity limitations in children and adolescents with a variety of pediatric conditions. It has been used frequently in the functional assessment of pediatric pain, including acute pain and chronic pain such as headaches. The instrument consists of 15 items concerning perceptions of activity limitations.</p> <p>This version of the FDI asks parents about their child’s everyday activities and the effect physical pain may or may not have on completing them.</p>
Scoring:	Respondents rate the level of difficulty of each item from 0 (“no trouble”) to 4 (“impossible”). A total score is derived from the sum of the items. Higher scores indicate greater disability
Psychometric Properties:	An examination of the psychometric properties of the FDI demonstrated that it is a reliable and valid measure of functional limitations for children and adolescents with chronic pain. The measure has demonstrated internal consistency and test–retest reliability and correlates with school absence rates (Walker & Greene, 1991). Currently, the FDI is the most common measure of functional disability for pediatric pain populations.
References:	<p>Claar RL, Walker LS. Functional Assessment of pediatric pain patients: Psychometric Properties of the Functional Disability Inventory. <i>Pain</i> 121 (2006). 77-84.</p> <p>Logan DE, Scharff L. (2005). Relationships Between Family and Parent Characteristics and Functional Abilities in children with recurrent Pain Syndromes: An Investigation of Moderating Effects on the Pathway from Pain to Disability. <i>Journal of Pediatric Psychology</i>, 30(8),698-707.</p> <p>Walker LS, Greene JW. (1991). The functional disability inventory: Measuring a neglected dimension of child health status. <i>Journal of Pediatric Psychology</i>, 16, 39–58.</p>