

VELO

VPI Effects on Life Outcome

Parent Report for Children

DIRECTIONS

On the following pages is a list of things that might be a problem for **your child**. Please tell us **how much of a problem** each one has been for your child during the **past FOUR weeks** by circling:

- 0 if it is **Never** a problem
- 1 if it is **Almost Never** a problem
- 2 if it is **Sometimes** a problem
- 3 if it is **Often** a problem
- 4 if it is **Almost Always** a problem

There are no right or wrong answers.

If you do not understand a question, please ask for help from the Research Assistant.

Please try to answer all the questions.

Each Parent/caregiver should fill out a VELO questionnaire

Caregiver Information:

- 1) Parent/Caregiver Sex (circle): Male Female

- 2) If you had to pick **one** parent/caregiver as your child's **primary** caregiver, would **you** be the primary caregiver (circle)?
Yes No

In the past **four weeks**, how much of a **problem** has your child had with (circle one for each question):

	Never	Almost Never	Sometimes	Often	Almost Always
Speech Limitations (problems with...)					
1. Air comes out his or her nose when talking	0	1	2	3	4
2. Runs out of breath when talking	0	1	2	3	4
3. Difficulty speaking in long sentences	0	1	2	3	4
4. Speech is too weak	0	1	2	3	4
5. Difficulty being understood when in a hurry	0	1	2	3	4
6. Speech gets worse toward the end of the day	0	1	2	3	4
7. Speech sounds different than other kids	0	1	2	3	4
Swallowing Problems (problems with...)					
8. Liquids come from the nose while drinking	0	1	2	3	4
9. Solid food comes from the nose while eating	0	1	2	3	4
10. Others make fun of my child when food or liquids escape through the nose	0	1	2	3	4
Situational Difficulty (problems with...)					
11. Speech is difficult for strangers to understand	0	1	2	3	4
12. Speech is difficult for friends to understand	0	1	2	3	4
13. Speech is difficult for family to understand	0	1	2	3	4
14. Difficulty being understood when not speaking face to face, eg, as in a car	0	1	2	3	4
15. Difficulty being understood on the phone	0	1	2	3	4
Emotional Impact (problems with...)					
16. Teased because of speech	0	1	2	3	4
17. Child gets sad because of speech	0	1	2	3	4
18. Gets frustrated or gives up when he or she is not understood	0	1	2	3	4
19. Is shy or withdrawn because of speech	0	1	2	3	4
Perception by Others (problems with...)					
20. Treated as if he or she is not very bright because of speech	0	1	2	3	4
21. Others ignore my child because of his or her speech	0	1	2	3	4
22. Others do not like to talk on the phone with my child because of his or her speech	0	1	2	3	4
23. Family or friends tend to speak for my child	0	1	2	3	4
Caregiver Impact (problems with...)					
24. I am worried or concerned about my child's speech	0	1	2	3	4
25. I find it difficult to understand my child	0	1	2	3	4
26. My child's speech problem slows me down or inconveniences me	0	1	2	3	4

VELO

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Youth Report

DIRECTIONS

Please help your child to answer the questions on the following pages

On the following pages is a list of things that might be a problem for **you**. Please tell us **how much of a problem** each one has been for you during the **past FOUR weeks** by circling:

- 0 if it is **Never** a problem
- 1 if it is **Almost Never** a problem
- 2 if it is **Sometimes** a problem
- 3 if it is **Often** a problem
- 4 if it is **Almost Always** a problem

There are no right or wrong answers.

If you do not understand a question, please ask for help from your parent or the Research Assistant.

Please try to answer all the questions.

In the past **four weeks**, how much of a **problem** has this been for you (circle one answer for each question):

	Never	Almost Never	Sometimes	Often	Almost Always
Talking (problems with...)					
1. Air comes out my nose when I talk	0	1	2	3	4
2. I run out of breath when I talk	0	1	2	3	4
3. It is hard talking in long sentences	0	1	2	3	4
4. My speech is too weak	0	1	2	3	4
5. I have trouble being understood when I'm in a hurry	0	1	2	3	4
6. My speech gets worse toward the end of the day	0	1	2	3	4
7. My speech sounds different than other kids	0	1	2	3	4
Swallowing (problems with...)					
8. Liquids come out my nose while drinking	0	1	2	3	4
9. Food comes out my nose while eating	0	1	2	3	4
10. Others make fun of me when food or liquids come out my nose	0	1	2	3	4
Times when I have trouble (problems with...)					
11. My speech is hard for strangers to understand	0	1	2	3	4
12. My speech is hard for friends to understand	0	1	2	3	4
13. My speech is hard for family to understand	0	1	2	3	4
14. I have trouble being understood when others can't see my face, for example, in a car	0	1	2	3	4
15. I have trouble being understood on the phone	0	1	2	3	4
How I feel (problems with...)					
16. I am teased because of how I talk	0	1	2	3	4
17. I get sad because of how I talk	0	1	2	3	4
18. I get frustrated or give up when I am not understood	0	1	2	3	4
19. I am shy because of how I talk	0	1	2	3	4
How others feel about me (problems with...)					
20. I am treated like I am not smart because of how I talk	0	1	2	3	4
21. Others ignore me because of how I talk	0	1	2	3	4
22. Others do not like to talk on the phone with me because of how I talk	0	1	2	3	4
23. My family or friends tend to talk for me	0	1	2	3	4