

COGNITIVE TESTING OF THE WG EXTENDED SET OF QUESTIONS IN OMAN

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COUNTRY PROFILE (2010)

Total Population: 2,770,329

Omanis 1,954,199 (70.6%)

Expatriates 816,130 (29.4%)

Male: 988,962 (50.6%)

Female: 965,237 (49.4%)

Male: 621,778 (76.2%)

Female: 194,352 (23.8%)



INTRODUCTION:

• Based on the importance of participation in international efforts for developing a unique questionnaire for measuring disability through household surveys, the Directorate General of Social Statistics in the Ministry of National Economy (MoNE) decided to test the WG's extended set of questions in Oman in October 2010.

INTRODUCTION:

- A team of 6 persons was formed representing the main ministries producing statistics about disabled people in the country.
- They are: Ministry of National Economy, Ministry of Health, Ministry of Education and Ministry of Social Development.
- All the members of the team held at least a bachelor's degree either in statistics or in social sciences.

PREPARATION FOR THE FIELD WORK:

- A workshop was conducted during (4-6) October 2010 for the team and other participants from some of the Arab countries with cooperation from WG and AITRS.
- The main objective of the workshop was to train the participants in Cognitive Interview Methodology & Testing Disability Questions.
- The questionnaire was translated in Arabic and reviewed. It was tested in the ministry prior field work.



CHARACTERISTICS OF THE SAMPLE:

- The cognitive test was conducted during (16-20) October 2010 on a selected sample of 33 people.
- The majority of the sample was selected from some of the educational & rehabilitation institutes in Muscat Governorate such as (Sultan Qaboos University, Omar bin Al Khattab Institute for the Blind, Disabled Rehabilitation Center in Al-Khoud & Creative Center for Rehabilitation).
- The respondents were 17 males and 16 females. Four of them were youths with Down syndrome (16/17 years of age).

CONTINUED

• The age distribution of the respondents was as follow:

Age Groups	Males		Femal	les	Total	
	No.	%	No.	%	No.	%
(15-19)	3	17.6	1	6.3	4	12.1
(20-24)	5	29.4	4	25.0	9	27.3
(25-29)	5	29.4	5	31.3	10	30.3
(30-34)	3	17.6	4	25.0	7	21.2
(35-39)	1	5.9	0	0	1	3.0
(65-69)	0	0	1	6.3	1	3.0
Not stated	0	0	1	6.3	1	3.0
Total	17	100	16	100	33	100

MAIN FINDINGS: ANSWERS TO THE SHORT SET QUESTIONS

Field	No Difficulty	Some Difficulty	Lots of Difficulty	Cannot Do at All	Total
Vision	24	3	0	6	33
Hearing	31	0	0	0	31
Mobility	14	7	3	5	29
Communication	18	8	1		27
Cognition	8	17	3	0	28
Self-Care	25	2	1	0	28

One of them was complaining about the sunglasses and not his vision

COMMENTS ABOUT VISION:

 According to the respondents, type of response to the amount of difficulty in seeing someone's face across the room depends on the size of the room as well as the amount of light. Therefore, the question needs to be standardized.

Difficulty seeing, even when	Difficulty in seeing someone's face across the room			
wearing glasses	No difficulty	Some difficulty	lot of difficulty	
No difficulty	80.8%	7.7%	0	
Some difficulty	3.8%	3.8%	3.8%	
Total	22	3	1	

 Some of the respondents couldn't understand the Arabic translation for the phrase seeing far away (5 out of 27). One of the respondents had autism.

COMMENTS ABOUT HEARING DOMAIN:

- 1. Although one of the female respondents was using a hearing aid all the time, and another lady could not hear with her right ear no one reported having difficulty in hearing!!
- 2. A sign language translator was assisting the interviewer with the lady using a hearing aid, and according to her it is difficult to translate the question as they are written, there should be a modified version for those using sign language in Arabic countries.

COMMENTS ABOUT HEARING DOMAIN:

Questions H-S2 and H-S3 were not translated correctly. The Arabic translation involved: hearing a conversation between two persons in a quite room or in a noisy room! This explains why people related their responses to the need for concentration in their stories. Some of the factors mentioned in the stories were: The speed of the conversation, the distance from the conversation, the level of the noise in the room and the language of the conversation. Only the lady having problem in her right ear mentioned her position to the conversation.

COMMENTS ABOUT MOBILITY DOMAIN:

- Some of the answers to having difficulty walking or climbing stairs were for reasons other than using lower part of body.
 Some of the stories are:
- 1. A female respondent using a hearing aid all the timed said she is having a lot of difficulty in walking or climbing stairs because she is feeling unbalance most of the time.
- 2. Another reason for some other respondents was being blind and cannot walk or climb stairs in unfamiliar places.
- 3. A lady said she has some difficulty because she is afraid of high places, she has acrophobia.

- MOB_1: Do you have difficulty moving around inside your home?
- 5 respondents reported *cannot do at all*, while the other 24 had *no difficulties*. Going back to their stories it was found that the 3 people who said they couldn't move in their homes were able to move, but the environment is not suitable.

•A blind lady who could not walk in her backyard. But can easily move around inside her house.

•A person who uses his arms and hands for moving around inside his home, but said his house his not prepared for him.

•A lady who can move around in her ground floor using her arms and hands, but can not go to the first floor of the house.

- MOB_2 Do you use any equipment or receive help for getting around?
- Out of the 15 who had reported in MOB_SS having some sort of difficulty, 13 are using an equipment or receive help in moving around.

Type of equipment	No.	
Cane or walking stick	1	The walking stick is used
Walker or Zimmer frame	0	by a blind lady to move
Crutches	2	around.
Wheelchair	7	
Artificial limb (leg/foot)	1	A blind person also needs
Someone's assistance	2 -	→ assistance in moving
Total	13	around specially in new
		places.

Mobility without using the aids:

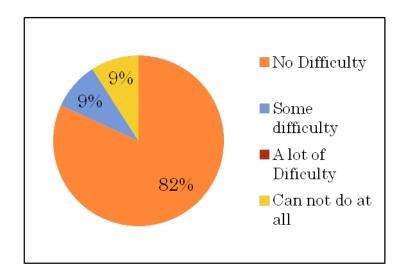
Distance	No difficulty	Some difficulty	A lot of difficulty	Can not do at all	Total
100 m	18	0	0	4	22
500 m	15	2	1	2	20

Only four ladies did not recognize the distance of 100 meters and the question was repeated and explained more for them.

Obviously there is a conflict between the answers marked in red. Longer distances should be of more problematic for disabled than shorter distances!!

 MOB_6: Do you have difficulty walking up or down 12 steps [without the use of your aid]?

Respondents thought about the shape of the stairs and the existence of a stair case.



Mobility with the use of aids:

Distance	No difficulty	Some difficulty	A lot of difficulty	Can not do at all	Total
100 m	6	0	0	0	6
500 m	4	2	0	0	6
12 steps	4	2	0	0	6

The relation between climbing stairs without and with using an aid:

Without an	Le	Level of difficulty with an aid				Total
aid	No diff.	Some	A lot	Cannot do at all	Skipped	
No difficulty	3				4	7
Some difficulty	1					1
A lot of diff.						0
Cannot do at all		(2)				2
Skipped					2	2
Total	4	2	0	0	6	12

All of them are blind people and their answers for without aid were for to using stairs in familiar place. One of them uses a walking stick, and the other two needs someone's assistance.

Both of them use crutches. One of them changed his answer in the 2nd round to a lot of difficulty with his aid.

- The main problem with this domain was the amount of questions that required longer time compared to other domains.
- Some of the respondents suggested changing the questions of climbing the stairs to stepping down the stairs because it is much easier than climbing, even when using, for example, crutches.

ANXIETY:

Unfortunately the word (Nervous) was translated to angriness and the team was not aware of the translation problem because angriness is mentioned in the (ICF).

BOTH ANXIETY AND ANGRINESS
WERE MENTIONED IN THE ARABIC
TRANSLATION OF THE QUESTION
REGARDLESS OF BEING
DIFFERENT FEELINGS. MANY OF
THE RESPONSES IN THIS
QUESTION WERE FOR ANGRINESS
AND NOT ANXIETY



DEPRESSION

Field	Daily	Weekly	Monthly	Few times a year	Never	Total
Depression	3	4	5	8	7	27

• Although 74% of respondents had some sort of frequent depression, none of them was on any medication for that. All of them suggested avoiding this question in future because being depressed is normal. According to them it's one of the daily feelings one gets.

CONT. DEPRESSION

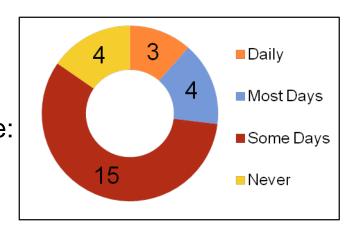
- The main reasons for getting depressed were: personal and family problems (26%), health status(7.4%), worried about the results of the exams (3.7%), Thinking about the future (3.7%) and being bored (3.7%). (44%) did not respond.
- In reference to the last time any of the respondents felt depressed, 24% said they were depressed a lot and around 47% said it was somewhere between a little and a lot. 56% of those said that the depression was exactly in the middle.

PAIN (X):

- Do you have frequent pain?
- In the past 3 months, how often did you have pain?

Main reasons for getting frequent pain were: Illness (73%), Work load (20%) and sports (7%)

Yes	No	Total
8	19	27

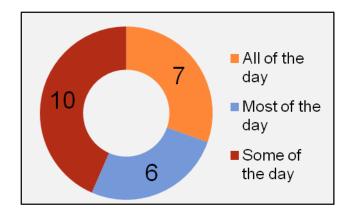


Comparing the answers of the respondents to their stories shows:

Summary	
Story doesn't match the response category	2
Changing the response category	2
The respondent did not understand the question	1

PAIN CONT (X):

Duration of the pain:



Severity of the last pain:

A little	A Lot	Between a little and a lot
9	7	5

 Data shows some relation between feeling pain and difficulty in mobility:

Frequent	Do you have difficulty walking or climbing steps?					
Pain	Never	Some difficulty	A lot of Difficulty	Cannot do at all		
Yes	0	2	2	3		
No	13	5	0	1		

FATIGUE

Field	Daily	Most days	Some days	Never	Total
Fatigue	1 (4%)	3 (12%)	20 (80%)	1 (4%)	25 (100%)

 The main reasons for feeling tired or exhausted were: Work load (15%), Lack of sleep (25%), both previous reasons (15%), Studying (10%), illness (20%), unusual activities such as walking long distances (15%).

Summary of the stories	No.
Answer doesn't match the story	2
Changing the answer	1
Did not understand the question	1

The respondent who changed his answer is complaining about the work load and he said his body is not tired but his mind.

COMMENTS ABOUT THE INTERVIEWS WITH DOWN SYNDROME YOUTH:

- None of the respondents answered any question as written. All questions were asked in a very simple language trying to be as friendly as possible.
- None of the Down syndrome respondents could report his/ her age.
- One of them answered no difficulty to the Vision short question, and that his glasses were at home!!. Later his teacher explained that previously he wore glasses but couldn't concentrate on anything else than his glasses. Therefore his teachers suggested that he should not wear them at school this year.
- Another person's response for seeing someone across the room was an indication with her head (as yes) for seeing me, her teacher in the class and other stuff in the interview room. But it's not certain that she did really understood the phrase (across the room).

LESSONS LEARNED:

- The work team was not really qualified to deal with people with Down syndrome. In fact, some of the interviewers were not able even to deal with people with disabilities. They were very emotional during the interviews. This implies that special training should be given to disability data collectors.
- After translation to any language other then English, the questions should be reviewed with WG experts to avoid any misunderstandings or translation errors.
- The written Arabic language is different than the spoken language not only in many parts of the Arabic world, but also inside the country. Therefore, more cognition tests should be done in the Arabic world in order to have a well translated and standardized version of the questionnaire.

Lessons learned: Continued

- Proxy was used in some of the interviews with those having mental disorders and those using sign language. The field test shows that the responses are influenced by the proxy's responses and understandings. Therefore, the interpretation of those responses should be done very carefully.
- There is a shortage in Arabic speaking experts in the field of Disability statistics. Many of those who are producing disability statistics are still dealing with the *handicap* concept regardless of the new terminology that is being used.

THANKS FOR YOUR ATTENTION