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# How-To Note Collecting Data on Disability in Education Programming

How-To Notes provide additional design and implementation suggestions not covered in existing USAID Policy documents related to sub-areas of the Education Strategy. For more information about the content of this document, contact Elena Walls at [ewalls@dexisonline.com](mailto:ewalls@dexisonline.com).

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# How to Collect Data on Disability

## Overview

Collection of data on disability prevalence and type will enable USAID Missions and their implementing partners to design and implement disability-inclusive education programming that is responsive to context and can be evaluated effectively. As emphasized in this Note, USAID follows the United Nations (UN) definition of disability<sup>1</sup> as **the outcome of the interaction between a person with a functional limitation (difficulties doing basic functional activities) and an unaccommodating environment resulting in the inability to fully participate in society.** The Washington Group on Disability Statistics (WG) developed an approach for collecting data on disability to help standardize global data collection on disability. As of 2017, 69 countries used the WG’s approach. This Annex includes the WG data collection tool, describes necessary preparation steps for data collection, outlines strategies for data analysis, and lists various uses of the tool and the data. A list of resources associated with each step is provided at the end.



The WG’s approach to collecting data on disability is based on the International Classification of Functioning, Disability and Health’s (ICF) definition of six main domains of functioning<sup>2</sup>, which include **vision, hearing, mobility, memory/concentration, self-care, and communication.** Respondents are asked whether they have trouble functioning in their environments, and to what extent. The WG Short Set of Questions on Disability (“WG Short Set”) includes a question per domain, as shown below.

An infographic with a dark red background and a white banner at the top that reads "SIX QUESTIONS ON SHORT SET". Below the banner are six white icons, each with a corresponding question in white text. The icons are: an eye, an ear, two footprints, a brain, a comb, and two speech bubbles. The questions are: "Do you have difficulty seeing, even if wearing glasses?", "Do you have difficulty hearing, even if using a hearing aid?", "Do you have difficulty walking or climbing steps?", "Do you have difficulty remembering or concentrating?", "Do you have difficulty (with self-care such as) washing all over or dressing?", and "Using your usual language, do you have difficulty communicating, for example understanding or being understood?".

Source: DFID Washington Group on Disability Statistics

1 The United Nations Convention on the Rights of Persons with Disabilities (2006), p.4.

2 International Classification of Functioning, Disability and Health (ICF).

### **DHS DISABILITY MODULE**

The DHS Program's new optional Disability Module is based on the WG Short Set and is the result of ongoing collaboration between The DHS Program, WG, and USAID. These questions have been developed, tested internationally, and endorsed by the United Nations for use in population-based data collection activities.

Collection of disability information in the DHS Program surveys will enhance countries' capacities to identify sub-populations at greater risk of facing restrictions in participation. Including disability in The DHS Program will also provide a wealth of information for use in monitoring and impact evaluation efforts. The DHS Program surveys that include the Disability Module will have information on disability comparable to that being collected worldwide via the WG disability tools.

USAID.GOV; DHSPROGRAM.COM  
WASHINGTONGROUP.DISABILITY.COM

## The Case for Using the Short Set

USAID Missions and partners have used various approaches to collecting data on disability, such as relying on country official statistics and definition of disability to developing new custom tools. Using the WG Short Set has multiple advantages over other methods. First, this questionnaire has been extensively **tested and validated** in many countries around the world. Second, it is supported by a **wealth of resources** developed by experienced statisticians and practitioners from the WG<sup>3</sup>. The tool is **simple and inexpensive** to add as a module to any population-level data collection and takes less than two minutes to administer. In addition, the use of the WG Short Set will ensure consistency in **reporting on indicators**, standard and/or custom, where disaggregation by disability status is a requirement. And finally, as this tool is **endorsed by the UN**, it is likely to be incorporated as part of the Sustainable Development Goal (SDG) reporting.

## Integration into the Program Cycle

USAID's Office of Education endorses the use of the WG Short Set to collect data on disability status of beneficiaries throughout the Program Cycle. At a higher level, we recommend using the Demographic and Health Survey

Disability Module<sup>4</sup> (which also utilizes the WG Short Set) for collecting household-level data on persons with disabilities (see Sidebar). Missions can use resulting data as a reference point when developing their **Country Development Cooperation Strategy (CDCS)** and for **project and activity designs**. Second, USAID Missions and partners can use the WG Short Set as part of **assessments** conducted to inform planned education project and activity designs, to identify contextual barriers as well as opportunities for future disability-inclusive programming. Third, the Short Set should be used as a component of the **monitoring and evaluation** approach by the Mission and partners to monitor how well programming is reaching and benefiting individuals with disabilities. Including the WG Short Set as the primary method of collecting data on disability status of USAID program beneficiaries, including children, lays a foundation for informed, data-driven decision-making. It also enables comparisons of effectiveness of interventions for persons with disabilities across program types and environmental contexts, including the program's ability to reach persons with disabilities and improve their lives.

<sup>3</sup> <http://www.washingtongroup-disability.com/>

<sup>4</sup> <https://dhsprogram.com/publications/publication-dhsqm-dhs-questionnaires-and-manuals.cfm>

## THE WASHINGTON GROUP SHORT SET OF QUESTIONS ON DISABILITY

### Introductory phrase:

The next questions ask about difficulties you may have doing certain activities because of a HEALTH PROBLEM.

1. Do you have difficulty seeing, even if wearing glasses?
2. Do you have difficulty hearing, even if using a hearing aid?
3. Do you have difficulty walking or climbing steps?
4. Do you have difficulty remembering or concentrating?
5. [OPTIONAL] Do you have difficulty (with self-care such as) washing all over or dressing?
6. [OPTIONAL] Using your usual (customary) language, do you have difficulty communicating, for example understanding or being understood?

Answer options for each question include a scale:

- A. No - no difficulty
- B. Yes – some difficulty
- C. Yes – a lot of difficulty
- D. Cannot do at all

## Appropriate Use

The WG Short Set is considered appropriate for adults and children over 5 years old. However, when used with young children, the WG Short Set is expected to under-estimate the proportion of children with developmental and cognitive disabilities because the tool relies on respondent's abilities to compare him or herself to their peers. Some adaptation of questions might also be needed to ensure questions are understood by children.

For obtaining more precise data on the disability status of young children (5 to 10), and for collecting data on a disability status of very young children (under 5), consider using the Washington Group Child Functioning for Children Under Age 5 or Child Functioning for Children Age 5 to 17 protocols<sup>5</sup>. These protocols were designed to provide more detailed and accurate information about functional difficulties of children. They are administered in a one-on-one interview with a parent/caregiver of the child. Both protocols are longer than the Short Set: the former includes 16 questions and the latter 24 questions. The protocols were co-developed with UNICEF and are currently part of its Multiple Indicator Cluster Surveys MICS questionnaire.

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<sup>5</sup> <http://www.washingtongroup-disability.com/washington-group-question-sets/child-disability/>

## Using the Short Set

The WG developed practical guides, which are publicly available, for questionnaire adaptation and application in the field. When using the Short Set for the first time in a country, the WG recommends the following steps:

### **STEP 1: Understand the conceptual framework and objectives of measuring disability.**

The Short Set is based on the World Health Organization’s International Classification of Functioning, Disability, and Health (ICF) as a conceptual model. The focus is on functioning in basic actions, in contrast to approaches that are based on a medical model, which focus on impairments or bodily functions. The Short Set helps identify the proportion of the population who are at greater risk than the general population of experiencing limited or restricted participation in society. Question testing has shown that they produce internationally comparable data<sup>6</sup>.

### **STEP 2: Translate and adapt the Short Set.**

The WG provides guidance for translation and cultural adaptation of the questionnaire that will help produce a valid and reliable instrument in a local language. The “WG Translation Protocol”<sup>7</sup> helps mitigate linguistic differences caused by changes in the meaning of words between dialects as well as difficulties of applying a concept to a different culture. The Protocol provides step by step directions.

### **STEP 3: Test the questionnaire in the field.**

Once translated, the questionnaire must undergo two types of testing: cognitive and field. Cognitive testing helps ensure that the concepts in the questionnaire were adequately adapted to a culture to be understood and interpreted correctly by respondents. The field testing ensures reliability of the final protocol. The WG provides guidance for both procedures<sup>8</sup>.

### **STEP 4: Collect data.**

The WG provides instructions for training interviewers and collecting data, including information about necessary consent forms. The guidance<sup>9</sup> illustrates best practices of interviewing persons with disability.

### **STEP 5: Analyze data.**

For the binary (yes/no) determination of disability, USAID considers an individual as having a disability if he/she answered “a lot of difficulty” or “cannot do it all” to at least one of the Short Set questions. For a more nuanced analysis of disability, the answers can be used as a regular scale, with “cannot do it at all” denoting severe disability while “some difficulty” denoting minor disability in each functional domain. USAID recommends disaggregating all major beneficiary-level indicators by disability status.

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<sup>6</sup> <http://www.washingtongroup-disability.com/methodology-and-research/conceptual-framework/> and [http://www.washingtongroup-disability.com/wp-content/uploads/2016/01/Rationale\\_WG\\_Short-1.pdf](http://www.washingtongroup-disability.com/wp-content/uploads/2016/01/Rationale_WG_Short-1.pdf)

<sup>7</sup> [http://www.washingtongroup-disability.com/wp-content/uploads/2016/01/appendix2\\_translation.pdf](http://www.washingtongroup-disability.com/wp-content/uploads/2016/01/appendix2_translation.pdf)

<sup>8</sup> <http://www.washingtongroup-disability.com/methodology-and-research/testing-methodology/> and <http://www.washingtongroup-disability.com/wp-content/uploads/2016/01/ResultsoftheTestingoftheESCAP-WGQuestionSetonDisability.pdf>

<sup>9</sup> [http://www.washingtongroup-disability.com/wp-content/uploads/2016/02/appendix5\\_interviewer\\_guidelines.pdf](http://www.washingtongroup-disability.com/wp-content/uploads/2016/02/appendix5_interviewer_guidelines.pdf)