
23.4: The proxy problem: Child report versus parent report in health related quality of life research

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Aim of the study is to evaluate the agreement between child and parent reports on children's Health related Quality of Life (HrQOL) in a representative sample of 1105 Dutch children (age 8 to 11 years old). Both children and their parents completed a 56 item questionnaire (TACQOL). The questionnaire contains seven eight-item scales: physical complaints, motor functioning, autonomy, cognitive functioning, social functioning, positive and negative emotions. The instrument defines HrQOL as the affective evaluation of Health Status.

Results: The Pearson correlations between child and parent reports were between 0.44 to 0.61 ($p < 0.001$). Children on average reported significantly lower HrQOL than parents on the physical complaints, motor functioning, autonomy, cognitive functioning, and positive emotions scales (paired t-test: $p < 0.05$). Agreement on all scales was related to the height of the HrQOL scores and to some background variables (gender, age, temporary illness, visiting a physician). According to Multitrait-Multimethod analyses, both child and parent reports proved to be valid. Child reports were most valid as an indication of physical complaints, whereas parent reports were most valid as an indicator of motor functioning, cognitive functioning, and emotional functioning.

In conclusion, the parent report may provide a substitute for children's HrQOL at a group level, but we have shown that large differences can exist in proxy agreement on individual child-parent level.