

Following is a list of measures and protocols developed in the Walker Lab. Please [contact us](#) for the most recent versions and detailed information. All measures are available to use at no cost.

Abdominal Pain Index (API)

The Abdominal Pain Index comprises five items assessing the frequency, duration, and intensity of abdominal pain episodes experienced during the previous 2 weeks.

[Download the API manual](#) (PDF)

Citation:

Laird, K.T., Sherman, A.L., Smith, C.A., & Walker, L.S. (2015). [Validation of the Abdominal Pain Index using a revised scoring method](#). *Journal of Pediatric Psychology*, 40(5), 517-525.

To download the API, click the desired language below:

- [English](#)
- [Dutch](#)
- [Spanish](#)

Children's Somatic Symptoms Inventory (CSSI) [formerly the Children's Somatization Inventory (CSI)]

The CSSI assesses a variety of nonspecific somatic symptoms. Parallel child-report and parent-report versions of the CSSI are available.

[Download the CSSI manual](#) (PDF)

Citation:

Walker, L.S., Beck, J.E., Garber, J., & Lambert, W. (2009). [The Children's Somatization Inventory: Psychometric properties of the revised form](#) (CSI-24). *Journal of Pediatric Psychology*, 34(4), 430-440.

To download the CSI, choose your desired language:

▪ English	▪ Norwegian (CSSI-8)
▪ Chinese, China	▪ Portuguese
▪ Danish	▪ Sinhala
▪ Farsi	▪ Spanish, Spain
▪ French	▪ Spanish, U.S.
▪ German	▪ Swedish
▪ Hebrew	▪ Turkish
▪ Hindi	▪ Urdu
▪ Italian	

Functional Disability Inventory (FDI)

The FDI is a measure of the degree to which children experience difficulty in physical and psychosocial functioning due to their physical health status. Respondents are asked to rate how much physical difficulty was perceived for a variety of everyday activities. Both child-report and parent-report versions are available.

[Download the FDI manual \(PDF\)](#)

Citations:

Walker, L.S., & Greene, J. W. (1991). [The functional disability inventory: Measuring a neglected dimension of child health status](#). *Journal of Pediatric Psychology*, 16(1), 39-58.

Clair, R.L., & Walker, L.S. (2006). [Functional assessment of pediatric pain patients: Psychometric properties of the Functional Disability Inventory](#). *Pain*, 121, 77-84.

To download the FDI, choose your desired language:

▪ English	▪ German	▪ Polish
▪ Afrikaans	▪ Greek	▪ Romanian
▪ Arabic	▪ Hebrew	▪ Russian
▪ Bulgarian	▪ Hungarian	▪ Slovenian
▪ Chinese, traditional	▪ India-Gujarat	▪ Spanish-Guatemala
▪ Croatian	▪ India-Hindi	▪ Spanish-Panama
▪ Dutch-Belgium	▪ India-Marathi	▪ Spanish-Puerto Rico
▪ Estonian	▪ India-Tamil	▪ Spanish-Spain
▪ Finnish	▪ India-Telugu	▪ Spanish-US
▪ French-Belgium	▪ Italian	▪ Swedish
▪ French-Canadian	▪ Macedonian	▪ Zulu

Pain Response Inventory (PRI)

The Pain Response Inventory (PRI) was developed as a multidimensional instrument to assess children's coping responses to recurrent pain. The PRI assesses 3 broad coping factors--Active, Passive, and Accommodative--each with subscales representing specific strategies for coping with pain. The PRI consists of 75 items assessing 15 potentially distinct coping strategies, each with a 5 item subscale.

[Download the PRI info sheet](#)

To download the PRI, choose your desired language:

[English](#) | [Korean](#)

Citation:

Walker, L. S., Smith, C. A., Garber, J., & Van Slyke, D. A. (1997). [Development and validation of the Pain Response Inventory for children](#). *Psychological Assessment*, 9(4), 392-405.

Pain Beliefs Questionnaire (PBQ)

The Pain Beliefs Questionnaire is a 32-item measure assessing characteristic appraisals of pediatric abdominal pain severity (primary coping appraisals) and characteristic appraisals of ability to cope with pediatric abdominal pain (secondary coping appraisals). The questionnaire is available for both child and parent report. Respondents use a 0 (not at all true) to 4 (always true) rating scale.

[Download the PBQ info sheet](#) (PDF)

To download the PBQ, choose your desired language:

[English](#) | [Dutch](#) | [Spanish](#)

Citations:

Stone, A.L., Walker, L.S., Laird, K.T., Shirkey, K.C., & Smith, C.A. (2016). [Pediatric Pain Beliefs Questionnaire: Psychometric Properties of the Short Form](#). *The Journal of Pain*, 17(9), 1036-1044.

Walker, L.S., Smith, C.A., Garber, J., & Claar, R.L. (2005). [Testing a model of pain appraisal and coping in children with chronic abdominal pain](#). *Health Psychology*, 24(4), 364-374.

Adult's Responses to Children's Symptoms (ARCS)

The Adult Responses to Children's Symptoms (ARCS; Van Slyke & Walker, 2006) assesses behavior by parents or other adults in response to their children's pain. The ARCS consists of 29 items describing parents' responses to their children when the children are in pain. On the ARCS child-report form, children report on the frequency of various types of parental responses to their pain episodes; on the ARCS parent-report form, parents self-report on the frequency of their own use of each type of response to their children's pain. The development and validation of the ARCS has been described by its authors (Van Slyke and Walker, 2006; Walker, Levy, & Whitehead, 2006).

[Download the ARCS manual](#) | [Download the ARCS info sheet](#)

To download the ARCS, choose your desired language:

▪ English (Parent Form)	▪ German (Parent Form)
▪ English (Child Form)	▪ Hebrew (Parent Form)
▪ French (Parent Form)	▪ Hebrew (Child Form)
▪ French (Child Form)	▪ Spanish (Parent Form)
▪ Dutch (Parent Form)	
▪ Dutch (Child Form)	

Citations:

Van Slyke, D.A., & Walker, L.S. (2006). [Mothers' Responses to Children's Pain](#). *Clinical Journal of Pain*, 22(4), 387-391.

Walker, L.S., Levy, R.L., & Whitehead, W.E. (2006). [Validation of a Measure of Protective Parent Responses to Children's Pain](#). *Clinical Journal of Pain*, 22(8), 712-716.

Water Load Symptom Provocation Test (WL-SPT)

The WL-SPT is a safe, non-invasive procedure that induces visceral discomfort in children for experimental purposes. The WL test requires the patient to drink water until "full." The visceral sensations it induces are associated with

gastric distention and are similar to, but less intense than, those associated with naturally occurring episodes of abdominal pain experienced by children with recurrent abdominal pain.

Citation:

Walker, L. S., Williams, S. E., Smith, C. A., Garber, J., Van Slyke, D. A., Lipani, T. A., Greene, J. W., Mertz, H., & Naliboff, B. D. (2006). [Validation of a symptom provocation test for laboratory studies of abdominal pain and discomfort in children and adolescents](#). *Journal of Pediatric Psychology*, 31(7), 703-713.