

**GMFCS-E&R Family Report Questionnaire:**  
**for Young People Aged 12 - 18 Years**

Please read the following and mark **only one box** beside the description that best represents your child's movement abilities.

My child...

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**Has difficulty sitting on their own and controlling their head and body posture in most positions**

and has difficulty achieving any voluntary control of movement

and needs a specially adapted chair to sit comfortably and be transported anywhere

and has to be lifted or hoisted by another person or special equipment to move

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**Can sit with some pelvic and trunk support but does not stand or walk without significant support**

and therefore always relies on wheelchair when outdoors

and can achieve self-mobility using a powered wheelchair

and can crawl or roll to a limited extent to move around indoors

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**Can stand on their own and only walks using a walking aid (such as a walker, rollator, crutches, canes, etc.)**

and finds it difficult to climb stairs, or walk on uneven surfaces without support

and uses a variety of means to move around depending on the circumstances

and prefers to use a wheelchair to travel quickly or over longer distances

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**Can walk on their own without using walking aids, but needs to hold the handrail when going up or down stairs**

and therefore walks in most settings

and often finds it difficult to walk on uneven surfaces, slopes or in crowds

and may occasionally prefer to use a walking aid (such as a cane or crutch) or a wheelchair to travel quickly or over longer distances

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**Can walk on their own without using walking aids, and can go up or down stairs without needing to hold the handrail**

and walks wherever they want to go (including uneven surfaces, slopes or in crowds)

and can run and jump although their speed, balance, and coordination may be limited

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