

## Child Adjustment and Parent Efficacy Scale-Developmental Disability (CAPES-DD)

Please read each statement and circle a number on the scale to show **how true** the statement was of your child **over the past 4 weeks**. Then, using the scale provided, write down the number next to each item that best describes **how confident** you are that you can successfully manage that behaviour, even if it is a behaviour that rarely occurs or does not concern you.

There are no right or wrong answers. Do not spend too much time on any statement.

### Example:

#### My child:

Has temper tantrums

0 (1) 2 3 | 7

The rating scale is as follows:

0. Not true of my child at all
1. True of my child a little, or some of the time
2. True of my child quite a lot, or a good part of the time
3. True of my child very much, or most of the time

My child:	How true is this of your child?				Rate your confidence (from 1-10) 1 = Certain I can't manage it to 10 = Certain I can manage it
	Not at all	A little	Quite a lot	Very much	
1. Loses their temper	0	1	2	3	<input type="text"/>
2. Seems fearful and scared	0	1	2	3	<input type="text"/>
3. Makes rude noises or says rude words	0	1	2	3	<input type="text"/>
4. Yells, shouts or screams	0	1	2	3	<input type="text"/>
5. Demands attention	0	1	2	3	<input type="text"/>
6. Hurts me or others (e.g., hits, bites, scratches, pinches, pushes)	0	1	2	3	<input type="text"/>
7. Becomes upset over changes to routines or surroundings	0	1	2	3	<input type="text"/>
8. Breaks or destroys things	0	1	2	3	<input type="text"/>
9. Whines or complains	0	1	2	3	<input type="text"/>
10. Does not cooperate with requests	0	1	2	3	<input type="text"/>
11. Cries easily for no apparent reason	0	1	2	3	<input type="text"/>
12. Is overactive or restless	0	1	2	3	<input type="text"/>

13. Seems unhappy or sad	0	1	2	3	<input type="checkbox"/>
14. Hurts themselves (e.g., hits, bites, scratches, pinches)	0	1	2	3	<input type="checkbox"/>
15. Becomes upset when separated from familiar people	0	1	2	3	<input type="checkbox"/>
16. Fusses over food or refuses to eat	0	1	2	3	<input type="checkbox"/>

My child:	How true is this of your child?			
	Not at all	A little	Quite a lot	Very much
17. Gets along with adults	0	1	2	3
18. Makes requests appropriately	0	1	2	3
19. Cooperates with self-care routines (e.g., getting dressed)	0	1	2	3
20. Expresses feelings appropriately	0	1	2	3
21. Keeps busy without adult attention	0	1	2	3
22. Comforts others who are upset or hurt	0	1	2	3
23. Shares with others	0	1	2	3
24. Gets along with peers	0	1	2	3

**Citation:**

Mazzucchelli, T. G., Sanders, M. R., & Morawska, A. (2011). *Child Adjustment and Parent Efficacy Scale—Developmental Disability (CAPES-DD)*. Parenting and Family Support Centre, University of Queensland, Brisbane, Australia.

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