



SWYC Milestones Scoring Guide¹

The Milestones are evidence-based questions that are appropriate for initial developmental screening or for monitoring a child’s development over time. The 9-, 18-, 24-, 30-, 36-, and 48-month Milestones are available in Burmese. Use the Table below to select a Milestones Form; correct for prematurity if the child was born <37 weeks gestational age.

Scoring Instructions for SWYC milestones:

1. Add up the Total Score for the Milestones Form. For each question, Not Yet=0, Somewhat=1, and Very Much=2.
2. Go to the row in the Table that shows the child’s age today. Compare the Total Score to the Cutoff Score.
3. A Total Score less than or equal (\leq) to the Cutoff Score should prompt further action, such as referral to a developmental specialist or to other therapeutic or educational services.

Milestones Form	Child's Age in Months* (plus 0-31 days)	Cutoff Score
	* Correct for prematurity if < 37 weeks GA	\leq is a FAILED screening
9 Month	9 mos	11
	10 mos	13
	11 mos	14
18 Month	18 mos	8
	19 mos	10
	20 mos	11
	21 mos	13
	22 mos	14
24 Month	23 mos	10
	24 mos	11
	25 mos	12
	26 mos	13
	27 mos	14
	28 mos	15
30 Month	29 mos	9
	30 mos	10
	31 mos	11
	32 mos	12
	33 mos	13
	34 mos	13

Milestones Form	Child's Age in Months* (plus 0-31 days)	Cutoff Score
	* Correct for prematurity if < 37 weeks GA	\leq is a FAILED screening
36 Month	35 mos	10
	36 mos	11
	37 mos	12
	38 mos	13
	39 mos	13
	40 mos	14
	41 mos	14
	42 mos	15
	43 mos	15
	44 mos	16
	45 mos	16
48 Month	46 mos	16
	47 mos	12
	48 mos	13
	49 mos	13
	50 mos	13
	51-53 mos	14
	54-57 mos	15
58 mos	16	

¹ English scoring instructions version 2, 10/7/2013. Note that as of 3/2014 the SWYC Milestones had been translated but had not yet been validated for Nepali-speaking families.



Parent's Observations of Social Interactions (POSI) Scoring Guide²

The POSI is for initial screening for autism and autism spectrum disorders in children 16 to 36 months. In preliminary SWYC studies in the U.S., 83% of children with an autism spectrum disorder were detected by the POSI. However, 26% of children without an autism spectrum disorder also had abnormal POSI scores. Of these children, 49% (n=28) had developmental delay.

Scoring Instructions for POSI:

1. Add up the number of **questions** that have at least one answer in the last 3 columns. Some questions have multiple answers. If there are multiple answers to one question in the last 3 columns, this question should still be counted **just once** when calculating the score.
2. If **3 or more questions** have an answer or answers in the last 3 columns, the child has failed the POSI.
3. Failure suggests that the child may have some characteristics of an autism spectrum disorder or other developmental delay and needs further evaluation.

² English scoring instructions version 1, 9/5/13. Note that as of 3/2014 the POSI had been translated but had not yet been validated for Nepali-speaking families.



Baby Pediatric Symptom Checklist (BPSC) Scoring Guide³

The BPSC asks questions about three kinds of behavior for children under 18 months of age: Section 1 – Irritability, Section 2 - Inflexibility, Section 3 - Difficulty with Routines. These questions may help parents and physicians identify children who are having social or emotional behavior difficulties.

In the preliminary SWYC study in the U.S., 79% of children with abnormal scores on the *Ages & Stages Questionnaire-Social/Emotional* (ASQ-SE) had abnormal scores on the BPSC. However, 26% of children with normal ASQ-SE scores also had abnormal scores on the BPSC. For this reason, BPSC scores should be interpreted with caution.

Scoring Instructions for BPSC:

1. Add up the Score for each Section. For each question, Not at all=0, Somewhat=1, and Very Much=2.⁴
2. **Any Section Score ≥ 3** suggests that the child might be having more social/emotional difficulties than are typical.

³ English scoring instructions download date 11/25/13, <https://sites.google.com/site/swycscreen/>. Note that as of 3/2014 the BPSC had been translated but had not yet been validated for Nepali-speaking families.

⁴ If a parent selects more than one answer for any question, count the more concerning response (the one with the higher numeric value).



Preschool Pediatric Symptom Checklist (PPSC) Scoring Guide⁵

The PPSC asks questions about behavior for children 18-60 months of age. These questions may help parents and physicians identify children with behavioral difficulties. In the preliminary SWYC study in the U.S., 85% of children with a behavioral disorder had abnormal scores on the PPSC. However, 18% of children who did not have a behavioral disorder also had abnormal scores on the PPSC.

Scoring Instructions for PPSC:

1. Add up the Total Score for the PPSC. For each question, Not at all=0, Somewhat=1, and Very Much=2.⁶
2. A **Total Score ≥ 9** suggests that the child might be having more behavioral difficulty than is typical and might benefit from further evaluation.

⁵ English scoring instructions version 1, 9/5/13. Note that as of 3/2014 the PPSC had been translated but had not yet been validated for Nepali-speaking families.

⁶ If a parent selects more than one answer for any question, count the more concerning response (the one with the higher numeric value).



Family Questions and Parent's Concerns Scoring Guide⁷

Family Questions

The Family Questions were chosen from previously validated questionnaires from the U.S. that are commonly used to measure symptoms of depression, alcohol and drug abuse, domestic violence, and other risk factors that affect parents' and children's well-being. Use the responses to these questions as an opportunity for additional conversation.

Tobacco Use (Q1)

Question 1 is a useful way to find out if parents are using tobacco.

Substance Abuse (Q2-4)

Questions 2-3 are from the Two-item Conjoint Screener (TICS), which has been found to detect substance abuse disorders with sensitivity and specificity of approximately 80%.

Scoring: An answer of "Yes" to either question indicates that the parent may have a substance abuse disorder.

Question 4 is a useful way to find out about the impact of substance use by other family members.

Food Insecurity (Q5)

Question 5 is from the Children's Sentinel Nutrition Assessment (C-SNAP). This question has been found to detect food insecurity with 99% sensitivity and 82.5% specificity.

Parental Depression (Q6-7)

Questions 6-7 are from the Parent Health Questionnaire-2 (PHQ-2), which is used to screen for depression.

Scoring: Add up the Total Score; for each question, Not at all=0, Several days=1, More than half the days=2, and Nearly every day=3. **A Total Score of ≥ 3** should prompt further evaluation using the full version of the PHQ-9 or another validated depression-screening questionnaire or referral for further evaluation.

Domestic Violence (Q8-9)

Questions 8-9 are from the short version of the Woman Abuse Screening Tool (WAST-Short). Ask these questions to one parent (mother) privately.

Scoring: Answering "A lot of tension/great difficulty" to either question indicates that there is a risk of domestic violence and should prompt further conversation.

Parent's Concerns

Parent concerns are often correct and can be a sign that there may be emotional, behavioral, or developmental difficulties that should be evaluated further. Use the answers to these questions as an opportunity for additional conversation.

⁷ English scoring instructions download date 11/25/13, <https://sites.google.com/site/swycscreen/>. Note that as of 3/2014 the Family Questions and Parent's Concerns had been translated but had not yet been validated for Nepali-speaking families.

Modified Checklist for Autism in Toddlers (M-CHAT) Scoring Guide⁸

The M-CHAT is an evidence-based questionnaire for the parents of children 16-30 months. It is an initial screening for autism and autism spectrum disorders.

In the U.S., the M-CHAT alone has a positive-predictive value of 0.06 for autism spectrum disorders and 0.11 for any developmental or behavioral disorder, including autism spectrum disorders. When used with the M-CHAT Follow Up Interview (M-CHAT/F), the positive predictive value is 0.54 for autism spectrum disorders and 0.98 for any developmental or behavioral disorder, including autism spectrum disorders

http://www2.gsu.edu/~psydlr/DianaLRobins/Official_M-CHAT_Website.html

Scoring Instructions:

1. If **any 3 items are failed** (see Table below) complete the M-CHAT Follow Up Interview or refer for further evaluation.
2. If **any 7 items are failed** (see Table below) the child has failed the M-CHAT and should be referred for further evaluation.

Table. Failing Answers

1.	NO
2.	NO
3.	NO
4.	NO
5.	NO
6.	NO
7.	NO
8.	NO
9.	NO
10.	NO
11.	YES
12.	NO
13.	NO
14.	NO
15.	NO
16.	NO
17.	NO
18.	YES
19.	NO
20.	YES
21.	NO
22.	YES
23.	NO

⁸ English scoring instructions download date 11/25/13, http://www2.gsu.edu/~psydlr/DianaLRobins/Official_M-CHAT_Website.html. Note that as of 3/2014 the M-CHAT had been translated but had not yet been validated for Nepali-speaking families.