



# Qualitative Content Validity Testing of the EQ-TIPS with Caregivers of Children Under Three: Findings from an Australian Subsample of a Multinational Study

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## Background

The EuroQol Toddler and Infant Populations (EQ-TIPS) is an experimental measure of health-related quality of life (HRQoL) for children aged 0 – 3 years<sup>1, 2</sup> designed to reflect young children's physical, social, and emotional developmental sensitivities<sup>3</sup>. Multi-national development included stakeholder consultation which highlighted the need to explore additional items and the acceptance of rating a child's HRQoL against age-appropriate norms.

## Aim

As a part of a larger multi-national study, this study aims to evaluate the content validity of the EQ-TIPS by assessing the instructions, recall period and candidate items from the perspective of Australian caregivers of children aged 0 – 3 years.

## Methods

- Focus Groups (FGs) were conducted in Nov. 2024 with Australian caregivers of children aged 0 – 3 years, recruited via:
  - The Royal Children's Hospital Telehealth Service and Centre for Community Child Health.
  - Melbourne School of Population and Global Health.
  - Patient Advocacy/ Support Groups.
- Two semi-structured FGs, balanced to ensure heterogeneity in child age, health status, and condition severity, each lasting 120-minutes. FGs were audio-recorded and transcribed verbatim.
- Caregivers discussed each EQ-TIPS items comprehensibility, relevance and comprehensiveness.
- Thematic analysis used a combination of deductive and inductive analysis guided by an *a priori* framework.

## Results

### Theme: Comprehensiveness, Completion Instructions & Recall Period

Caregivers valued the comprehensive approach the EQ-TIPS takes to assess HRQoL in young children.

*"The questionnaire is optimal for me; it covers a lot of important issues".*

*P6, 2-3 years, Physical Disability.*

Caregivers found the instructions straightforward but debated the recall period. Some valued the simplicity of 'TODAY', while others questioned its ability to capture their child's health.

*"...we have a very fluctuating condition...it would be kind of hard if it wasn't asking for today for me to know what to put".*

*P1, 1-2 years, Mitochondrial Disease.*

Table 1. Caregiver Characteristics

		FG1 (n = 4)	FG2 (n = 7)
Relationship to Child	Mother	4	3
	Father	0	4
Age of Child Under 3	0 – 12 months	0	1
	1 – 2 years	0	3
	2 – 3 years	4	3
Severity (Child's Condition)	Healthy	3	0
	Mild	1	1
	Severe	0	6

### Theme: Caregiver Perspectives on EQ-TIPS Candidate Items

**Movement** (For example, holding, reaching, head control, sitting, crawling or walking)

Understood as physical actions and environmental interactions. Challenges were noted in assessing infant movement (normal vs. abnormal) and the items relevance for children with disabilities was questioned.

**Emotions** (For example, seems content or comforted when upset)

Uncertainty about whether it referred to emotional expression or regulation. Assessing severity and deviation from age-appropriate norms was confounded by personality, age and sibling dynamics.

*"My son...he's my first and I don't have anything to compare him to in terms of his emotions...if another parent looked after him, they may say he has a lot or extreme problems."*

*P2, 2-3 years, Syndrome Without A Name (SWAN)*

**Social Relationships** (For example, interacting or responding to others they know well through eye contact, smiling, laughing or talking)

Caregivers understood the item as social interactions or behaviours within relationships. Including more age-appropriate examples and accounting for variations in children with complex conditions could enhance clarity.

*"My daughter is deaf and visually impaired...its hard for her to...socially engage...she's got a lot of barriers that stop her from getting that information"*

*P15, 1-2 years, Rare Genetic Condition(s).*

**Eating/ Feeding** (For example, comfortably sucking, swallowing or keeping food down)

Problems were attributed to appetite, behavioural and functional eating/ feeding issues. The impact of these problems on the child's health and development was also discussed.

**Play** (For example, playing with objects, toys or games, with others or alone)

Ambiguity was noted in the wording and overlap with movement, social relationships and communication. Key elements of play, like pretend play and using objects in unconventional ways were considered missing. The unique role of play in early childhood development was highlighted.

*"...the unique role [of play] is the interaction with objects...especially in older kids, like whether they...pretend play or not."*

*P8, 2-3 years, Healthy.*

**Sleeping** (For example, difficulty getting to sleep or staying asleep affecting activities or making the child grumpy)

Understood as intended, caregivers discussed the importance of sleep on the wellbeing of their child. Some caregivers, highlighted the challenges of assessing sleep for such a young age-range.

**Communication** (For example, cooing, gurgling, babbling, gesturing or speaking)

Understanding communication was challenging due to overlap with social relationships, context variation, and lack of distinction between expressive and receptive communication.

*"...especially in young children, [they] communicate differently with different people...this is probably not being captured by one item on a questionnaire."*

*P8, 2-3 year, Healthy.*

**Pain** (For example, crying non-stop, restless movement, making a face or wincing, whimpering)

Caregivers found it challenging differentiating between everyday discomfort and problematic pain when assessing the item.

*"...I thought of the frequency of these episodes, reading just pain I couldn't really tell what I needed to think of, so what's written after was very helpful"*

*P4, 2-3 years, Healthy.*

## Conclusion

This study highlights the content validity of the EQ-TIPS and the need to refine items for better clarity, inclusivity, and age-appropriateness in assessing early childhood development. Findings will be integrated with multi-national data to guide further modifications and psychometric evaluation. Bibliography can be found [here](#).

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