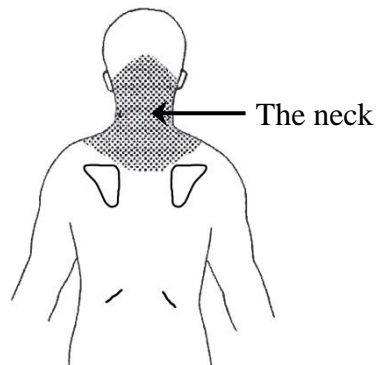


Appendix 1. English version of the 'Young Spine Questionnaire'

Name _____ Class _____

This questionnaire is related to the spine and neck. Use only one cross (X) to answer each question. If none of the answers are suitable, place your cross by the answer that is best suited.

1. The neck is shown in the picture



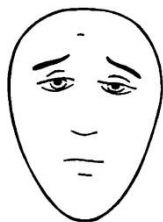
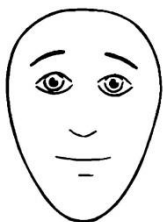
Person seen from behind

- 1a. Have you had pain in the neck? Often
 Once in a while
 Once or twice
 Never
- 1b. Have you had neck pain in **the last week**? Yes
 No
- 1c. Have you had neck pain **today**? Yes
 No

The faces below show how much something can hurt. The pain ranges from 'No pain' to 'A lot of pain'.

- 1d. Put a cross (X) on the face which shows how much pain you have had in the neck when it was worst.

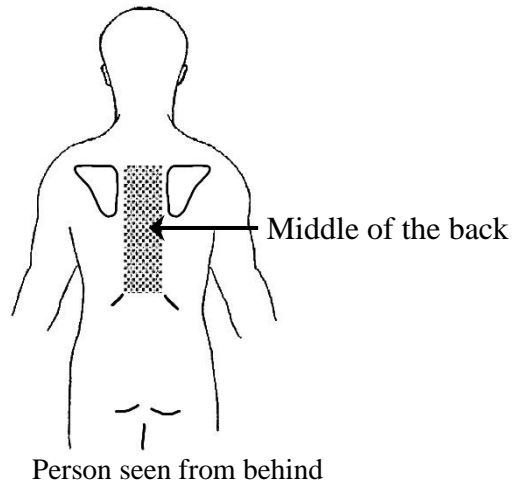
No pain



A lot of pain

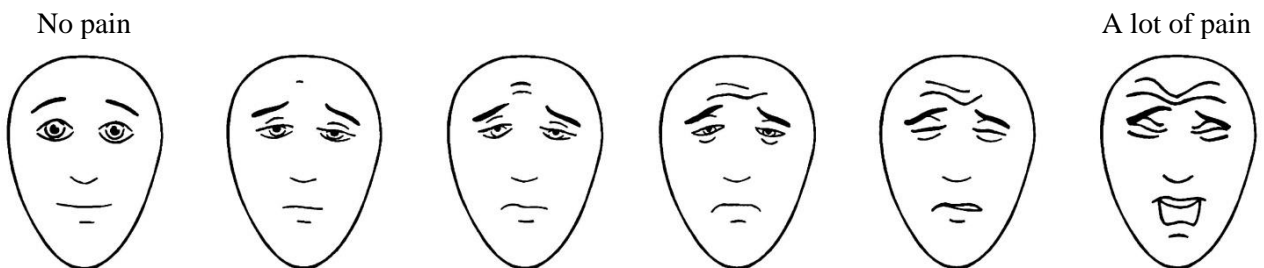


2. The middle of the back is shown in the picture.

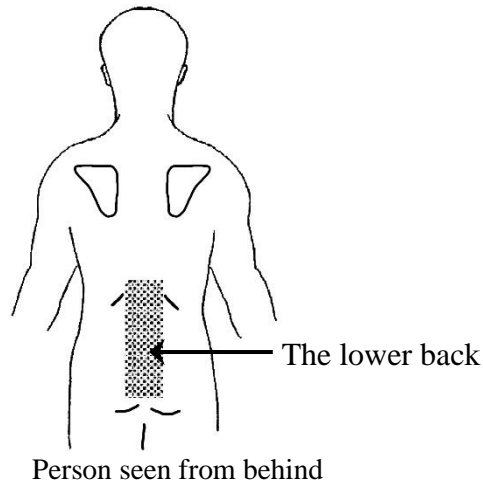


- 2a. Have you had pain in the middle of the back? Often
 Once in a while
 Once or twice
 Never
- 2b. Have you had pain in the middle of the back in **the last week**? Yes
 No
- 2c. Have you had pain in the middle of the back **today**? Yes
 No

2d. Put a cross (X) on the face which shows how much pain you have had in the middle of the back when it was worst.



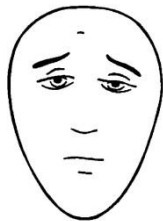
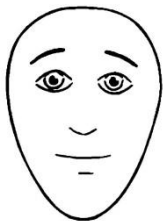
3. The lower back is shown in the picture.



- 3a. Have you had pain in the lower back? Often
 Once in a while
 Once or twice
 Never
- 3b. Have you had pain in the lower back in **the last week**? Yes
 No
- 3c. Have you had pain in the lower back **today**? Yes
 No

3d. Put a cross (X) on the face which shows how much pain you have had in the lower back when it was worst.

No pain



A lot of pain



4. School, recreation and treatment

- 4a. Have you stayed home from school because of neck or back pain? Often
 Once in a while
 Once or twice
 Never
- 4b. Has neck or back pain sometimes stopped you from doing sports? Often
 Once in a while
 Once or twice
 Never
- 4c. Have you been to a doctor, chiropractor or physiotherapist because of neck or back pain? Often
 Once in a while
 Once or twice
 Never

5. The family

- 5a. Has your **father** or stepfather ever had back or neck pain? Yes
 No
- 5b. If he has, has it kept him home from work? Often
 Once in a while
 Never
- 5c. Has your **mother** or stepmother ever had back or neck pain? Yes
 No
- 5d. If she has, has it kept her home from work? Often
 Once in a while
 Never