

Below are a series of statements concerning your child's skin disease, Please answer as spontaneously as possible
There are no rights or wrongs answers, only your answer. Thank you for your participation.

My child's skin disease has made us want to move.	☐ definitely yes	☐ maybe	☐ definitely not	☐ I don't know
My child's skin disease has made me want to quit my job.	☐ definitely yes	☐ maybe	☐ definitely not	☐ I don't know
My child's skin disease affects my sleep.	☐ definitely yes	☐ maybe	☐ definitely not	☐ I don't know
My child's skin disease complicates our family life.	☐ definitely yes	☐ maybe	☐ definitely not	☐ I don't know
I spend the day thinking about my child's skin disease	☐ definitely yes	☐ maybe	☐ definitely not	☐ I don't know
My child's skin disease prevents us from going on vacation.	☐ definitely yes	☐ maybe	☐ definitely not	☐ I don't know
My child needs more attention than other children because of his/her skin disease.	☐ definitely yes	☐ maybe	☐ definitely not	☐ I don't know
Our child's skin disease has forced us to rethink our plans for the future.	☐ definitely yes	☐ maybe	☐ definitely not	☐ I don't know
Our child's skin disease causes us to neglect his/her brothers and sisters.	☐ definitely yes	☐ maybe	☐ definitely not	☐ I don't know
My child's skin disease prevents me from going to see my family.	☐ definitely yes	☐ maybe	☐ definitely not	☐ I don't know
Because of my child's skin disease, my family does not come to see us.	☐ definitely yes	☐ maybe	☐ definitely not	☐ I don't know
Our child's skin disease creates problems between me and my partner.	☐ definitely yes	☐ maybe	☐ definitely not	☐ I don't know
I often feel frustrated after consultations related to our child's skin disease.	☐ definitely yes	☐ maybe	☐ definitely not	☐ I don't know
People's reactions to our child's skin disease are hard to accept.	☐ definitely yes	☐ maybe	☐ definitely not	☐ I don't know
I feel guilty because of our child's skin disease.	☐ definitely yes	☐ maybe	☐ definitely not	☐ I don't know
My child's skin disease has completely disrupted my life.	☐ definitely yes	☐ maybe	☐ definitely not	☐ I don't know
I have not managed to accept our child's skin disease.	☐ definitely yes	☐ maybe	☐ definitely not	☐ I don't know
I have a hard time getting used to the smell caused by our child's skin disease.	☐ definitely yes	☐ maybe	☐ definitely not	☐ I don't know
Because of his/her skin disease, I have great difficulty finding someone to babysit my child.	☐ definitely yes	☐ maybe	☐ definitely not	☐ I don't know
Because of his/her skin disease, my child has a lot of difficulties at school.	☐ definitely yes	☐ maybe	☐ definitely not	☐ I don't know
Because of his/her skin disease, I fear for the future of my child.	☐ definitely yes	☐ maybe	☐ definitely not	☐ I don't know
I'm growing tired of the daily care.	☐ definitely yes	☐ maybe	☐ definitely not	☐ I don't know
I don't feel well the day before I go to hospital.	☐ definitely yes	☐ maybe	☐ definitely not	☐ I don't know
I don't feel well the day after I go to hospital.	☐ definitely yes	☐ maybe	☐ definitely not	☐ I don't know
The care I must provide to my child is extremely tiring.	☐ definitely yes	☐ maybe	☐ definitely not	☐ I don't know