

a)



17. Please answer the question based on YOUR OPINIONS of how much this child's skin problem has affected him/her OVER THE LAST WEEK based on the images that you see.

	Very much	Quite a lot	Only a little	Not at all
How upset or sad do you think this child has been because of his/her skin?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How embarrassed or self-conscious, do you think this child has been because of his/her skin?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How much do you think this child's skin affected his/her friendships?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How much trouble do you think this child has had because of his/her skin with other people calling him/her names, teasing, bullying, asking questions, or avoiding him/her?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How much do you think this child has changed or worn different or special clothes/shoes because of his/her skin?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How much do you think this child's skin trouble affected going out, playing or doing hobbies?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How much do you think this child has avoided swimming, or other sports because of his/her skin trouble?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How much do you think this child's skin problems have interfered with his/her school work?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How much do you think the child's sleep has been affected by his/her skin problem?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How much of a problem do you think the treatment for his/her skin has been?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

b)



17. Please answer the question based on YOUR OPINIONS of how much this child's skin problem has affected him/her OVER THE LAST WEEK based on the images that you see.

	Very much	Quite a lot	Only a little	Not at all
How upset or sad do you think this child has been because of his/her skin?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How embarrassed or self-conscious, do you think this child has been because of his/her skin?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How much do you think this child's skin affected his/her friendships?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How much trouble do you think this child has had because of his/her skin with other people calling him/her names, teasing, bullying, asking questions, or avoiding him/her?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How much do you think this child has changed or worn different or special clothes/shoes because of his/her skin?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How much do you think this child's skin trouble affected going out, playing or doing hobbies?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How much do you think this child has avoided swimming, or other sports because of his/her skin trouble?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How much do you think this child's skin problems have interfered with his/her school work?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How much do you think the child's sleep has been affected by his/her skin problem?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How much of a problem do you think the treatment for his/her skin has been?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

c) These two images depict the same child. Image 1 shows a child with a large birthmark. Image 2 shows the same child after surgical removal of the birthmark.



Fig. S2. Examples of 1 of the screen frames from surveys (a) 1, (b) 2 and (c) 3.