

Construct validity and test-retest reliability of the Swedish version of the Acceptance of Chronic Health Conditions Scale (Swe-ACHC)

Andreas Wallin ^{a, b}, Mia Forslin ^b, Sverker Johansson ^{a, c}, Marie Kierkegaard ^{a, c, d}

^a Karolinska Institutet, Huddinge, Sweden. ^b Rehab Station Stockholm, Solna, Sweden. ^c Karolinska University Hospital, Stockholm, Sweden. ^d Academic Specialist Center, Stockholm, Sweden.

Conclusion

- The Swe-ACHC has satisfactory construct validity, good test-retest reliability and acceptable measurement errors
- The Swe-ACHC can be used in research and in clinical practice
- A ± 10 points sum score change is considered a “true” change

Aim

To evaluate construct validity and test-retest reliability of the Swe-ACHC in persons with Multiple Sclerosis (MS)

Introduction

- The Acceptance of Chronic Health Conditions Scale (ACHC) consists of 10 items scored on a Likert rating scale
- The ACHC was translated into Swedish and cross-culturally adapted
- The Swe-ACHC had acceptable internal scale validity, internal consistency and ability to separate between groups
- For clinical and research use, further exploration of validity and reliability of the Swe-ACHC was needed

Methods

- The Swe-ACHC was tested in 138 persons
- Data were collected twice, one week apart
- Predefined hypotheses about relationships between the Swe-ACHC and other measures – Sense of Coherence Scale, Fatigue Severity Scale, Beck Depression Inventory, Multiple Sclerosis Impact Scale, EuroQoL-Visual Analogue Scale, Life Satisfaction checklist – were set and explored

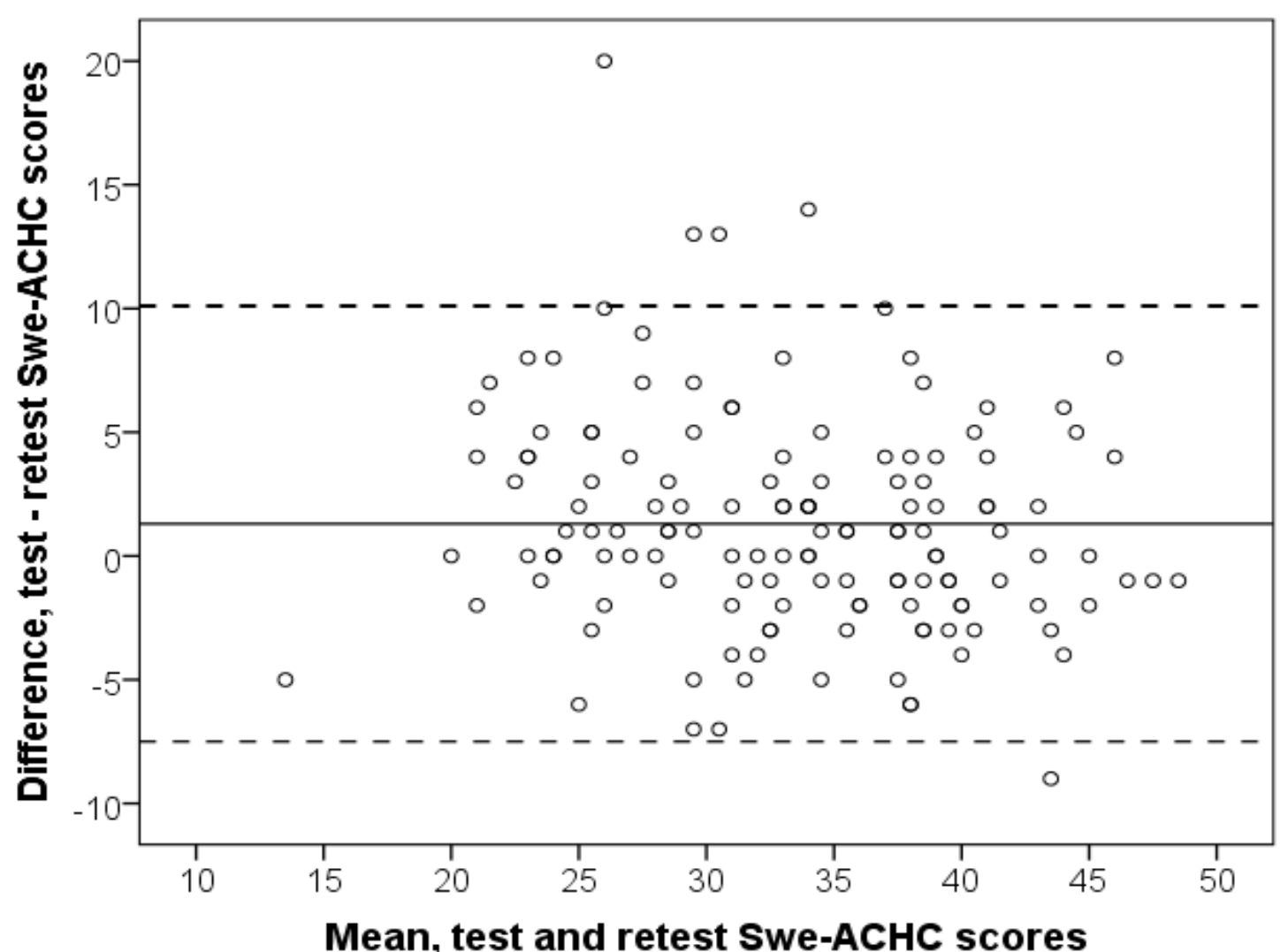


Figure 1. A Bland-Altman plot for data from test and retest occasions (n=138). The mean of the Swe-ACHC sum scores from test and retest occasions plotted against the difference between scores from test and retest occasions for each participant.

Results

- 78% of predefined formulated construct validity hypotheses were confirmed
- Reliability was satisfactory:
 - Intraclass correlation coefficient = 0.80
- Measurement errors were acceptable:
 - Standard error of measurement 3.3 points
 - Limits of agreement -7.5 and 10
- A ± 10 points change of the Swe-ACHC sum score could be interpreted as a “true” change in acceptance for an individual with MS

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Karolinska Institutet

Andreas Wallin,
Dept. of Neurobiology, Care Sciences and Society,
Division of Physiotherapy,
Alfred Nobels Allé 23
141 83 Huddinge, Sweden.
E-mail: andreas.wallin@ki.se
Telephone: +46 8 524 888 41



Karolinska
Institutet