ORIGINAL ARTICLE

Validation of the Portuguese version of the Personal Outcomes Scale

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Abstract
Background/Objective: Quality of life (QOL) is actually helpful to organizations for guiding personalized support plans and enhance personal outcomes. However, there is a lack of consensus about the QOL construct in the field of intellectual disability (ID). This study aims (a) to analyze the first-order factor structure (i.e., eight domains) of the Portuguese version of the Personal Outcomes Scale (POS), and (b) to compare two alternative models of the higher factor structure of the QOL construct (i.e., Salamanca and Schalock).
Method: Both aims were investigated by examining self-report and report-of-others measures. Data were collected from 1,264 adults with mild or moderate levels of ID and respective proxies.
Results: Results from confirmatory factor analysis (CFA) showed evidence of suitable psychometric properties of the QOL dimensions. Findings also highlighted that the first-order model was more robust than either of the two second-order models. Nevertheless, the Schalock structure was stronger than the Salamanca structure.
Conclusions: Although further research is needed, the results reveal that the Portuguese POS may be a valid and reliable instrument to measure QOL of adults with ID. The implication of these results are discussed highlighting the scale as a useful tool to serve as the basis for planning and evaluating personalized supports.
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Validación de la versión Portuguesa de la Escala de Resultados Personales

Resumen
Antecedentes/Objetivo: La calidad de vida (CV) es útil a las organizaciones, permitiendo mejorar los resultados personales. Sin embargo, hay una falta de consenso sobre la construcción de

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Análisis factorial
confirmatorio;
Estudio instrumental

la CV en personas con discapacidad intelectual (DI). Este estudio tiene como objetivo (a) analizar los factores de primer orden de la versión portuguesa de la *Personal Outcomes Scale* (POS), y (b) comparar dos modelos alternativos de segundo orden (Salamanca y Schalock).

Método: Estos dos objetivos fueron investigados a través de medidas del autoinforme y del informe de los otros. Los datos fueron recogidos de 1.264 personas con DI leve o moderada y sus respectivos cuidadores.

Resultados: Los resultados de la análisis factorial confirmatorio (AFC) indicaron valores psicométricos apropiados de las dimensiones de la CV. Los resultados mostraron que el modelo de primer orden era más robusto que cualquier uno de los dos modelos de segundo orden. No obstante, la estructura de Schalock fue más fuerte que la estructura de Salamanca.

Conclusiones: Aunque sea necesario más investigación, la POS portuguesa es un instrumento válido y fiable para medir la CV de personas con DI. La implicación de esta escala se discute como una herramienta útil para servir como base para la planificación y evaluación de apoyos personalizados.

The examination of the construct of quality of life (QOL) has been a consistent topic in the literature over the past three decades. The concept has been used as a key desired outcome in education or rehabilitation and has been a guide about personal values (Schalock, Bonham, & Verdugo, 2008). QOL has been the basis of an increasing amount of research focused on understanding the underlying concept of QOL in the field of intellectual disability (ID; Claes, Van Hove, Van Loon, Vandevelde, & Schalock, 2010). QOL is ''a multidimensional phenomenon composed of core domains influenced by personal characteristics and environmental factors. These core domains are the same for all people, although they may vary individually in relative value and importance'' (Schalock, Keith, Verdugo, & Gómez, 2010, p. 21). The concept is progressively being used as a sensitizing notion, social construct, and overarching theme for planning, delivering, and evaluating personalized supports (Claes, Van Hove, Vandevelde, Van Loon, & Schalock, 2012; Schalock, Verdugo, & Gómez, 2011; Van Loon et al., 2013). The QOL framework aims to meet challenges and overcome barriers that people with ID have been facing, as well as to improve public policies or service practices to address their needs and choices.

In the field of ID, different QOL frameworks have been reported in the literature and ''there is usually no indication that the component parts have some form of hierarchical structure or causal sequence'' (Cummins, 2005, p. 701). Each approach has an impact on the QOL assessment and many tools have been developed for this purpose (e.g., Van Loon, Van Hove, Schalock, & Claes, 2009; Verdugo, Arias, Gómez, & Schalock, 2010; Verdugo, Gómez, Arias, Navas, & Schalock, 2014). Whereas there is a consensus that QOL is a multidimensional concept, no common conceptualization has been accepted about the number of the core domains and indicators (Simões, Santos, & Claes, 2015a).

Our research is based on Schalock and Verdugo's (2002) conceptual framework, because this construct of QOL is one of the most cited, used, and has further provided a pivotal impact on research or practice related to people with ID (Gómez, Verdugo, Arias, & Arias, 2011). According to Schalock and Verdugo (2002), the concept of QOL:

(a) is multidimensional, (b) has objective and subjective indicators, (c) has etic (universal) and emic (culture-bound) properties, and (d) is influenced by personal and environmental characteristics. The authors also suggested that QOL is composed by eight core domains, including: personal development, self-determination, interpersonal relations, social inclusion, rights, emotional well-being, physical well-being, and material well-being. The domains (i.e., latent variables) and respective indicators (i.e., observed variables) determine the construct of QOL, yet domains and indicators' importance vary upon individual preferences or desires (Claes et al., 2010; Schalock et al., 2008; Schalock & Verdugo, 2002). There has been consistent verification and validation of this multidimensional model of QOL (e.g., Carbó-Carreté, Guàrdia-Olmos, & Giné, 2015; Gómez et al., 2011; Jenaro et al., 2005; Schalock et al., 2005; Wang, Schalock, Verdugo, & Jenaro, 2010).

The analysis of the factor structure or hierarchical nature remains a critical element of the QOL construct (Gómez et al., 2011; Wang et al., 2010). It seems to be enough evidence of the eight core QOL domains, but there are few studies about the factor structure validation (Gómez et al., 2011). Furthermore, although only one first-order structure (i.e., multidimensional model) exists, there are two potential hierarchical factor structures (i.e., Salamanca versus Schalock). Both solutions have three slightly different second-order constructs. The Salamanca model (Jenaro et al., 2005) consists of personal well-being (i.e., emotional well-being, interpersonal relations, self-determination, and personal development), physical and material well-being, and empowerment (i.e., rights and social inclusion). The Schalock model (Schalock et al., 2005) consists of independence (i.e., personal development and self-determination), social participation (i.e., interpersonal relations, social inclusion, and rights), and well-being (i.e., emotional well-being, physical well-being, and material well-being).

The first unique contribution of the current research is related to the context in which the data were collected (i.e., Portugal). In some European countries, the need to know more about QOL has been arising due to the fact that this concept is paramount to the Quality Certification