

ORIGINAL RESEARCH—OUTCOMES ASSESSMENT

Arabic Translation of Female Sexual Function Index and Validation in an Egyptian Population

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ABSTRACT

Introduction. Female sexual dysfunction (FSD) is a prevalent health problem that has been inadequately investigated in the Arab world. An Arabic assessment instrument for FSD is urgently needed.

Aim. To validate the Arabic version of the Female Sexual Function Index (ArFSFI).

Methods. This is a cross-sectional study conducted between January and April 2010. Eight hundred and fifty-five women (16–60 years old) participated in the study. Validation was carried out on aspects of face, content, discriminant, and criterion (concurrent) validity. Construct validity was evaluated using principal component analysis. Reliability studies on test–retest and on internal consistency were conducted with Pearson correlation and Cronbach's alpha, respectively. The best cutoff point for the ArFSFI to differentiate cases and noncases was determined using a receiver operating characteristic (ROC) curve.

Main Outcome Measure. Parameters of validity and reliability of the ArFSFI and its domains.

Results. ArFSFI total score and scores of various domains showed high test–retest reliability (r from 0.92 to 0.98). ArFSFI domains showed high internal consistency (α from 0.85 to 0.94). Six hundred and forty-four women (75.32%) met the Diagnostic and Statistical Manual of Mental Disorders, 4th edition, criteria for diagnosis of sexual dysfunction while 211 women (24.68%) showed normal function. The ArFSFI was found to have good discriminant validity. There were significant differences between the mean scores of women with sexual dysfunction and those of women without sexual dysfunction. A total score of 28.1 was taken as the cutoff point for the ArFSFI to distinguish between women with FSD and women with normal function (sensitivity 96.7%, specificity 93.2%). The ArFSFI showed an excellent overall performance (area under the curve [AUC] = 0.985, 95% confidence interval 0.978–0.992).

Conclusion. The ArFSFI is a validated, reliable, and locally accepted tool for use in the assessment of FSD in the Egyptian population. **Anis TH, Aboul Gheit S, Saied HS, and Al_kherbash SA. Arabic translation of female sexual function index and validation in an Egyptian population. J Sex Med 2011;8:3370–3378.**

Key Words. Female Sexual Function Index; Arabic Version; Validation Studies; Psychometry

Introduction

The Arab world refers to Arabic-speaking countries stretching from the Atlantic Ocean in the West to the Arabian Sea in the East, and from the Mediterranean Sea in the North to the Horn of Africa and the Indian Ocean in the South-east. It consists of 21 countries and territories with a combined population of 360 million people straddling North Africa and Western Asia.

The last decade has witnessed an exponential increase of medical research in the area of male sexual dysfunction, coming from Arabic-speaking countries. On the other hand, female sexual function research in that part of the world is still in its infancy. Unlike the case of female sexual function, many validated Arabic tools to assess the male sexual function have been developed [1–3]. The delay in the advancement of female sexual function research is attributed largely to the conservative

nature of the Arabic culture toward sex, in general, and female sexuality, in particular. The lack of an Arabic self-report instrument that demonstrates both reliability and validity is another obstacle for the advancement of female sexual medicine research. Without such a tool, outcome research in female sexuality will continue to lag behind that of male sexuality.

Many self-report assessment tools have been developed to help in identifying problems with the various components of female sexual response. Some of these tools are rather general scales focusing on all or several aspects of female sexual response like the Golombok–Rust Inventory of Sexual Satisfaction (GRISS) [4], the Brief Index of Sexual Functioning for Women [5], the Derogatis Interview for Sexual Functioning [6], the Female Sexual Function Index (FSFI) [7], and Sexual Function Questionnaire [8]. Other scales focus on a particular population or a particular aspect of female sexual function, such as the Hypoactive Sexual Desire Disorder (HSDD) Screener [9] for the assessment of hypoactive sexual desire disorders in postmenopausal women, the Decreased Sexual Desire Screener [10] for identifying HSDD, or The Female Genital Self-Image Scale [11] for the assessment of genital self-image satisfaction.

FSFI, which was developed by Rosen et al. in 2000, is a 19-item multidimensional self-reporting measure that quantifies six domains of female sexual dysfunction (FSD), including desire, arousal, lubrication, orgasm, satisfaction, and pain [7]. It has been shown in several validation studies that FSFI is highly reliable and valid [12–15]. The contents are not too sexually explicit, which may make it suitable for use in the more conservative Arabic society. So far, FSFI has been translated into more than 20 languages, and it has become the de facto “gold standard” in the assessment of female sexual function and an indispensable tool in clinical research of FSD [16].

Objective

The objective of this study is to validate the Arabic version of the Female Sexual Function Index (ArFSFI).

Methods

Study Design and Setting

This is a cross-sectional study conducted between January and April 2010 at the outpatient clinic of

Cairo University Hospital, a 4,500-bed hospital receiving referrals from all over Egypt.

Study Population

A nonprobability (accidental sampling) method was used. Females willing to join the study and fulfilling the inclusion criteria were included in the study. The inclusion criteria were as follows: (i) age between 16 and 60 years; (ii) married and sexually active during the past 6 months; (iii) able to give consent; and (iv) able to read and understand Arabic.

Instruments

The following instruments were used in the study:

- 1 A sociodemographic profile form to obtain information about study participants, such as age, educational level, living environment, as well as medical and menstrual history. History of female genital cutting (FGC), and the type and age at FGC was also obtained.
- 2 The ArFSFI is the FSFI translated into the Arabic language.
- 3 The Diagnostic and Statistical Manual of Mental Disorders, 4th edition (DSM-IV), published by the American Psychiatric Association, is a widely used instrument for diagnosing psychiatric illnesses. DSM-IV was used as the “gold standard” against which the ArFSFI was validated [17].

Study Procedures

The study procedures are shown in Figure 1.

Phase I: Translation, and Face and Content Validity

The Arabic version of the FSFI was prepared using the back-translated technique [18]. During the translation process, simple formal Arabic was adapted to make the questionnaire clear and understandable. The ArFSFI was then evaluated for face validity through a pilot study, in which it was administered to 20 female medical students. It was observed whether ArFSFI was “on its face” a good translation of the original instrument. The ArFSFI was then presented to a panel of sexual medicine experts for content validity assessment. The panel consisted of four experts from the Department of Andrology, Cairo University, with at least 20 years clinical experience in sexual medicine. Upon reviewing the panel’s comments, the authors modified wordings that were not clear, confusing, or would not be accepted by Arabic women.

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