



International Journal of Clinical and Health Psychology

www.elsevier.es/ijchp



ORIGINAL ARTICLE

Psychometric properties of a Spanish-version of the Schizophrenia Objective Functioning Instrument (Sp-SOFI)



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Received 30 April 2015; accepted 28 July 2015

Available online 25 August 2015

KEYWORDS

Schizophrenia;
SOFI;
Functional capacity;
Cognitive
impairment;
Instrumental study

Abstract The Schizophrenia Objective Functioning Instrument (SOFI) is an interviewer-administered scale designed to objectively assess the actual level of patient functioning and to measure community functioning related to cognitive impairment and psychopathology. The aim was to examine the psychometric properties of the Spanish version of the SOFI (Sp-SOFI) in a sample of 155 Spanish outpatients with schizophrenia disorder. The instruments applied were Sp-SOFI, Positive and Negative Syndrome Scale (PANSS), Clinical Global Impression-Schizophrenia Scale (CGI-SCH), Personal and Social Performance Scale (PSP), and Global Assessment of Functioning (GAF). The discrimination indexes of the Sp-SOFI items range from .21 to .77. Exploratory factor analysis showed an essentially one-dimensional structure. Cronbach's alpha was .93. Test-retest reliability for the Sp-SOFI total score was .87 ($p < .001$). The canonical correlation between SP-SOFI domains and PSP dimensions was .83. The multiple correlation coefficient between Sp-SOFI domains and GAF score was .84. Sp-SOFI scores were significantly different

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between high and low scores on the PANSS scales ($p < .001$). Sp-SOFI measures discriminated among patients with doubtful, mild, moderate, and severe schizophrenia disorder according to CGI-SCH scales ($p < .001$). New evidence about the validity of the SOFI was provided. The Sp-SOFI is a reliable and valid tool for using in clinical practice.

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PALABRAS CLAVE

Esquizofrenia;
SOFI;
capacidad funcional;
daño cognitivo;
estudio instrumental

Propiedades psicométricas de la versión en español del Instrumento de Funcionamiento Objetivo para la Esquizofrenia (Sp-SOFI)

Resumen El Instrumento de Funcionamiento Objetivo para la Esquizofrenia (SOFI) es una entrevista para evaluar el nivel de funcionamiento comunitario en relación con el daño cognitivo y los síntomas psicopatológicos. El objetivo del estudio consistió en examinar las propiedades psicométricas de la versión española de la SOFI (Sp-SOFI) en una muestra de 155 pacientes ambulatorios con esquizofrenia. Los índices de discriminación de la Sp-SOFI oscilaron entre 0,21 y 0,77. El análisis factorial exploratorio mostró una estructura esencialmente unidimensional. El alfa de Cronbach fue 0,93. El coeficiente de fiabilidad test-retest fue 0,87 ($p < 0,001$). La correlación canónica entre la Sp-SOFI y la Escala de Funcionamiento Personal y Social (PSP) fue 0,83. El coeficiente de correlación múltiple entre la Sp-SOFI y la Escala de Evaluación de la Actividad Global (EEAG) fue 0,44. Las puntuaciones en la Sp-SOFI fueron significativamente diferentes entre los pacientes con puntuaciones altas y bajas en la Escala del Síndrome Positivo y Negativo (PANSS) ($p < 0,001$). La Sp-SOFI discriminó entre pacientes con trastorno de esquizofrenia dudoso, leve, moderado y grave de acuerdo con la Escala de Impresión Clínica Global de Esquizofrenia (CGI-SCH) ($p < 0,001$). La Sp-SOFI es un instrumento fiable y válido para la práctica clínica.

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Schizophrenia is associated with substantial impairments in functional outcomes, including social and occupational functioning, independent living, and the ability to perform activities of daily living (Green, Kern, Braft, & Mints, 2000). Additionally, several studies have shown that cognitive functions are impaired in patients with schizophrenia, and these impairments also have a real impact on the daily functioning of patients with this disorder (García-Portilla et al., 2014; Gavilán & García-Albea, 2014; Menéndez-Miranda et al., 2015). They include significant deficits in memory, attention, problem solving, processing speed, and social cognition, which have been shown to be associated with several of the aforementioned functional impairments (Keefe et al., 2013). This association between cognition and outcome is robust and has been replicated and extended in many countries, using many different types of assessments, in different patient groups across phase of illness (Green & Harvey, 2014). The early detection of these matters is a challenge, particularly with respect to orientation of treatment (Gómez-Benito, Guilera, Pino, Tabarés-Seisdedos, & Marínez-Arán, 2014). One of the greatest difficulties in evaluating this issue is the borderline between negative and cognitive dimensions. It is generally accepted that these two dimensions present similar characteristics with respect to prevalence, difficulty of assessment, progression, prognostic implications, and lack of effective treatments. However,

it is also accepted that they constitute two dimensions that are independent but interrelated (García-Portilla & Bobes, 2013; García-Portilla et al., 2015).

The Schizophrenia Objective Functioning Instrument (SOFI) was developed to measure changes in functional outcomes due to patient psychopathology and cognitive impairment. From an initial meeting of experts four domains emerged as most relevant to a functional outcome measure in schizophrenia: 1) living situation (stability, structure/supervision, independence); 2) instrumental activities of daily living (financial management, transportation, medication, treatment, housework/childcare, self-care, shopping, food/cooking, planning and leisure activities); 3) productive activities (work, other vocational oriented activities, treatment-related activities, education, homemaking/childcare); and 4) social functioning (social activity and social support) (Kleinman et al., 2009). Existing measures were reviewed to identify relevant items. One of them was the WHO-DAS-II (Chisolm, Abrams, McArdle, Wilson, & Doyle, 2005), which is directly linked at the level of the concepts to the WHO's International Classification of Functioning, Disability and Health (ICF). This provides a framework for understanding the impact of environmental factors on functioning when a person has a health condition. Functioning and disability is increasingly being taken into account in assessing the impact of schizophrenia on the

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