Cross-cultural validation of an EORTC measure of spiritual wellbeing (SWB) for palliative care patients with cancer


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BACKGROUND

• No measures of SWB have yet been developed cross-culturally.

• Since 2002: European Organisation for Research and Treatment of Cancer (EORTC) Quality of Life Group (QLG):

• International cross-cultural development of an SWB measure for palliative patients, following EORTC QLG guidelines.
BACKGROUND

• 3 domains initially hypothesised:

<table>
<thead>
<tr>
<th>Personal relationships with self and others (&quot;P&quot;)</th>
<th>Existential (&quot;Q&quot;)</th>
<th>Religious (&quot;R&quot;)</th>
</tr>
</thead>
</table>


• Jan 2012-July 2013: Phase IV field-testing, validation of 36-item provisional measure.
METHODS

• 36-item provisional measure; structured debriefing interview.

• Plus EORTC QLQ-C15-PAL, socio-demographic and clinical data.

• Subset of test-retest data.

• Scale structure assessed using Principal Component Analysis (PCA) and Rasch analysis.
458 patient participants, 14 countries
458 patient participants, 14 countries

- Australia: 22
- Austria: 9
- Chile: 50
- China: 23
- France: 30
- Iran: 45
- Italy: 30
- Japan: 66
- Mexico: 37
- Netherlands: 52
- Norway: 41
- Singapore: 15
- Spain: 21
- UK: 17
Patient participant characteristics

• Gender: 208 M (46%), 240 F (54%)
• Age: range 20-89, median 60, mean 58.9
• Range of Ca sites, PF, prognoses
• Survival (dates deceased)
Religious faith

- Christian (41%)
- Muslim (11%)
- Buddhist (5%)
- Other religion
- None (35%)
- Missing/not asked/disclosed
RESULTS

- Good score distribution for all items.
- Very few missing responses.
- No remarkable differential item functioning (DIF) found for age, gender, geographical location or belief in God.
- Goodness of fit measures within guidelines.
- 275 patients (60%) had no problems with any items.
- 6 items caused difficulty for small percentages.
- 4 items deleted on basis of patient feedback plus PCA and Rasch analysis.
RESULTS

• 53% of the variance explained by 22 scoring items in 4 domains/subscales:

<table>
<thead>
<tr>
<th>Relationship with others (RO)</th>
<th>Relationship with self (RS)</th>
<th>Existential (EX)</th>
<th>Relationship with someone or something greater (RSG)</th>
</tr>
</thead>
<tbody>
<tr>
<td>N = 6</td>
<td>N = 5</td>
<td>N = 6</td>
<td>N = 5</td>
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</table>

• 10 items did not fit scoring scales, but retained for clinical relevance.
I have spiritual wellbeing
Live on through words and deeds
Believe in life after death
Important others pray for me
Time for quietness/prayer/meditation
Plan for the future
My life is worthwhile
My life is fulfilling
Find things I enjoy doing
Able to deal with problems
Peace with myself
Lonely
Troubled
Worries/concerns about the future
Unfair that I am ill
Can anything be done for me
Valued as a person
Able to forgive others
Able to trust others
Someone to talk to about my feelings
Loved by those important to me
Share thoughts with those close to me

Not at all  A little  Quite a bit  Very much  Missing

Brunel University London
East and North Hertfordshire NHS
MVCC NHS Trust
EORTC European Organisation for Research and Treatment of Cancer
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Share thoughts with those close to me
Not at all A little Quite a bit Very much Missing
CONCLUSIONS

• Revised measure currently being finalised.
• Further study planned to further validate revised version.
• Potential value for both research and clinical practice – assessing and intervening (initiating discussion).
• Future studies to explore interventions, recruit more people from minority ethnic and religious communities and other countries internationally (interest in Iceland, India, Kurdistan, Malaysia).
REFERENCES


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