Spanish Adaptation and Validation of the Outcome Questionnaire OQ-30.2

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This study assessed the psychometric properties of a Spanish version of the Shortened Outcome Questionnaire (OQ-30.2, Lambert et al., 2004) validated with a sample of 546 patients in an outpatient mental health clinic and 100 non-clinical adults in Chile. Our results show that this measure has similar normative data to the original measure, with a cutoff score for the Chilean population set at 43.36, and the reliable change index at 14. This Spanish OQ-30.2 has good internal consistency (α = 0.90), has concurrent validity with the Depressive, Anxious, and Somatoform disorders measuring scale (Alvarado and Vera, 1991), and is sensitive to change during psychotherapy. Consistent with previous studies, factorial analyses showed that both, the one-factor solution for a general scale and the three-factor solution containing three theoretical scales yielded poor fit estimates. Overall, our results are similar to past research on the OQ-45 and the OQ-30. The short version has adequate psychometric properties, comparable to those of the OQ-45, but provides a gain in application time that could be relevant in the setting of psychotherapy research with large samples, frequent assessments over time, and/or samples that may require more assistance completing items (e.g., low-literacy). We conclude that this measure will be a valuable instrument for research and clinical practice.

Keywords: adaptation, validation, psychotherapy outcome, measurement, psychotherapeutic process

INTRODUCTION

The Outcome Questionnaire OQ-30.2, developed by Lambert et al. (2004), measures progress in psychological functioning during treatment, in the context of both private and public health care. This measure is a shortened version of the OQ-45.2 (Outcome Questionnaire; Lambert et al., 1996), which monitors progress on three dimensions: subjective discomfort, interpersonal relationships, and social role performance (Lambert, 1983). These dimensions are intended to monitor an overall performance of the patient, but are not intended as a diagnostic tool. The OQ-30.2 was designed to be sensitive to change over short periods of time, and to assess common symptoms across a wide range of mental disorders in adults. Patients are requested to answer the questionnaire several times during treatment, and their performance is to be contrasted with both the performance of the general population, and their own performance over time.

The item selection for the OQ-30.2 was determined by prioritizing items that addressed common problems in the population and assessed social characteristics related to quality of life (Lambert et al., 2004). While being 15 items shorter than the OQ-45.2, and thus faster to administer, it has been claimed that the OQ-30.2 maintains the psychometric properties of validity, reliability, and sensitivity to change.