



Research on mistreatment of older adults in Quebec:

summaries of scientific articles



Further Validation of the QUALCARE Scale.

REFERENCE

Bravo, G., Girouard, D., Gosselin, S., Archambault, C., & Dubois, M.-F. (1995). Further Validation of the QUALCARE Scale. *Journal of Elder Abuse and Neglect*, 7(4), 29-48.

TEXT TYPE

Format: Scientific article
Content: Tool validation

DISCUSSED THEMES

Definition, forms of abuse at home, risk factors, factors of vulnerability, gender concept, screening, burden and stress, training.

GOAL OR RESEARCH QUESTION

This study aims at carrying out a more detailed validation of the QUALCARE tool (quality care assessment) by documenting the validity of the criteria. However, as it is based on a French version of the questionnaire, the inter-observer reliability, the internal consistency and the construct validity were re-examined.

PROBLEM

The aging of the population results in a growing number of seniors in need of care. Because of small families, the number of people able to take care of a dependent older adult keeps on decreasing. Moreover, caregivers often have multiple roles to play at the same time. The risk of abuse and neglect appear especially in cases where a caregiver is not prepared, incapable or not motivated to assume this role. Several instruments were developed to detect situations of abuse against seniors, but few of them were subject to a reliability and validity study.

METHODOLOGY

The scale was first translated following a rigorous protocol involving a translation committee and a professional translator. The sampling for this study consists of a dyad of 40 seniors (60 years and over, living at home, who need help for at least one daily living activity) and their health care providers. Each senior must also be known by at least two health or social services professionals who agree to provide an assessment of the possible existence of a situation of abuse within the dyad and its form (physical, psychological, social and/or legal). Subsequently, visits to the senior's home (approximately five hours) were carried out by two nurses, who complete the QUALCARE afterwards, thanks to various questionnaires and a semi-directed interview. Results are then compared to measure the inter-observer reliability.

RESULTS

Significant differences between the evaluations of nurses were first observed. It also appears that several variables are significantly related to a poor quality of care, either a low physical or cognitive autonomy as well as a weak social network of the senior person. We note that in situations where the quality of care is poor, the care provider is often a man living with the senior person, has an annual low income and limited education. However, the burden felt by the caregiver would be not related to a poor quality of care. It has been shown that the more the initial evaluation of the evidence of abuse is demonstrated, the less adequate the quality of care will be (according to nurses).

DISCUSSION

First, just as it was the case during the evaluation of the original version of the instrument, this study points out a low inter-observer reliability. However, it has been demonstrated in the past that more sophisticated training would allow the development of a measure of reproducible quality of care. The results still suggest that the QUALCARE is a valid indicator of the risk of abuse. Indeed, the results of this study support those of the validation of the original tool regarding internal consistency and validity of content. In addition, the scale and the four subscales have demonstrated their sensitivity to the category of mistreatment initially identified by the professionals. Finally, the factors identified as being related to a poor quality of care are also mentioned in the literature as risk factors for elder abuse.

CONCLUSION

This study has allowed us to provide a French version of the QUALCARE in order to make easier the identification of seniors who are victims of abuse. Results suggest that a more sophisticated training should be implemented to ensure a higher level of inter-observer reliability. Results also show the sensitivity of this instrument with respect to the possible presence of different forms of abuse.

AVENUES FOR PRACTICE AND RESEARCH

Formal additional help formal is proposed to families involved in the care of a dependent senior. Moreover, it opens the door to other studies on the generalization of the QUALCARE in different social and medical services. Finally, the possibility of reducing the number of statements in the questionnaire in order to decrease the time required for completion is also suggested.

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