

# Dutch validation of two questionnaires: Connor-Davidson Resilience Scale (CD-RISC) and Overall Anxiety Severity and Impairment Scale (OASIS).

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To validate both questionnaires for Dutch anxiety disordered patients.

<b>Ethical review</b>	Approved WMO
<b>Status</b>	Recruiting
<b>Health condition type</b>	Anxiety disorders and symptoms
<b>Study type</b>	Observational non invasive

## Summary

### ID

NL-OMON33038

### Source

ToetsingOnline

### Brief title

CD-RISC/OASIS

### Condition

- Anxiety disorders and symptoms

### Synonym

anxiety complaints, anxiety disorders

### Research involving

Human

### Sponsors and support

**Primary sponsor:** Parnassia Bavo Groep

**Source(s) of monetary or material Support:** Eigen middelen PsyQ

## Intervention

**Keyword:** anxiety disorders, questionnaire, resilience, validation

## Outcome measures

### Primary outcome

Reliability, validity. Quality of life. Cut off-score OASIS

### Secondary outcome

n.a.

## Study description

### Background summary

The CD-RISC (Connor-Davidson Resilience Scale, Connor & Davidson, 2003) and the OASIS (Overall Anxiety Severity And Impairment Scale, Campbell-Sills et al, 2008; Norman, Hami-Cissell, Means-Christensen & Stein, 2006) are two questionnaires which have been developed in the United States. The CD-RISC consists of 25 items and it is developed to evaluate resilience. The respondent can answer each item by scoring it on a 5 point-scale. The OASIS consists of 5 items and is developed to evaluate the severity of anxiety complaints. It also uses a multiple choice format.

Because of the rise of positive psychology (Linley & Joseph, 2004) and especially the attention that is been devoted to \*resilience\* by cognitive therapists (Kuyken, Padesky & Dudley, 2008a; 2008b), an instrument like the CD-RISC might be of great value. By validating the CD-RISC for Dutch patients, research into people\*s protective factors and into interventions designed to build and booster these becomes within the realm of possibility.

The OASIS is in several ways a very attractive questionnaire. Because it only consists of 5 items, it is a remarkably user friendly instrument. It has been shown a promising tool for screening and evaluation purposes in US research (Campbell-Sills et al, 2008) with regard to patients with all kinds of anxiety disorders, making it suitable for application within transdiagnostic treatment protocols. These are used more and more these days, and the first reports show optimism about their possible success (Allen, McHugh & Barlow 2008; Barlow, Allen & Choate, 2004; Norton & Philipp, 2008).

### Study objective

To validate both questionnaires for Dutch anxiety disordered patients.

## Study design

All patients who present with anxiety disorders at participating outpatient clinics of PsyQ will be handed out information and informed consent forms by the people at the reception desk after their initial interview. In PsyQ Haarlem, these are handed out to all patients. When informed consent is obtained, a meeting with a research assistant is scheduled. To avoid unnecessary burdening of patients, every effort will be made to schedule it before or after their first treatment session. The research assistant will administer the MINI and asks the patient to fill in all the questionnaires. Anxiety patients at PsyQ Haarlem will be asked to fill in the OASIS at the beginning of their second session as well, in order to obtain information regarding test-retest reliability in a clinical sample.

The following instruments will be administered: MINI-plus (Dutch adaptation; (Sheehan et al, 1998), Clinical Global Impression of Severity (CGI-S; NB standard procedure at PsyQ is that the intake scores this item, the research assistant uses this scorer), Brief Symptom Inventory (BSI; Beurs & Zitman, 2006), De Grote Vijf Persoonlijkheidstest (Dutch adaptation of the Big Five Inventory, BFI; Denissen, Geenen, Van Aken, Gosling & Potter, 2008), Beck Anxiety Inventory (BAI; Beck, Epstein, Brown & Steer, 1988), Utrechtse Copinglijst (UCL; Schreurs, Van De Willige, Brosschot, Tellegen & Graus, 1993), EuroQol (EQ-5D; The EuroQol Group, 1990; Lamers, Stalmeier, McDonnell, Krabbe & Van Busschbach, 2005), OASIS and CD-RISC.

After half a year, or sooner if treatment has already come to an end (in which case the therapist informs the research assistant), some instruments are administered again: MINI-plus, CGI-S, OASIS, CD-RISC, BSI, BAI, EQ-5D.

## Study burden and risks

The administration of MINI and questionnaires will take up to approximately one hour at the first assessment and 45 minutes at the second assessment. There are no apparent risks regarding health or well-being of patients. Because of validity purposes, studies like these require a significant amount of questionnaires to be administered. In case the OASIS fulfils its initial promise in The Netherlands as well, such an effort is surely worthwhile: We too have an instrument to assess impact of anxiety within a few minutes. If patients do so desire, they and their therapists are provided with feedback regarding the outcomes of the MINI and questionnaires, possibly resulting in improved treatment. This might be an advantage of taking part in the research project.

## Contacts

### Public

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## Trial sites

### Listed location countries

Netherlands

## Eligibility criteria

### Age

Adults (18-64 years)

Elderly (65 years and older)

### Inclusion criteria

Main diagnosis is an anxiety disorder.

### Exclusion criteria

Main diagnosis is another disorder (except for the control group in PsyQ Haarlem).

Acute suicidality, psychosis or severe addiction.

## Study design

## Design

Study type:	Observational non invasive
Intervention model:	Other
Allocation:	Non-randomized controlled trial
Masking:	Open (masking not used)
Control:	Active
Primary purpose:	Diagnostic

## Recruitment

NL	
Recruitment status:	Recruiting
Start date (anticipated):	01-07-2009
Enrollment:	1200
Type:	Actual

## Ethics review

Approved WMO	
Date:	12-06-2009
Application type:	First submission
Review commission:	METIGG: Medisch Ethische Toetsingscommissie Instellingen Geestelijke Gezondheidszorg (Utrecht)

## Study registrations

### Followed up by the following (possibly more current) registration

No registrations found.

### Other (possibly less up-to-date) registrations in this register

No registrations found.

## In other registers

### Register

CCMO

### ID

NL26895.097.09