

The Sickness Impact Profile 68 (SIP 68)

- generic health status measure.
- measures physical, mental and social aspects of health-related functioning in 6 subscales:
 - 1) Somatic autonomy (score: 0-17)
 - 2) Mobility control (score: 0-12)
 - 3) Mobility range (score: 0-11)
 - 4) Social behavior (score: 0-12)
 - 5) Emotional stability (score: 0-6)
 - 6) Psychological autonomy/communication (score: 1-10)
- contains statements regarding behavior “sickness impact” and the individual is asked to respond by checking items that describe their health status.

ICF Domain:

Quality of Life

Number of Items:

68

Instructions for Administration and Scoring:

Administration:

- can be administered by the interviewer or the client (self-report).
- All items are scored dichotomously (no=0, yes=1).
- Administration time is usually **15-20 minutes**.

Equipment: None.

Scoring:

- The items reported as “yes” are used to calculate the scores.
- The questions regarding walking are not relevant to wheelchair-dependent individuals and a scoring modification is proposed in such cases – for a “yes” response to the item “I cannot walk at all”, all 7 items related to walking are scored positively.

Interpretability:

MCID: not established

SEM: not established

MDC: not established

- Higher scores indicate more health-related behavioral problems (i.e. worse health state).
- The SIP-68 can be reported as an overall total score, three dimension scores (physical, psychological and social) or six sub-scale scores.
- No normative data have been established for the SCI population

- There is published data available for the SCI population for comparison (see the Interpretability section of the Study Details sheet).

Languages:

The full SIP (136 items) has been translated into several languages so far, including Spanish.

Training Required:

None.

Availability:

The full SIP (136 items) is available for purchase at: <http://www.mapi-trust.org/services/questionnairelicensing/catalog-questionnaires/296-sip>

Note: for individual clinical practice and non-funded academic research, use of the SIP is free.

Clinical Considerations:

- The SIP 68 is a commonly used health status measure and it is possible to compare results with various patient populations, including those with SCI. However, the evidence on the psychometric properties of the SIP 68 for a SCI population is limited and more research is needed to assess reliability and responsiveness.
- The response options (applies or does not apply to my situation) may cause deceptive figures in the SCI population because all items related to difficulties with walking will be scored negatively, causing a lower score indicating greater health-related status.

Measurement Property Summary:

of studies reporting psychometric properties: 3

Reliability:

- Internal consistency is **excellent** for the SIP-68 (Cronbach's $\alpha=0.88-0.92$).
[Post et al. 2001, Post et al. 1996]

Validity:

- Correlation of the SIP-68 is **excellent** with the Barthel Index ($r=0.74$) and **adequate** with the Life Satisfaction Questionnaire ($r=-0.52$).
[Post et al. 2001, Post et al. 1996, Post et al. 1998]

Responsiveness:

No values were reported for the responsiveness of the SIP-68 for the SCI population.

Floor/ceiling effect:

No values were reported for the presence of floor/ceiling effects in the SIP68 for the SCI population.

Reviewer:

Dr. Vanessa Noonan, Christie Chan

Date Last Updated:

Feb 1, 2013