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The Self-Care of Heart Failure Index version 7.2: Further psychometric testing

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Abstract

Clinicians and researchers need valid and reliable instruments to evaluate heart failure (HF) self-care. The Self-Care of Heart Failure Index (SCHFI) is a theoretically driven instrument developed for this purpose. The SCHFI measures self-care with three scales: self-care maintenance, measuring behaviors to maintain HF stability; symptom perception, measuring monitoring behaviors; and self-care management, assessing the response to symptoms. After the theory underpinning the SCHFI was updated, the instrument was updated to version 7.2 but it was only tested in the United States. In this study we tested the psychometric characteristics (structural and construct validity, internal consistency, and test-retest reliability) of the SCHFI v.7.2 in an Italian population of HF patients. We used a cross-sectional design to study 280 HF patients with additional data collected after 2 weeks for test-retest reliability. Adults with HF (mean age 75.6 (\pm 10.8); 70.8% in New York Heart Association [NYHA] classes II and III) were enrolled from six centers across Italy. Confirmatory factor analysis showed supportive structural validity in the three SCHFI v.7.2 scales (CFI from 0.94 to 0.95; RMSEA from 0.05 to 0.07). Internal consistency reliability estimated with Cronbach's α and composite reliability ranged between .73 and .88; test-retest reliability ranged between 0.73 and 0.92. Construct validity was supported with significant correlations between the SCHFI v.7.2 scale scores and quality of life, brain natriuretic peptide levels and NYHA class. This study further supports the psychometric characteristics of the SCHFI v.7.2, illustrating that it can be used in clinical practice and research also in an Italian population.

Keywords: heart failure; psychometrics; reliability; self-care; validity.

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