## Validation of Quality of Life (QoL) Scales in Palliative Care Dympna Waldron

Subjective health assessment scales are evaluated in terms of their content, construct and criterion validity for use in outcomes research and clinical practice. There are many problems with existing QoL outcome measures currently in use to assess the QoL of Palliative care patients. Some of the Health-Related Qol (HRQoL) questionnaires available for use are well tested psychometrically and are being developed with more and more sensitivity to the individual's perspective of what matters to their QoL. The existential domain or 'meaning of life' domain is receiving more recognition as an important contributor to overall QoL.

However, validity is the extent to which an instrument measures what it is intended to measure – in this case each individual's QoL. According to Anastasi (1988) the 'Validation process begins with the formulation of a detailed trait or construct definition derived from psychological theory, prior research or systematic observation and analysis of the relevant behavioual domain'. Hence to discuss the validation of QoL instruments, the definition of QoL needs to be clearly stated. Gill and Thomas (1994), conclude from their review of the QoL literature that "QoL is a uniquely personal perception, denoting the way individuals feel about their health status and /or non-medical aspects of their lives. Most measurements of QoL, in the medical literature, seem to aim at the wrong target. QoL can be suitably measured only by determining the opinions of patients and by supplementing (or replacing) the instruments developed by 'experts' "