The Appraisals of DisAbility: Primary and Secondary Scale (ADAPSS)

Assessment Overview

Assessment Area

ICF Domain:

Body Functions

Subcategory:

General Functions

You Will Need

Length:

Original version: 33 items.

Short-form: 6 items.

Scoring:

For both versions, scores range from 1 (strongly disagree) to 6 (strongly agree).

For specific instruction about the scoring algorithm, see the ADAPPS worksheet.

Summary

ADAPSS primary scale assesses 'an individual's initial evaluation of an event or situation'. Its secondary scale assesses 'an individual's evaluation of their own coping resources, the possibility of these resources being adequate, and the likelihood that these resources can be employed effectively'.

The scale consists of 6 subscales:

1. Fearful Despondency
2. Overwhelming Disbelief
3. Determined Resolve
4. Growth and Resilience
5. Negative Perceptions of Disability
6. Personal Agency

A short-form version was introduced in 2009 by Dean and Kennedy ([Dean and Kennedy 2009](#)).

Availability

Worksheet: Can be found [here](#).

Assessment Interpretability

Minimal Clinically Important Difference

Not established in SCI

Statistical Error

Not established in SCI

Typical Values

Mean scores reported for the ADAPSS-sf have varied from 13.94 to 19.21 (SD = 6.10-7.44)

(Eaton et al. 2018; n=371; 261 males, 110 females; non-traumatic and traumatic; injury level: Cervical-sacral; AIS A-D)
(Mignogna et al. 2014; n=98; 94 males, 4 females; mean (SD) age: 18.3 (13.1) years; tetraplegia (low): n=14, tetraplegia (high, AIS A,B,C): n=6, AIS D: n=41; traumatic injury: yes (77), no (21))
(Dean et al. 2020; n=115; age: 18 years or younger at time of SCI, initially interviewed at age 19 or older, and followed annually)
(McDonald et al. 2018; n=262; 92% males; median age: 59 years; traumatic and non-traumatic SCI; 51% AIS D; paraplegia and tetraplegia)

High scores on the Fearful Despondency, Overwhelming Disbelief, and Negative Perceptions of Disability subscales are more likely to appraise their injury in terms of loss and threat and to perceive their injury as unmanageable.

Low scores on the Determined Resolve, Growth and Resilience, and Personal Agency subscales were more likely to appraise their injury in terms of loss and threat and to perceive their injury as unmanageable.

Measurement Properties

Validity – **Low** to **High**

Low Correlation between the Perceived Manageability Scale – Needs Assessment Checklist and ADAPSS subscales (Fearful Despondency):

Fearful Despondency: $\rho=-.597$

Overwhelming Disbelief: $\rho=-.468$

Determined Resolve: $\rho=-0.599$

Growth and Resilience: $\rho=-.345$

Negative Perceptions of Disability: $\rho=-.533$

Personal Agency: $\rho=-.519$

High Correlation between the Hospital Anxiety and Depression Scale – Anxiety subscale and ADAPSS subscales:

Fearful despondency: $\rho=.649$ ($p<.01$)

Moderate Correlation between the Hospital Anxiety and Depression Scale – Anxiety subscale and ADAPSS subscales:

Overwhelming Disbelief: $\rho=.597$ ($p<.01$)

Determined Resolve: $\rho=.347$ ($p<.01$)

Negative Perceptions of Disability: $\rho=.496$ ($p<.01$)

Personal Agency: $\rho=.393$ ($p<.01$)

Low Correlation between the Hospital Anxiety and Depression Scale – Anxiety subscale and ADAPSS subscales

Growth and Resilience: $\rho=.187$ ($p<.01$)

(Dean & Kennedy 2009; n=237; 162 males, 75 females; mean age = 47 (range: 18-81); tetraplegia: 37%, paraplegia: 56%, unknown: 7%)

Low Significance in correlation between ADAPPS-sf total score and life satisfaction

$p<.001$

High Significance in correlation between ADAPPS-sf total score and controlling for depressive symptoms

$p<.604$

Low Significance in correlation between ADAPPS-sf total score and level of injury

$p<.051$

RANKING N/A: standard constant β values (life satisfaction: -0.72, controlling for depressive symptoms: 0.05, level of injury: 0.153) have not been ranked due to lack of established criteria

Reliability – **Moderate** to **High**

Moderate to **High** Internal consistency for the ADAPSS subscales (Personal Agency)

$\alpha=0.70$

Moderate to **High** Internal consistency for the ADAPSS subscales (Fearful Despondency)

$\alpha=0.85$

Moderate to **High** Test-rest reliability for the ADAPSS subscales

$\alpha=0.74-0.86$

(Dean & Kennedy 2009; n=237; 162 males, 75 females; mean age = 47 (range: 18-81); tetraplegia: 37%, paraplegia: 56%, unknown: 7%)

Number of studies reporting reliability data: 3

(Mignogna et al. 2014; n=98; 94 males, 4 females; mean (SD) age: 18.3 (13.1) years; tetraplegia (low): n=14, tetraplegia (high, AIS A,B,C): n=6, AIS D: n=41; traumatic injury: yes (77), no (21))

Number of studies reporting validity data: 4

Responsiveness

Floor/Ceiling Effect:

Not established in SCI

Effect Size:

Not established in SCI

Number of studies reporting responsiveness data: 0