Life Satisfaction Questionnaire (LISAT-9, LISAT-11)

Assessment Overview

Assessment Area

ICF Domain:
Quality of Life
Subscales (domains):
Life as a whole, vocational situation, financial situation, leisure situation, contacts with friends, sexual life, self-care management, family life, and partner relationships

You Will Need

Length:
5 minutes, 9 or 11 items
Scoring:
Item scores can be summed and an average score is produced
Maybe more appropriate to use mean domain scores instead of total score in order to maintain information on each domain available for clinical interventions

Summary

The Life Satisfaction Questionnaire (LISAT) was originally developed as a checklist rather than a measure of life satisfaction.

It targets important life domains: life as a whole, vocational situation, financial situation, leisure situation, contacts with friends, sexual life, self-care management, family life, and partner relationships.

The LISAT-11 has 2 extra items asking about the level of satisfaction of the individual's physical health and psychological health respectively.

Availability

Worksheet: Can be found here.

Languages: Available in 8 languages.

Assessment Interpretability

Minimal Clinically Important Difference

Not established in SCI

Statistical Error

Standard Error of Measurement for LISAT-9:
Life as a whole: 0.07
Self-Care: 0.05
Leisure situation: 0.06
Vocational situation: 0.06
Financial situation: 0.06
Sexual life: 0.06
Partner relations: 0.07
Family life: 0.06
Contact with friends: 0.07
Minimal Detectable Change for LISAT-9:
Life as a whole: 0.19
Self-Care: 0.14
Leisure situation: 0.17
Vocational situation: 0.17
Financial situation: 0.17

Typical Values

LISAT-9 Mean (SD) Total Score:
31.6 (9.4)

(Geyh et al. 2010; n=243; 193 males; pparaplegia and tetraplegia; ASIA A-D; outpatient; mean (SD) time since injury = 140 (139) months)

Sexual life: 0.17
Partner relations: 0.19
Family life: 0.17
Contact with friends: 0.19

(Geyh et al. 2010; n=243; 193 males;
pparaplegia and tetraplegia; ASIA A-D;
outpatient; mean (SD) time since injury = 140
(139) months)

Measurement Properties

Validity – **Moderate** to **High**

High correlation with Satisfaction with Life Scale (SWLS):

$\rho = 0.60$

Moderate correlation with Mental Health subscale of SF-36 (MHI-5):

$\rho = 0.52$

Moderate correlation with Social Dimension of SIP-68 (SIP-SOC)

$\rho = -0.45$

(Post et al. 2012; n=145; 104 males, 41 females; 27 incomplete paraplegia, 65 complete paraplegia, 16 incomplete tetraplegia, 37 complete tetraplegia; 5 years after discharge from inpatient rehabilitation)

High correlation with the Swedish version of the Moorong Self-Efficacy Scale (s-MSES) score:

$r_s = 0.72$, $p < 0.001$

(Mangold et al. 2024; n=92 program participants; 58 males, 24 females; median time since injury 1 year; 48 tetraplegia, 44 paraplegia; 37 complete injuries, 54 incomplete injuries n= 42 peer mentors;37 males, 11 females 37M, 11F)

Number of studies reporting validity data: 2

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

Moderate to **High** Internal Consistency:

$\alpha = 0.75$

(Post et al. 2012; n=145; 104 males, 41 females; 27 incomplete paraplegia, 65 complete paraplegia, 16 incomplete tetraplegia, 37 complete tetraplegia; 5 years after discharge from inpatient rehabilitation)

$\alpha = 0.86$

(Geyh et al. 2010; n=243; 193 males; pparaplegia and tetraplegia; ASIA A-D; outpatient; mean (SD) time since injury = 140 (139) months)

Number of studies reporting reliability data: 2

Responsiveness

Floor/Ceiling Effect:
Not established in SCI

Effect Size:
Mean LISAT-9 total score differences before & after SCI = 1.0

(Van Koppenhagen; n=147, wheel-chair dependent, data was collected retrospectively at the start of active rehabilitation and one year after discharge from inpatient rehabilitation.)

Number of studies reporting responsiveness data: 1