A validation project of Copenhagen Psychosocial Questionnaire in Sweden

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Introduction
Health care in Sweden has gone through major re-organization during the last two decades, and the pace of change continues to be high. Reliable instruments to monitor the situation, even at the local level, are needed. Copenhagen Psychosocial Questionnaire (COPSOQ) is a suitable staff questionnaire for mapping the psychosocial working environment as well as for evaluating changes following interventions. The intention is to present the ongoing validation project of the Swedish version of COPSOQ for use in health care organizations at the symposium.

The target group of this research project is first line health care workers with a short education and the aim is to validate the existing Swedish translation of COPSOQ and further develop scales specifically directed towards personally enriching aspects in human service work, and map the psychosocial work environment, stress, and wellbeing of first-line health care workers aiming to establish reference values. as well as to analyze the interplay between individual and group factors in relation to outcomes such as sickness absence and staff turnover.

Material and methods
The project includes back-translation, cognitive debriefing interviews, a cross-sectional study at public dental practices and hospital wards, as well as register data at group level.

Results
Preliminary results from the back-translation procedure show challenges in relations to conceptual equivalence between some items in the existing Swedish version of COPSOQ and the official English version and a need for adjustments to improve clarity and the use of ordinary contemporary language. Interviews are ongoing and preliminary results will be presented at the symposium.

Conclusions
Improved knowledge about the psychosocial working environment and health among first line health care workers would increase the opportunities for promoting future working conditions which positively influence motivation, health and willingness to stay on the labor market and in the caring professions. This would support a sustainable health care system likely contributing to organizational efficiency, quality in patient-work, and a good work life for employees.

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