



The claustrophobia scale: a psychometric evaluation

Lars-Göran Öst*

Department of Psychology, Stockholm University, S-106 91 Stockholm, Sweden

Received 21 April 2004; received in revised form 5 September 2004; accepted 15 October 2004

Abstract

This article presents a psychometric evaluation of the Claustrophobia Scale (CS), consisting of one subscale for measuring anxiety (20 items, 0–4) and one for avoidance (18 items, 0–2). Participants were 87 claustrophobic patients and 200 normal controls randomly selected from the community. The results show that CS has excellent internal consistency, high test–retest reliability, concurrent and discriminant validity. The patients and controls differ significantly on the total scores of anxiety and avoidance, as well as on each individual item scores. The CS was also found to be sensitive to change after cognitive behavioral treatment. Preliminary factor analyses yielded two factors for each subscale; “Being in small enclosed spaces” and “Other people present”, accounting for large proportions of the variance. The CS is useful both as a state, and as an outcome self-report measure of claustrophobia.

© 2004 Elsevier Ltd. All rights reserved.

1. Introduction

Claustrophobia is classified in DSM-IV (APA, 1994) as a specific phobia under the subcategory of situational phobias, and it is one of the most prevalent specific phobias in the general population. Costello (1982) reported a prevalence of 4% in a female Canadian sample, whereas Kirkpatrick (1984) in a mixed US sample found a much higher figure of 13.4%. Chapman (1997) reviewed the ECA-study and found the following proportions fulfilling DSM-III criteria for enclosed spaces: 2.4%, for tunnels: 2.1%, and for crowds: 2.6% (probably with significant overlap between situations). Finally, the National Co-morbidity Study (Curtis, Magee, Eaton, Wittchen,

*Tel.: +46 8 163 821; fax: +46 8 161 002.

E-mail address: ost@psychology.su.se.

& Kessler, 1998) reported a lifetime prevalence of 4.2%, placing claustrophobia in third place after animal phobia (5.7%) and acrophobia (5.3%). Thus, except for the Kirkpatrick (1984) study the different studies seem to agree that the lifetime prevalence of claustrophobia is about 4%.

There are only three randomized controlled studies on psychological treatment of claustrophobia in the literature (Booth & Rachman, 1992; Öst, Alm, Brandberg, & Breitholtz, 2001; Öst, Johansson, & Jerremalm, 1982), which is remarkable considering its prevalence. A reason for this might be that there is some overlap with agoraphobia, and some researchers even consider claustrophobia to be a prodromal state of agoraphobia instead of a specific phobia in its own right.

When the author planned his first study (Öst et al., 1982) on claustrophobia in 1979 there was no specific self-report measure developed for claustrophobia, and thus one had to be developed. Due to time and grant constraints, however, no psychometric study of the Claustrophobia Scale (CS) could be done before it was used as an outcome measure. Since then Rachman and Taylor (1993) has published their Claustrophobia Questionnaire (CQ), and followed it up with a psychometric study (Radomsky, Rachman, Thordarson, McIsaac, & Teachman, 2001). Furthermore, Febraro and Clum (1995) published a study on the Claustrophobia Situations Questionnaire (CSQ) and the Claustrophobia General Cognitions Questionnaire (CGCQ).

The purpose of the present study is to make a psychometric evaluation of the CS, by investigating its reliability, validity, factor structure, and sensitivity to treatment. It was predicted that the CS would have good internal consistency and test–retest reliability, satisfactory discriminant and concurrent validity, and be sensitive to change after cognitive behavioral treatment. No prediction was made regarding its factor structure.

2. Method

2.1. Participants

2.1.1. Claustrophobic patients

The patients participated in two randomized controlled studies on cognitive behavioral treatments of claustrophobia. In the first (Öst et al., 1982) there were 35 patients and the second (Öst et al., 2001) contained 52 patients. The patients were recruited through referrals from psychiatric clinics and outpatients mental health centers in the Uppsala and Stockholm counties or answered advertisements in the local newspapers, and had to fulfil the DSM-III (APA, 1980), and DSM-IV (APA, 1994) criteria for specific phobia, respectively. Further criteria were: age range 20–60, claustrophobia being the patient's principal diagnosis, at least 1 year's duration of the phobia, and no psychotic or organic symptoms. Seven patients in the first sample and 19 in the second sample were excluded (23% in total) after the screening interview, mainly because their claustrophobia was not severe enough or their principal diagnoses were not claustrophobia. The two samples were combined after statistical analyses indicating that they did not differ significantly on the CS or the background variables assessed. The combined sample of claustrophobic patients contained 78 females (90%) and 9 males. Their mean age was 39.7 (SD = 11.1), and the mean duration of their phobia was 22.3 years (SD = 12.5). Sixty-one (70%) were married or cohabiting, 17 (20%) unmarried, and 9 (10%) single. Seventy-eight (90%) worked or studied full-time, whereas 9 (10%) had part-time occupation.

متن کامل مقاله

دریافت فوری ←

ISIArticles

مرجع مقالات تخصصی ایران

- ✓ امکان دانلود نسخه تمام متن مقالات انگلیسی
- ✓ امکان دانلود نسخه ترجمه شده مقالات
- ✓ پذیرش سفارش ترجمه تخصصی
- ✓ امکان جستجو در آرشیو جامعی از صدها موضوع و هزاران مقاله
- ✓ امکان دانلود رایگان ۲ صفحه اول هر مقاله
- ✓ امکان پرداخت اینترنتی با کلیه کارت های عضو شتاب
- ✓ دانلود فوری مقاله پس از پرداخت آنلاین
- ✓ پشتیبانی کامل خرید با بهره مندی از سیستم هوشمند رهگیری سفارشات