

# Scoring Manual for the Child OC Impact Scale (COIS)

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## Background

Obsessive compulsive disorder (OCD) in children and adolescents is a chronic illness that often leads to severe disruptions in social, familial, academic and vocational functioning (Cooper, 1996; Piacentini et al., 2003; Swedo & Rapoport, 1989). Dressing and washing rituals may result in chronic lateness to school, while contamination fears often preclude the child from going to parties, movies, restaurants or other social events. Counting and checking rituals and intrusive thoughts can impair focus and concentration and interfere with reading and writing adversely impacting school and/or job performance. In more severe cases, symptoms may also interfere with the child's ability to initiate and maintain friendships and adversely impact the adolescent's attempts to develop sexual relationships. Recent data suggest OCD to be a relatively common disorder of childhood with a lifetime prevalence of 1-2% (Zohar, 1999). This heightened awareness, along with the demonstrated efficacy of both SSRI medication and cognitive-behavioral treatment approaches for OCD, has led to a dramatic upsurge in both clinical and research activity with these youngsters (Albano, March, & Piacentini, 1999).

## Applications of the COIS

The Child OCD Impact Scale (COIS) was developed to provide a standardized format for assessing the impact of OCD symptoms on the psychosocial functioning of affected children and adolescents. To our knowledge this is the first measure systematically designed for this purpose. The COIS has both clinical and research applications. Clinically, it can be used to demonstrate to patients and their families the disruption that the OCD symptoms are causing in their everyday functioning. This demonstration is helpful for breaking down initial denial and treatment resistance and can also serve as the cornerstone for the development of cognitive-behavioral efforts to increase treatment motivation and compliance. Over the course of treatment, the COIS provides a quantitative measure of treatment gains across multiple social domains (home, school, and peers) and can also be used to identify and monitor

specific problem areas requiring additional or more intensive intervention. As a research tool, the COIS is being used in studies investigating the relationship between symptom severity and functional impairment in OCD youngsters (Piacentini et al., 2003) and both as an outcome measure (Geller et al., 2001; Liebowitz et al., 2002) and predictor of treatment response (Piacentini et al., 2002) in behavior therapy and medication trials.

### **Description and Scoring**

*Original Version.* The initial item pool for the COIS was generated from a series of focus groups and individual interviews with youngsters with OCD and their parents, review of clinic charts, existing clinical and research literature, and additional clinical experience with childhood OCD patients. This original pool consisted of 53 items which were assigned to one of three a priori domains (School, Social, and Family/Home). Four additional summary items were used to rate global impact at school, home, socially, and when going out. The COIS was available in parallel parent- (COIS-P) and child- (COIS-C) report versions.

*Revised Version.* A subsequent factor analysis of the original parent-report measure supported the a priori factor structure and allowed for a significant reduction in the length of the scale through elimination of poorly performing items (Piacentini et al., 2001). This study also established the internal reliability and construct validity of the COIS-P.

The revised COIS is a 21 item scale also available in parallel parent- and child-report versions. The timeframe of the measure is the “past month” and items are scored on a 0 (not at all) to 3 (very much) point Likert-type scale. The three subscale scores are calculated separately by summing the ratings (0-3) of all items corresponding to the specific subscale: Social (7 items: 4, 5, 7, 14, 15, 16, 18), School (6 items: 2, 3, 6, 11, 13, 19), and Home/Family (7 items: 1, 8, 9, 10, 12, 17, 20). The Total Score is calculated by adding the School, Social, and Home/Family Subscale scores (n = 20 items). The COIS Total Score can range from 0 – 60. The final item (#21) asks the informant to provide overall ratings of OCD-related impairment in school, social, and family functioning. This item is not used in scoring.

Normative data is currently being collected for the COIS. Therefore, specific cutoff scores are not yet available for either child- or parent-report versions and the measure. Instead, the COIS is best used, at present, from an individual perspective. As an example, qualitative examination of pretreatment COIS scores provide a profile of the nature and extent of OCD-related interference for a given child or adolescent. This information can be very useful in developing the initial treatment plan as well as for addressing parent and/or child denial of illness severity or resistance to treatment. In addition, by comparing scores collected mid- and post-treatment with those collected at baseline, the COIS can provide a quantitative measure of treatment response as well as highlight resistant problem areas which may require more intensive or alternate intervention approaches.

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