

Special Session : SALSA

SPL-32

Application of The SALSA Scale for Screening of Activity Limitation and Safety Awareness

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The SALSA scale has been developed through collaboration of occupational therapists and others based on data collected in five countries around the world (Disability and Rehabilitation, 2007; 29: 689–700). The SALSA score, which can range from 0-80 points, can be used to quantify levels of activity limitation in a target group, to compare populations or document improvements after intervention. General health or rehabilitation workers can use SALSA to screen clients and refer those with high scores to specialised services. SALSA indicates the types of activity limitation experienced by the respondent and thus assists therapists in designing appropriate interventions. SALSA has already been used in leprosy settlements (India, Nepal, China), in hospital outpatients (India, Israel) and in disability surveys (Indonesia). A study of the long-term impact of reconstructive surgery on functioning is now underway in NW Bangladesh and SALSA is one of the measures used. Similar studies have been planned in India. SALSA has good internal consistency and discriminates between people affected by leprosy and unaffected controls. Its validity is based on comparison to independent expert assessments of activity limitation. More could be done to compare SALSA scores to other known measures of functioning e.g. FIM, DASH, WHODAS and the standardised assessments used before and after reconstructive surgery. A study of test-retest reliability has been conducted in Nigeria with good results but this should be reproduced in other populations. Interviewers require two days of training to be able to use the scale effectively. Translation of SALSA requires careful verification through back-translation. Translations are now available in French, Brazilian Portuguese, Hindi, Bengali (Kolkata), Bengali (Bangladesh), Nepali, Tamil, Mandarin, Hausa, Yoruba, Hebrew, Bahasa Indonesia. **Conclusion** : As more experienced is gained and documented, the practical value of SALSA is becoming clear encouraging more workers to use it.

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Test-Retest Reliability of the Screening of Activity Limitation and Safety Awareness (SALSA) Scale in North-West Nigeria

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Introduction : The study examines the inter-tester and intra-tester reliability of the recently developed scale for Screening of the Activity Limitation and Safety Awareness (SALSA) in North-West Nigeria. The scale was developed through collaborative research in 5 countries around the world. **Methodology** : 103 people affected by leprosy from 3 states in North-West Nigeria participated in the study. A Hausa translation of the 20-item SALSA questionnaire was used by trained health staff to interview the participants. Each participant was interviewed twice. 75 people were interviewed by two different interviewers; the second interview was carried out 4 - 76 days after the first interview. 28 people were interviewed by the same interviewer on two different occasions; the second interview was carried out 52 - 71 days after the first interview. **Results** : Inter-tester reliability: All 20 items had Kappa's ranging from 0.45-0.8; 15 items had Kappa's > 0.6; 8 items had Kappa's >0.7 Intra-tester reliability: All 20 items had Kappa's ranging from 0.51-1; 15 items had Kappa's > 0.6; 12 items had Kappa's >0.7 The first interview had a SALSA score ranging from 17 – 78 (Mean 36.5, 95% CI 34.96 38.05). The second interview had a SALSA score ranging from 17 – 76, (Mean 35.02, 95% CI 35.01-37.99). **Conclusions** : The Hausa translation of SALSA has an acceptable reliability in Nigeria provided the interviewers are well trained. **Keywords** : SALSA, Reliability, Activity limitation, Hausa, Nigeria.

SPL-34

Comparative Analysis of SALSA Scale Among the Rural Leprosy Affected Persons in Adilabad District

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This paper presents the comparative analysis of SALSA (Screening of Activity Limitation and Self Awareness) scale among the rural leprosy affected persons in Adilabad district of Andhra Pradesh. SALSA scale used in the year 2004 among 51 GII cases to measure the activity limitation and self awareness among the sample of 51 GII persons. After three years period of time it intends to compare and understand the development and deterioration of the 51 GII cases through SALSA scale. Since leprosy causes disability and insensitivity in different parts of the body it is likely to avoid unsafe activities to reduce the risk of injury. Therefore it is imperative to assess how far clients were using safety measures in their day to day activities in comparison to 2005. Repeatedly the previous data formats were used to collect the information from the same clients (sample) to compare the activity limitation and self awareness at two different points of time. Based on the responses obtained through questionnaire in the earlier period, some questions are supplemented in the present study to gather additional information. Overall the study gives an impression in the improvement of activity limitation and self awareness among the selected sample of 51 GII persons.

SPL-35**The Impact of Leprosy on Quality of Life : Use of Dlqi and Salsa Questionnaires**

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Introduction : Dermatology Life Quality Index (DLQI) and Screening of Activity Limitation & Safety Awareness (SALSA) questionnaires were applied to evaluate the impact of leprosy deformities (incapacity degree 1 and 2) on quality of life of patients post treatment WHO/PQT. Methods: DLQI and SALSA were applied on 50 patients post treatment WHO/PQT. The extension and severity of deformities were determined by EPIINFO2000. The score of DLQI varies between 0 and 30 and the SALSA from 0 to 10. We used the Spearman coefficient for statistical analysis. Results: DLQI showed 44% commitment (moderate to very severe) in the quality of life. SALSA showed 38% of none risk awareness among leprosy patients. Conclusion: The questionnaires are complementary in demonstrating the decrease in patient's quality of life. DLQI and SALSA prove that the most severe cases have the more important losses in daily life. **Keywords :** quality of life; questionnaires; DLQI; SALSA.

SPL-36**Evaluation of Asylated Patients of An Ex-Colony of Leprosy Through SALSA and Participation Scale**

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Introduction : SALSA and Participation Scales are relatively novel means of assessing patients with disabilities. Their use to evaluate chronically disabled, asylated ex-patients of leprosy can be useful in several aspects. The assessment of management efficacy can be one of the applications of such scales. In this work, patients of the Casa de Saúde Santa Fé, Três Corações, MG, Brasil, an ex-colony of leprosy, have been evaluated in such a way. **Methodology :** 40 patients (20 male, 20 female), all asylated, all above 50 years of age, with advanced degrees of physical disabilities, were evaluated using SALSA and Participation Scale methods. The results have been tabulated and analysed. **Preliminary results :** The scales were reliable and easy to use in this context. Initial results have been obtained and will be compared to future others, after management strategies can be changed, as oriented by present results. **Conclusions :** SALSA and Participation Scales can be useful in the evaluation of asylated, chronically disabled ex-leprosy patients. **Keywords :** Leprosy. Disabilities. SALSA. Participation Scale.

SPL-37**A Comparison of the SALSA Scale to Other Hand Function Assessments**

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The SALSA scale has been developed to measure activity limitation in persons affected by leprosy as perceived by the person himself. Other assessments measure function and activity limitation objectively by time or by therapist's perception. The aim of this study was to investigate and validate the hand-related activities in the SALSA to other hand function assessments. 26 persons affected by leprosy were studied. Data collection included sensory and motor status of median and ulnar nerves, the EHF disability score, the SALSA score and level of performance of The Functional Dexterity Test, The Nine Hole Peg Test and seven bilateral ADL tasks from the Smith Hand Function Evaluation. Overall, the SALSA score for hand-related activities in this group varied from 13 to 47 (mean 21.5). The means of the hand function test results were generally found to be above norms for these tests. A detailed comparison of the findings with relation to neural status, EHF disability score and self-perceived measures versus objective measures will be presented. The credibility of SALSA is enhanced by validation studies such as these. SALSA is a useful assessment tool in occupational therapy practice to measure the level of function and activity limitation at baseline and pre/post interventions, enabling evaluation of efficiency of intervention.