

Title: The measurement properties of the Model of Human Occupation Screening Tool (MOHOST)

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Major Finding: This study provides evidence in support of the conclusion that the MOHOST (version 1.0) scale can function as a valid and reliable measure of occupational participation.

Participants: n= 163

- 136 male, 27 female
- Age: 18– 65 years. Mean: 40.10 years (9.8 sd)
- Diagnostic Condition: 92 clients had a mental health condition, 55 clients had HIV/AIDS, and 16 clients had a developmental delay.
- Setting: 55 = community transitional living program (USA), 21 = acute inpatient psychiatric setting (USA), 86= high security psychiatric hospital (UK). 1 client was a video case in an inpatient psychiatric unit.
- Ethnicity: 71.64% = Caucasian, 27.16% = African–Americans, and 1.2% Asian

Method: A total of 9 therapists completed the MOHOST with a total of 162 clients. Therapists also each rated one common video case client to “link” therapists ratings to one another.

Analysis: Rasch analysis using FACETS software

Findings:

- The MOHOST items worked well together to measure occupational participation, although two environmental items “physical space” and “physical resources” may not best measure occupational participation.
- Clients were effectively discriminated into 5 different levels of occupational participation by the MOHOST, and
- All 9 therapists in the study were able to use the MOHOST in a consistent, valid manner.

Conclusion: The current study provides evidence in support of the conclusion that the MOHOST (version 1.0) scale can function as a valid and reliable measure of occupational participation. Importantly the items worked well together as a measure of occupational participation, clients were effectively discriminated into different levels of occupational participation, and therapists were able to use the MOHOST in a valid manner.

Implications for future research: This study represents a first step in the psychometric evaluation of the MOHOST, and further research will be needed to provide additional evidence of the assessment’s reliability and validity. Environmental items, other MOHOST items, and the rating scale were revised for MOHOST version 2.0 based on these findings.

Evidence– based practice implications:

- There is evidence the MOHOST is a valid assessment of occupational participation
- Therapists can learn to be valid raters by learning the MOHOST from the manual
- The MOHOST can be used as a sensitive measure of occupational participation

