Swedish translation and reliability of the Morningness-Eveningness Questionnaire

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Introduction

Depression is one of the most prevalent diseases in the western world with large personal and economic consequences. There is a clear connection between depression and sleep disorders. Bright light therapy is used as an adjuvant treatment for depression in addition to pharmacological and psychological treatments. The Morningness-Eveningness Questionnaire (MEQ) is used to decide at what time of day bright light therapy is to be administered.

Aim

The aim of the master thesis was to translate the MEQ to Swedish and evaluate it in terms of reliability. In addition, MEQ scores between a healthy study group and patient group were compared. Lastly, patient MEQ and MADRS scores were checked for correlation.

Method

The MEQ was translated and back-translated for correctness. The translated MEQ was administered to a healthy study group where a subset of these also filled out the MEQ a second time. There were 285 individuals in the healthy study group which was made up of students and where participation was voluntary. Cronbach’s α was used for internal consistency and Wilcoxon signed rank test and Spearman correlation was used for test-retest reliability. Spearman correlation was also used for the patient group MEQ and MADRS scores. The patient was made up of 26 individuals and data was collected retrospectively.

Results

The translated MEQ had an internal consistency of 0.903. Wilcoxon signed rank test showed small statistically significant differences between test and re-test and Spearman correlation for the total score was 0.97. The MEQ scores of the healthy study group and patient group showed similar mean scores and distribution. There was no statistically significant difference between the means (p=0.34). There was no correlation between patient MEQ and MADRS score (r=0.01).

Conclusion

This master thesis showed excellent internal consistency and test-retest reliability of the translated MEQ. The MEQ total score for the healthy individuals group and patient group were similar possibly indicating that the MEQ is a reliable measurement tool. Furthermore, no correlation between MEQ total score and MADRS score in the patient group could be found. In conclusion, the MEQ is a reliable scale in a Swedish healthy population as well as inpatients with depression. Further studies could validate the scale to ensure high clinical relevance.

Keywords: Swedish MEQ, translation, internal consistency, test-retest reliability