

2016 ANPOR Annual Conference
Bridging Experience and Prognosis : The Future of a Public Opinion Research Network
BATTAMBANG-SIEM REAP, CAMBODIA

Quality of life of People with Disabilities in Suphanburi Province¹

Purin Srisodsasuk ²
Chiraphun Phothong

Boromarajajonani Nursing College, Suphanburi

Abstract

This cross-section survey aimed to study the quality of life of people with disabilities in Suphanburi province. The sample size was 395 disabled people that were selected from all types of disabled people in 10 districts of Suphanburi province. The instrument for data collection was the questionnaire consisted of general information and the World Health Organization, Quality of Life generic questionnaire-brief in Thai version (WHOQOL-BREF-THAI). Descriptive analysis was applied in this study such as frequency, percentage, mean and standard deviation.

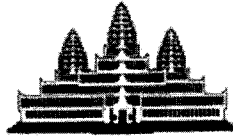
The result showed that the majority of this study was male (56.2%) and the average age was 56.2 years. Most of them graduated at primary school level (56.2%) and about half of them were single (46.3%). Disabled people mostly have no career (94.7%) and lived with the assistants (50.1%). Basically, they stayed with a family (94.4%) in the rural area (74.4%). In general, they acquired disabilities later in life (65.3%) and the accessibility to health care was high (69.4%). The quality of life among them was at the moderate level in 4 domains: physical health, psychological health, social relation and environment. When considered on the type of disability, all of them had moderate quality of life. People with hearing disability had the highest score and the quality of life among them was significantly different from people with multiple disabilities ($p=0.02$) and people with physical disability ($p=0.04$). In conclusion, a well-plan on the development of the quality of life particularly in physical and mental health from all related sectors is needed to improve better quality of life of people with disabilities.

Key words: people with disabilities, quality of life, Suphanburi province

Quality of life of People with disabilities in Suphanburi Province

¹ Financial support for this research is provided by Boromarajajonani Nursing College, Suphanburi and Sirindhorn National Medical Rehabilitation Institute.

² Correspondence concerning this article should be addressed to Purin Srisasakul . Department of Community, Boromarajajonani Nursing College, Suphanburi. Contact: purin2548@yahoo.com



2016 ANPOR Annual Conference

Bridging Experience and Prognosis : The Future of a Public Opinion Research Network
BATTAMBANG-SIEM REAP, CAMBODIA

At the present time, disability is the main issue of health. When measured the global burden of disease, more than half of the mortality before old age came from disabilities worldwide. Disabled people come to the hospitals or health service centers because they can't do some activities that they used to do before. For example, some illnesses cause disabilities resulting in incapability to do regular life activities. It doesn't come from the illness itself. To determine how serious of the disabilities, the health care professionals should consider the level or degree of the difficulties that occur in patients' daily life. In addition, the health care professionals should consider all the information including the condition of disabilities of each individual in their evaluation and planning about health care management for these impaired people (Supinna, 2012).

Disabled people are the important target group that needs to develop their quality of life. The number of these people is increasing in every society nowadays. The more the number of people with disabilities is increasing, the better and the more appropriate social services and health care system including higher quality of social welfare should be available for them. This group of people is vulnerable such as physical and mental issue. At the present time, they are still lacking of the appropriate systems that can take care of them in all facets (Bureau of Policy and Strategy, 2012). These all problems affect the quality of life of disabled people in a big scale. The quality of life comes from self-satisfaction of each individual and it depends on the basis of one's living, experience, socioeconomic status and health (Zhan, 1992). The same as the quality of life of people with disabilities, they also need self-satisfaction in all domains: physical, mental, social and environmental aspects including the assistance from the government sectors in terms of health care, occupation, assistive instrument and rehabilitation service (Disability Rehabilitation committee, 2012).

The prevalence of disabled people is about 1,597,775 people or 2.43% of the total population in Thailand. The disabled people in the central of Thailand is ranked 3rd of the country and the number is 331,986 people or 20.78% of the total disabled people (Department of Empowerment of Persons with Disabilities, Ministry of Social Development and Human Security, 2016). During these 10 years, the problems about disabled people are the national problems ranging from moderate to high level. The quality of life of the people with disabilities is a significant issue for Thai government inevitably. Thailand already had 4 national plans (2012-2016) that aimed to protect the right and increase the quality of life of disabled people in both equality and equity. In addition, the development of technology and the accessibility to news and information for them was also included in these national plans. All the above issues are the unavoidable responsibility of the government sectors to develop a plan to increase the quality of life of disabled people (Fongsri, 2010).

In 2015, Suphanburi province had 15,343 disabled people registered to the government (4.07% of all the population in Suphanburi). The government sectors had a policy to develop the quality of life of disabled people focusing on the assistive instrument for their convenience; however, they had never done the survey on quality of life and the needs of



2016 ANPOR Annual Conference
Bridging Experience and Prognosis : The Future of a Public Opinion Research Network
BATTAMBANG-SIEM REAP, CAMBODIA

these disabled people before (The promotion and development of quality of life of people with disabilities subcommittee, Suphanburi, 2015).

Our research team is interesting in the developmental planning of the quality of life of disabled people. We began the study with the survey of the quality of life of disabled people in Suphanburi province in order to get the results from the study to build up the policy and develop the activities for promoting the quality of life of people with disabilities including the procedure for assisting them to live in the society with equality and equity.

Objectives

1. To study the quality of life of disabled people in Suphanburi province
2. To compare the quality of life of each type of disabilities.

Methods

Study population and sampling technique

The population of this study was disabled people from 10 districts in Suphanburi. The number of the participants was calculated using Daniele proportion (Daniel, 1987). Then, simple random sampling using random number table was performed from the roster of disabled people who registered to the government within September 30, 2014 in each district. In total, 395 participants were included in this study.

Instrument

The questionnaire used in this study consisted of 2 parts.

Part I: General information of participants such as age, gender, and marital status, type of disability, cause of disability, career and education were included in 11 questions of the questionnaire.

Part II: The World Health Organization, Quality of Life generic questionnaire-brief in Thai version (WHOQOL-BRIEF_THAI) was composed of 26 questions asking the participants about 4 domains that related to quality of life of the participants: physical health, psychological health, social relationships and environment.

Data collection

The researchers of this study have already taken permission from the directors of all the health promoting hospitals to get the list of disabled people in each area. A meeting was held to provide the detail of the research and the training for 20 interviewers was also conducted. Later, the interviewers were introduced to the participants and told the participants about the objectives of the research including the benefit of this study.



2016 ANPOR Annual Conference

Bridging Experience and Prognosis : The Future of a Public Opinion Research Network
BATTAMBANG-SIEM REAP, CAMBODIA

This research was approved by the Ethics committee of Sirindhorn National Medical Rehabilitation Center (number 4/2558). All participants had the right to take part in the study. After they understood clearly about the research procedures, they were free to withdraw from the study if they no longer wanted to participate in this study without any negative impacts on the treatment or support from the health care providers. The data or information, which may identify participants, was removed. All the information was restored confidentially and the results from this study were reported as overview results. All the participants were asked to provide their consent before the interview. The interview was about 10-15 minutes on average and it was performed during June to November, 2015.

Data Analysis

The descriptive statistic was performed to yield the information on:

1. General information of the participants such as age, gender and type of disabilities was described by frequency, mean and standard deviation
2. The quality of life was characterized into 4 domains: physical health, psychological health, social relation and environment and analyzed in terms of frequency, mean, standard deviation. The One-Way ANOVA was also applied in the analysis.

Results

Male was the majority group in this study (56.2%) and the average age was 50.69 years. About 50% of them graduated from primary school and most of them were single. Half of them were living with the assistants. Physical disabilities was the highest among other types of disabilities (55.2%) following by hearing disability (12.9%). Most of them were living with the family (94.4%) in the rural area (74.4%). The main cause of disability was disability later in life (65.3%) and more than half of them can access to health care services (69.4%).



2016 ANPOR Annual Conference

Bridging Experience and Prognosis : The Future of a Public Opinion Research Network
BATTAMBANG-SIEM REAP, CAMBODIA

Table 1 Distribution of disabled people in Suphanburi province (n=395)

	Characteristics	N	Percentage
Gender	Male	222	56.2
	Female	173	43.8
Age (years)	≥20	39	9.9
	20-29	26	6.6
	30-39	55	13.9
	40-49	63	15.9
	50-59	59	14.9
	> 60	153	38.7
	Mean = 50.69 (min=6, max=91)		
Education	No education	119	30.1
	Elementary	222	56.2
	Secondary	43	10.9
	Vocational	7	1.8
	Bachelor	4	1.0
Marital status	Single	183	46.3
	Married	127	32.2
	Divorce/Separation/Widow	85	21.5
Occupation	No job	374	94.7
	Contractor/employee	21	5.3
Type of disability	Visual disability	33	8.4
	Hearing disability	51	12.9
	Physical disability	218	55.2
	Mental health disability	23	5.8
	Intellectual disability	28	7.6
	Learning disability	5	.9
	Autism	5	.9
	Multiple disability	32	8.3
Living condition	Live with assistant	198	50.1
	Live independently in the community	197	49.9
Family issue	Stay with a family	373	94.4
	Live alone	22	5.6
Region of living	Rural area	286	74.4
	Urban area	109	27.6
Cause of disability	Disability later in life	258	65.3
	Congenital disability	137	34.7
Health care accessibility	No	121	30.6
	Accessible	274	69.4



2016 ANPOR Annual Conference

Bridging Experience and Prognosis : The Future of a Public Opinion Research Network
BATTAMBANG-SIEM REAP, CAMBODIA

Table 2 Mean, standard deviation and level of quality of life of disabled people in Suphanburi province (n=395)

Quality of life	\bar{x}	S.D.	Level of quality of life
Physical health	21.53	4.36	Moderate
Psychological health	19.23	3.65	Moderate
Social relationships	10.46	2.23	Moderate
Environment	26.60	4.22	Moderate
Total quality of life	83.26	13.35	Moderate

From table 2, the total quality of life of disabled people was at the moderate level (mean=83.26, SD=13.35). When explore deeply in four domains : physical health, psychological health, social relationships, and environment were moderate level (\bar{x} =21.53, SD=4.36, \bar{x} =19.23, SD= 3.65, \bar{x} =10.46 SD=2.23, and \bar{x} =26.60 SD=4.22) respectively.

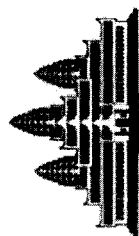


Table 3 Mean and mean difference and Scheffe's test of the type of disability of the quality of life

Type of disability	Mean of the quality of life	Mean difference				
		Visual disability	Hearing disability	Physical disability	Mental health disability	Intellectual disability
Multiple disabilities	74.53	9.7	11.88*	9.31*	10.47	8.5
Hearing disability	86.41	2.11	-	2.58	1.41	3.38
Physical disability	83.84	.46	2.37	-1.1	.81	i.5
Visual disability	84.30					
Mental health disability	85					
Intellectual disability	83.03					
Learning disability	72.33					
Autism	69.67					



2016 ANPOR Annual Conference

Bridging Experience and Prognosis : The Future of a Public Opinion Research Network
BATTAMBANG-SIEM REAP, CAMBODIA

From table 3, the disabled people with hearing impairment had the highest quality of life (86.41%), following by mental health disability (85.00%) and the lowest quality of life was in the autism people (69.67%). When performed the Scheffe's test, multiple disabilities was statistically different from both hearing disability ($p=0.02$) and physical disability ($p=0.04$) while other types of disabilities had no difference.

Discussion

The study of the quality of life of people with disabilities in Suphanburi, in summary was at the moderate level. The quality of life was the satisfaction of each individual resulting from the basis of people's living, their experience including their socioeconomic status and health that was consistent with the study of Luengsomnapha, Prompraw and Khunviset (2011). They indicated that the perfect life was the appropriate living, not to be the burden and the problem of the society. This was also in the same direction of the study of Vankova and Maneheva (2015) which found the influence of the quality of life related to the 4 domains: physical health, psychological health, social relation and environment. In addition, the services for disabled people in Supahnบุรี were not clear cut in terms of health care and rehabilitation system for disabled people. Particularly, each type of disability needed specific and appropriate kind of health care and rehabilitation (Phothong, Deenan, and Sunsern, 2013). In our study, the autistic group had the least average score of the quality of life that was in the same direction as the national survey of the quality of life of people with disabilities (Sirindhorn National Medical Rehabilitation Institute, 2016). We also found that the multiple disabilities had the score of each domain lower than the average score.

When considered each domain of the quality of life, the physical health was at the moderate level. The most satisfaction among them was sleeping. This finding was consistent with the study of Wachirukgul (1998) which indicated that the disabled people did better in some activities particularly less motion activities such as sleeping than the heavy motion activities and some activities that needed lots of assistants.

Psychological health was also at the moderate level and the highest score in this domain was the meaning of life that was in the same direction as the study of Pongpaew (2015). Pongpaew found that the stimulation of people to focus on the disabled people by accepting their value and believing in their capability in creating good things for family and community like other normal ones can encourage them.

Social relationships was at the same level as psychological health. Disabled people were likely to make friend with others easily; therefore, this topic got the highest score in this domain. It also agreed to the study of Pongpaew (2015) which found that the disabled people can get along with other people really good. They also had good heart and liked to share with others. In addition, they appreciated the help from friends and the activities between disabled people and the community. They were proud that they can have some activities with normal people.



2016 ANPOR Annual Conference

Bridging Experience and Prognosis : The Future of a Public Opinion Research Network
BATTAMBANG-SIEM REAP, CAMBODIA

Like other domains, environment was at the moderate level. The highest score was the accessibility to the important news and information. The study of Kokan (2004) also found that the people with disabilities tended to follow the news and information that made them know about the privilege that can access and useful for them in order to develop their potential to be independent themselves. Moreover, the environment was one of the most topics that influenced the quality of life (Vankova and Mancheva, 2015).

Some studies about the comparison of the quality of life among every type of disability showed that each type of disability had no difference in the average score except people with multiple disabilities that had lower score comparing to people with hearing disability and physical disability. Due to the multiple disabilities had more difficulties than others including the problems about mental health, social relation, socioeconomic status and family problem, they tend to have inequality and inequity to access education (International Health Policy Program, Thailand, 2013). This study is consistent with the finding of Mae et al (2007). They revealed that the people with multiple disabilities needed to depend on others in almost every activity of their daily life; consequently, these people were vulnerable and had less chance to participate most of the activities in the community. The activities that particularly promote the interrelationship between this type of disabled people and the assistants, the support from related sectors and the appropriate environment management will increase their quality of life.

Hence, the appropriate living that covers all the basic needs of people including good health in both physical and mental will result in happiness of life. Disable people is a special group of people that is really need a good quality of life in order to live smoothly and not to be the burden of the society. In conclusion, everyone should know and understand about the quality of life of people with disabilities. Moreover, the supports from the community will be a key factor that helps disabled people to have higher quality of life. Finally, the results from this study will be useful information for the government sectors to improve all related services for disabled people and further qualitative study should be conducted to explore more deeply to get more detail for developmental planning of the quality of life for them.

Acknowledgement

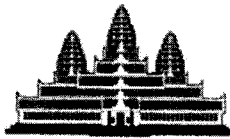
The researchers felt thankful to Sirindhorn National Medical Rehabilitation Institute, Boromarajajonani Nursing College, Suphanburi, Public Health Office, Supahnburi and every health care professional that supported this study.



2016 ANPOR Annual Conference
Bridging Experience and Prognosis : The Future of a Public Opinion Research Network
BATTAMBANG-SIEM REAP, CAMBODIA

Reference

- Bureau of Policy and Strategy, Ministry of Public Health (2012). *The role of government in promoting and developing the quality of life of disabled people*. Bangkok: Samcharoenpanich Ltd.
- Daniel, W. W.)1987 .(*Biostatistics: A foundation for analysis in the health sciences*. New York: Wiley.
- Department of Empowerment of Persons with Disabilities. Ministry of Social Development and Human Security) 2016 .(*Report of Disability situation in Thailand*. Bangkok: Srimuang Publishing.
- Disability Rehabilitation committee .Ministry of Social Development and Human Security)2012 .(
- Fongsri, P) .2010 .(*The construction and development of research tools* (2 nd Ed.). Bangkok: DansuthaPublishing.
- Green, L. W., & Kreuter, M. W. (1999). *Health Promotion Planning: An Educational and Environmental Approach*. Mayfield: CA.: Mountain View.
- Hair, J. F., Black, W. C., Babin, B. J., Anderson, R. E., & Tatham, R. L. (2006). *Multivariate Data Analysis* (6th ed.). New Jersey: Peason Education.
- International Health Policy Program (2013). *Disability situation in Thai society: Analysis of disability survey of National Statistic Office 2002-2007*. Nonthaburi: The Graphico system Ltd.
- Kokan, N.) 2004). *Self-Rellance of the Disabled in Amphur Nhong Reu, Khonkaen* .Faculty of Humanities and Social Sciences, Graduate School, Khonkaen University.
- Luengsomnapha, Y., Prompraw, S., and Khunviset, S.) 2554 .(Quality of Life, problems and needs's disable persons in responsibility of Thachang Subdistrict Administrative Organization, Chanthaburi Province .*Journal of Prapokklao Hospital Clinical Medical Education*, 28(2) ,98-109.
- Maes, B .Lambreches, G .Hostyn, I .and Petry,K.,)2007 .(Quality-enhancing interventions for people with profound intellectual and multiple disabilities :A review of the empirical research literature .*Journal of Intellectual & Developmental Disability*, September 2007; 32)3 :(163–178.
- National plan of the quality of life of disabled people (2012-2016). Bangkok: Srimuang publishing.



2016 ANPOR Annual Conference
Bridging Experience and Prognosis : The Future of a Public Opinion Research Network
BATTAMBANG-SIEM REAP, CAMBODIA

- Phongpaew, T (2015) .Quality of Life Disabled People in the Subdistrict Administrative Organizations in Thasala District, Nakhonsithammarat Province :Factors Affecting and Development .Master of Public Administration .Graduate School, Prince of Songkla University .
- Phothong C. Deenan, A, and Sunsern,R. .(2014)Effectiveness of Intergrated Rehabilitation Model for Persons with Physical Disability in Community *Journal of The Royal Thai Army Nurses*, 15)2(. May-Aug, 232-241.
- Sirindhorn National Medical Rehabilitation Institutue (2016). Report of the survey of the quality of life of disabled people in Thailand.
- Supinna, C.) 2012 .(Role of Pak Kret's City Municipality in Improving The Quality of Life of People with Disabilities. Graduate School, Sukhothai Thammathirat Open University
- The promotion and development of quality of life of people with disabilities subcommittee (2015). The quality of life of people with disabilities plan (2014-2015). Suphanburi: Saing publishing.
- Wachirukgul, P) .1998.(Factors affecting quality of life of the disabled in Changwat Phitsanuloke .Faculty of Humanities and Social Sciences, Graduate School, Khonkaen University.
- Vankova, D. and Mancheva, M.(2015) Quality of life of individuals with disabilities concepts and concerns. *Scripta Scientifica Salutis Pbulicae*, 1(1) : 21-28.
- World Health Organization.)1993.(*The development of the world health organization quality of life assessment)The WHOQOL* .(In J. Orley& w.Kuyken)Eds (Quality of life assessment international perspective Berlin: Springer.
- Zhan, L.)1992 .(Quality of life: Conceptual and measurement issues. *Journal of Advance Nursing*. 17)7(: 795-800.