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CROSS CULTURAL PERSPECTIVES OF QUALITY OF LIFE BETWEEN KUWAITIS AND AMERICANS WITH SPINAL CORD INJURIES

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Introduction

SCI is an injury that can happen to almost anyone regardless of social class, gender, or race. The annual incidence of SCI worldwide has been reported to be between 11.5 and 57.8 cases per million population (Ackery et al., 2004). The consequences of SCI are complex. QOL is perhaps the outcome of greatest concern among health care professionals.

Objectives

The purpose of this study was to compare the HRQOL of adult Kuwaitis with HRQOL normative data for the American general population and with the HRQOL of Americans with SCI.

Methods

The HRQOL of adult Kuwaitis with SCI living in the community as measured by the SF-36 were compared to American general population norms and the results from American survivors with SCI reported in the Forchheimer et al study (2004) using the means and standard deviation scores. Thirty community living Kuwaiti adult participants with SCI were recruited. To measure HRQOL, the standardized generic Arabic version of the Short-Form 36-item health status questionnaire was used (SF-36) (Hays, Sherbourne, and Mazel, 1993). The descriptive statistics including means and SDs of the demographic data as well as the SF-36's eight subscales and two component summaries (PCS & MCS) were calculated using SPSS 15.0.

Results

The Kuwaitis with SCI scored significantly lower than the American normative group on all subscales. When comparing the scores of the Kuwaiti participants with the adult Americans with SCI, the scores of the Kuwaitis were significantly lower on three of the subscales and the MCS of the SF-36.

Conclusion

QOL is an important outcome. Cross cultural QOL studies can help our understanding of QOL for persons with chronic disabilities. To the author's knowledge, this study was the first of its kind to compare the QOL between survivors of SCI in the USA and Kuwait.

Contribution to the practice/evidence base of occupational therapy

Findings indicate that occupational therapy practitioners in undeveloped countries need to broaden their views when working with people with chronic disabilities. They must begin to recognize that every human being has the potential for a high QOL. Practitioners should consider the multifaceted factors determining QOL.