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Quality of Life of Parents - Impact on Health Status of Children

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Abstract: ***This study focuses on the influence of quality of life of parents on the health status of children (BMI). Thirty fathers were randomly selected and the quality of life scoring scale of Falgngan modified by Buchardt of 1993 was used. The impact of parent's socio-economic profile on BMI of their children was studied in a subsample of 15 fathers and their children. Selected children are in 7th, 8th and 9th grades, in the age group of 12 years to 14 years. All of them are merit students from reputed schools of Andhra Pradesh (Tirupathi), Tamilnadu (Madurai and Chennai) and Telangana (Hyderabad). Parents of the children are qualified (degree to professional level) Six of15 mothers are housewives; other nine are doctors, lecturers into business. Among fathers there are doctors, engineers, software professionals and business people.. None of the children are obese or overweight. Forty percent of children are underweight (six), among them two are severely undernourished as assessed by Body mass index. Remaining sixty percent are just above the normal weight. With respect to height, one boy has height for age at 100 percent and nine of the children are above 70 percent of normal height for age. This may be partly genetic and partly nutritional. With regard to quality of life score among fathers, average maximum score obtained was 97.09 as against the maximum score of 112. The inference is that all fathers are concerned about the education of their child and their performance in various co-curricular and skill development activities. Although many fathers have indicated that health is important, in reality the concentration seems to be not on nutrition but only on absence of a disease. In spite of being highly educated and belonging to High income group, their knowledge/ concentration on nutritional aspects is lacking as is depicted in the child's nutritional profile.***

Keywords: Quality of Life, Body Mass Index, Ponderal Index, weight and height

1. Introduction

Quality of life is fast becoming a standard measure of outcomes in many clinical trials and clinical practices Quality of life originated from John Flanagan an American psychologist (1, 2) Quality of life is very subjective, some people may view their likes as good, if they have a sense of inner peace while others may not feel life is good until they achieve a level of success. The idea of quality of life is multidimensional concept which emphasis the self-perception of an individual's current state of mind (3.) There are many factors associated while measuring Quality of life like physical health, physiological wellbeing, social relationships, functional roles, and objective use of lifestyle satisfaction. Quality of life data is essential to know about the detailed analysis of an individual (4, 5, 6) Healthy people 2020 emphasis the health related Quality of life and wellbeing by including 4 overarching goals – prompting Quality of life, healthy development, healthy behaviors, across all life styles (7). Several studies on sick people, on elderly people are available (8, 9, 10) but those on healthy people and in relation to the health status of children are scanty. The present study focuses on the quality of life of high income people in terms of their behaviors. Socio-economic status and its influence on the health status of their children.

2. Methodology

The purpose of the study is to assess quality of life of high income families and its influence on the health profile of their children. Selection of sample was done by stratified random sampling procedure. Children who participated in the Southern States Science Project competition organized in Hyderabad for high school students were listed.. These children were those screened for final presentation from among 107 projects. Selected students with parents attended the final presentation program at Hyderabad. Among them 50 parents belonging to high income group were identified and the purpose of the study was explained, thirty parents agreed. Quality of life scoring scale of Falgngan modified by Buchardt of 1993 (11, 12) was used. It contains 16 aspects of quality of life on a 7 point scoring scale – which specifies, 7 points- as delighted, 6- pleased, 5- mostly satisfied, 4- mixed, 3- mostly dissatisfied, 2- unhappy, and 1- terrible. Each parent is given a form and were asked to encircle against each of the 16 points their perception on the 7-point scale, all scores of each individual are added and the average score is calculated.

In a sub group, 15 parents and their children were identified, to study the association of parent socio- economic status with the health status of their children. Health status was judged by height, weight, BMI Ponderal index, Weight for age % and Height for age %, healthy weight percent was compared with the socio economic status. Height and weight was estimated using spring balance.

3. Results and Discussion

Data is presented under the following heads: 1. Demographic profile 2.Association of Health profile of children- height, weight, BMI and ponderable index with parents socio economic status.3..Quality of life as stated by parents.

Demographic Profile Children studying 7th, 8th and 9th classes, in the age group of 12years to 14 years formed the study group. Students are from three states namely Andhra Pradesh (Tirupathi), Tamilnadu (Madurai and Chennai) and from Telangana (Hyderabad).

All mothers are qualified ranging between undergraduate level to professional degrees (Table 1) Six mothers are housewives, three are B. Tech, MBA PhD, MA MPhil, B.Ed., three others are graduates. Among the working group five are in teaching profession, two are dentists and other two are working in a private company.

Among fathers eleven are with PG level education (two are MD and MDS), four are graduates with one being a B.Tech. Occupation wise two are doctors; others are software professionals, Officers in government and private companies and only one into business.

Association of Health Profile of Children with Parents Socio -economic Status

Six children are underweight among them one is a girl and five are boys. The remaining nine children are under the normal weight category.

Associating with parents educational level and occupation with weight status it is observed that the parents of the six children who are underweight are all educated. Three mothers are employed while remaining three are housewives. All fathers are educated and are placed in decent occupations. Surprisingly, fathers' of two underweight children (One boy and one girl) are doctors. Among the other four underweight boys the fathers are scientists, software professionals etc. Nine children are with BMI between 19.3 to 22.1 which is within the normal range of 18.5 to 25.9 kg/m^2, none of them are overweight or obese.

Health profile of children was calculated as per height, weight, height for age, weight for age, BMI and Ponderal Index (Table 2).

Classifying children as per weight for age four are above 80 percent, four children are 60-80 percent, three children are 51, 22, 15 percent lowest being 2 percent (Table 2). This group requires to be educated with regard to weight With respect to height for age, six are above 70 percent with one being at 100 percent, those below 50 percent are 5, lowest being 4 percent. BMI status is explained above. Ponderal index ranged between 8.4 to 13.7. As per healthy weight percent 13 of them are within the healthy weight, except two who are below the normal weight they need nutrition education.

Quality of life of Parents

All selected 30 parents are fathers, they were asked to fill the quality of life scoring scale. The maximum average score is 97.09 as against the maximum score of 112. For individual items the scores ranged between 4.7 to 6.7. Majority scored between 6.2 to 6.7, for items 3-7, 9-12 and 14. Those in the range of 5.2 to 5.9 are for items 1, 2, 15 and 16. For Item 8 had a score of 4.9 and 13 had a score of 4.7.

The lower scores are for material comforts, for the item health being physically fit 86 percent has given the score between 5-7.indicating that everyone felt health is very important. On the other hand the least score of 1 is given for participating in social activities of different types as indicated for item 8, 13 and15.

4. Conclusion

The inference is that all fathers are concerned about the education of the child and their performance in various co-curricular and skill development activities. Although many have indicated that health is important in reality the concentration seems to be not on nutrition but only on absence of a disease. Although they are highly educated and financially well off their knowledge/ concentration on nutritional aspects is lacking as it I evident from the nutritional profile of children. This is a pilot study, bigger sample requires to be done.

References

[1] Leslie Riopel (May 2020) 5 Quality of life questionnaires and assessments Positive Psychology.com
[2] Adi Bhatt. Quality of life questionnaire : Frame Work and 20 key questions (2020)
[3] J.B. Bryce B. Reeve et.al (2013). Monitoring population health, for healthy people 2020. Evaluation of the NIH PROMIS [R] Global Health, CDC, healthy days and satisfaction of life style instruments. Quality of Life Research 22, 1201-1211.
[4] Browne J.P., CAO Boyle et.al (1994) Individual quality of life in the healthy elderly. Quality of life Research 3.235-244
[5] Allison P.J. D. Locker, J. S. Feine (1997) A dynamic Construct. Social Science and Medicine, Vol 45, Issue 2, July 1997, 221-230.
[6] Healthy people 2020, Healthy people 2020 frame work, the vision, mission, and goals of healthy people 2020, overarching goals available: http//healthy people.gov/2020/consortium/HP 2020 frame work pdf.
[7] ODPHP - Office of Disease Prevention and Health Promotion. Healthy People.gov. Health related quality of life and well-being 2020.
[8] Springer Applied Research in quality of life Vol 15, (2) April 2020.
[9] BMI standards WHO 1st April 2020, WHO.int/news. room/fact sheets global-detail/obesity and overweight
[10] Flanagan JC, A research approach to improving our quality of life. American Psychologist, 1978;33:138-147.
[11] Burkhardt C. S, Clark SR, Bennet RM, Fibromyalgia and quality of life: A Comparative study

Table 1: Association of BMI of Children with Parents Education, Occupation

	Mother		Father			
	Education	**Occupation**	**Education**	**Occupation**	**BMI**	**Gender**
1	MSc Physics	Teacher	M. Tech	Scientist	16.6 *	M
2	B.Tech	Housewife	MD	Doctor	17.3	F
3	MCA	Teacher	MCA	Software	16	M
4	B.Com	Working	PG, DBM	Working	12.8	M
5	MA, MPhil, B.Ed.	Housewife	MA, B.Ed.	Warden	16.2	M
6	BSc.	Housewife	MS.	Doctor	14.5	M
7	PG	Teacher	PG	Company	21.4	F
8	Degree	House wife	PG	Business	20.3	M
9	MBA Ph.D.	Housewife	B.Tech	Manager	20	M
10	UG	Housewife	Degree	Private	19.9	M
11	UG	House wife	Degree	Private	22.1	M
12	BD.S	Dentist	Ph. D	Professor	19.5	M
13	MSc. M.Ed.	Teacher	BSc	SWE	19.6	M
14	MA.Phil	Teacher	MSc, BL	Station Master	20.8	M
15	B.Com	Working	PG DBM	Working	19.3	M

Underweight*

Table 2: BMI, Ponderal Index, Height , Weight Status of Children

S.No	Age yrs.'	Gender	Weight Kg	Height	Wt. age%	Ht age%	BMI (kg/m^2)	Ponderal index kg/m3	Healthy Wt. %
1	12	M	35	145	22	30	16.6	11.5	28
2	12	F	42	156	51	74	17.3	11.1	38
3	14	M	40	158	9	24	16	10.1	5
4	12	M	30	153	4	69	12.8	8.4	10- uwt
5	14	M	42	161	15	37	16.2	10.1	7
6	13	M	34	153	-1	9	14.5	9.5	1-uwt
7	14	F	55	168	69	87	19.5	11.6	52
8	12	M	53	163	76	80	19.9	12.2	77
9	13	M	67	174	96	100	22.1	12.7	86
10	14	M	54	166	60	60	19.6	11.8	56
11	12	F	52	156	83	74	21.4	13.7	83
12	14	M	60	170	78	78	20.8	12.2	70
13	13	M	39	142	2	4	19.3	13.6	61
14	13	M	56	166	82	89	20.3	12.2	74
15	14	M	62	176	82	94	20	11.4	61

Table 3: Quality of Life of Parents of School Children Belonging to High Income Group

S. No.	Particulars	Delighted	Pleased	Mostly satisfied	Mixed	Terrible	Total	AV Score
	Score	**7**	**6**	**5**	**4**	**1**		
1	Material comforts home, food conveniences, financial security	33.3(10)	26.7(8)	40(12)			100(30)	5.9
2	Health -being physically fit, vigorous	33.3(10)	20(6)	33.3(10)	13.4(4)		100(30)	5.7
3	Relations ship with parents, siblings other relatives, visiting communicating helping	73.3(22)	26.7(8)				100(30)	6.7
4	Having and rearing children	70(21)	10(3)	20(6)			100(30)	6.5
5	Close relationship with spouse or significant other	70(21)	20(6)	10(3)			100 (30)	6.6
	Close friends	60(18)	40 (12)				100(30)	6.6
7	Helping and encouraging others, volunteering, giving advice	40 (12)	50 (15)	10 (3)			100(30)	6.3
8	Participating in organizations and public affairs	10 (3)	40 (12)	20 (6)	20(6)	10(3)	100(30)	4.9
9	Learning attending a school, improving, understanding, getting additional knowledge	60 (18)	20 (6)	20 (6)			100(30)	6.4
10	Understanding yourself -knowing your assets and limitations -knowing what life is about	20 (6)	40(12)	30 (9)	10 (3)		100(30)	6.3
11	Work -job or Home	40 (12)	40(12)	20 (6)			100(30)	6.2
12	Expressing yourself creatively	20 (6)	40 (12)	30 (9)	10 (3)		100(30)	6.3
13	Socializing - meeting other people, doing things, parties etc.	0	40(12)	30 (9)	20(6)	10(3)	100(30)	4.7
14	Reading, listening, to music, or observing entertainment	70(21)	20 (6)	10 (3)			100(30)	6.6
15	Participating inactive recreation	30 (9)	30 (9)	20 (6)	10 (3)	10 (3)	100(30)	5.4
16	Independence, doing for yourself	50 (15)	20 (6)	20 (6)			100(30)	5.9
Max Score for each component is 7 x16 Components = Total score is 112								97.09