

QUALITY OF LIFE OF SCHOOL AGED CHILDREN
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Purpose: The purpose of this study was to test a qualitative interview guide with healthy school aged children to 1) determine developmental appropriateness and feasibility of questions and 2) describe healthy school aged children's perceptions of their quality of life (QOL) including key factors that they believe impact their QOL. The interview questions were based upon those used by Hinds and colleagues with 8 -15 year old children with cancer and are planned for a future study with school aged pediatric cardiac transplant recipients. Appropriateness of questions has not been determined for children less than 8 years of age or with other illnesses.

Methods: Qualitative semi-structured interviews were chosen to permit examination of QOL from the child's perspective. Interviews were conducted with a convenience sample of 6 healthy 6 to 11 year old children recruited from a large metropolitan church. Interviews were initiated by asking the child to draw a picture of him/herself on a good day, followed by discussion of the picture and questions based on those of Hinds and colleagues. Main questions included: what makes a good day for you?, what makes a bad day for you?, when you are sick are there things you can not do that you would like to?, and tell me what it is like being in (current) grade. Probe questions were used to elicit more detail and further explore the child's answers. Interviews were recorded and transcribed verbatim. Interview transcripts were entered into Ethnograph, which permitted data sorting by code. Data were analyzed using narrative analysis and constant comparison.

Findings: Children as young as 6 years of age were willing participants and provided relevant, detailed answers to the questions. They described friends, play, school and home as the key factors impacting QOL. The most important factor impacting QOL was being with and playing with friends. A good day for the participants involved "Seeing my friends, playing with them at recess". School was important to the children's QOL in part because it provided a setting for interaction with friends. However, "getting good grades" and "staying out of trouble" in school were also described as important to QOL. Further, homework impacted play time. According to one participant, "If you have homework, you barely have any time to play. If you don't, it's a good day because you have a lot of time to play." The children's discussions of "what it is like" being in their current grade focused primarily on the nature of schoolwork for their grade level. Home appeared to be secondary factor with the younger children describing the importance of being with parents and the older children describing negative interactions with siblings and being "in trouble" with parents. Three of the 6 children described the negative impact of teasing, bullying and fighting on QOL. Though the children in this study are not affected by chronic medical illness, they describe the negative impact of short term acute illness on time with friends and participation in play.

Discussion: The interview guide and techniques are appropriate for use healthy school aged children. All children were able to answer the questions with relevant, detailed answers and provide insight into their perceptions of their lives. Thus, this pilot study indicates that the interview guide can be used effectively with healthy children as young as 6 years of age to elicit their descriptions of their QOL including the key factors impacting QOL.