



THE SCOPE

MAR 2022 VOL. 6 | RESEARCH NEWSLETTER

| N T H | S | S S U E



PAGE 02 What is Quality of Life and why is it so complicated?

PAGE 05 Measuring Quality of Life: Why and How? In recent years, quality of life (QoL) has been widely discussed as an indication of health outcomes and well-being in the paediatric field.

In this issue, we explore what QoL means and their various definitions in the current literature. We will also look at the importance of using validated measurement tools to measure QoL.

QUALITY OF LIFE (QOL)

What is Quality of Life?

An individual's perception of their position in life in the context of the culture and value systems in which they live and in relation to their goals, expectations, standards and concerns.

(Source: World Health Organisation)

A key reason why QoL is a

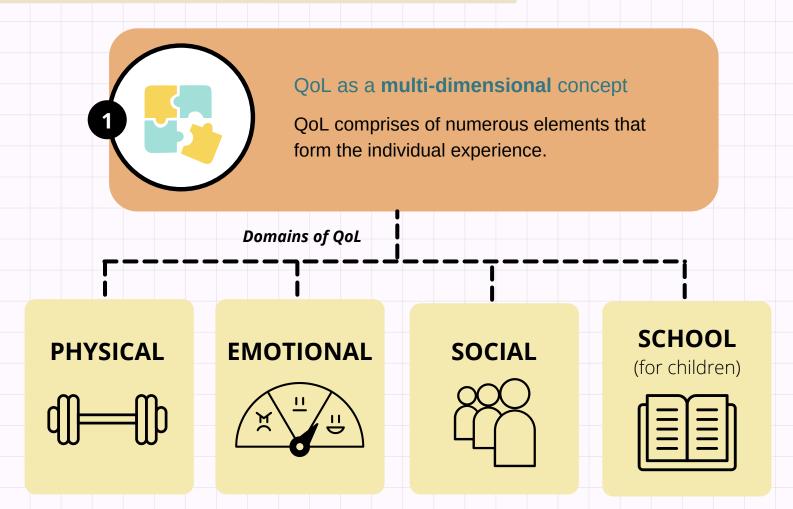
complex concept is because its

Why is it so complicated?

- There are numerous variations used
- across studies, each with their own merits
- as they strive to best describe the QoL of
- the target population.

definition is fluid.

Even though numerous variations of QoL exist in literature, there are **three underlying concepts** at hand:



QoL is person-centric

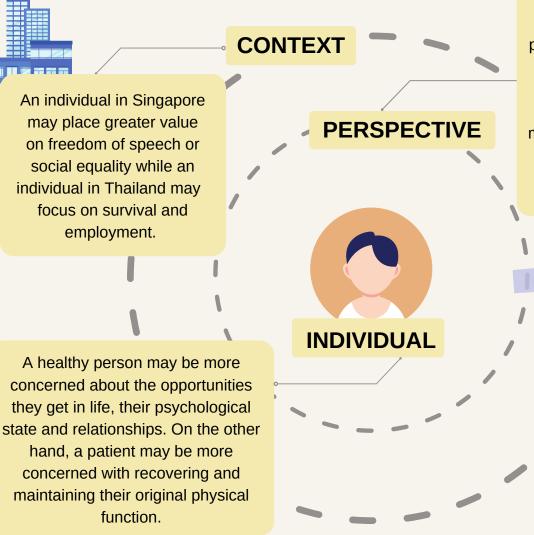
It is important for QoL to consider the opinions and perspectives of the individual.

QoL is described using both **objective** and **subjective** indicators

QoL should account for both objective metrics and subjective experiences of the individual.

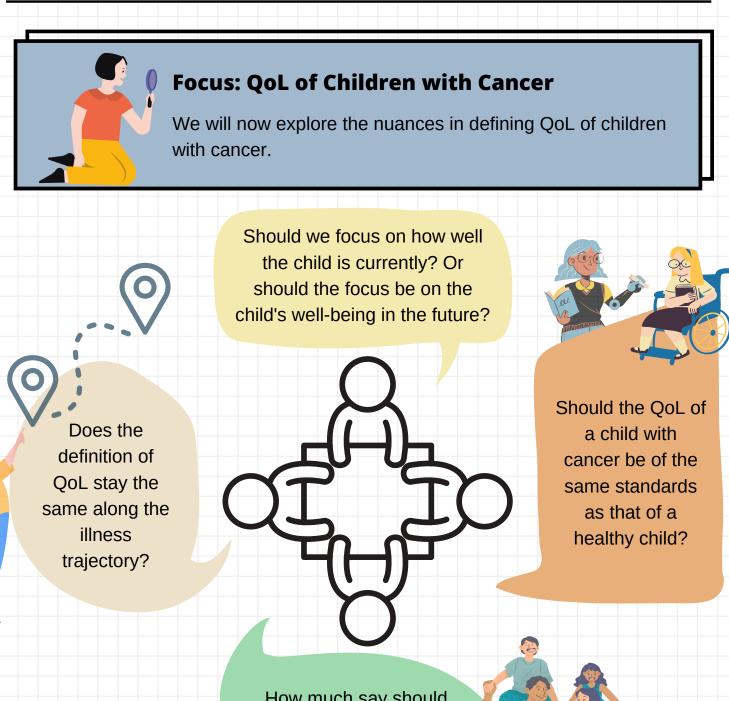
The variations in definitions of QoL often occur due to the **differences in these three concepts** because people may have their own **distinct concerns and focus**.





From an economic perspective, QoL of the population may be measured using indicators like employment and GDP. However, from a health/ medical view point, indicators of measurement may be HRQoL as well as health of individuals.

Health-related QoL (HRQoL) is a more specific construct that focuses on the impact of health and illness on well-being. It is typically used as a proxy for QoL in the health/medical setting.



How much say should parents have on their child's QoL?

The truth is that there is **no definitive answer** to what QoL means for children with cancer and that of any other population. There are simply too many ways of how we can look at and understand their lived experiences.

Instead, we should constantly **consider what is important to the population and us** to build a definition of QoL that is meaningful for both our beneficiaries and our work.

Measuring Health-Related Quality of Life (HRQoL)

In this section, we will look at HRQoL measurement tools given that CCF's work is based in a medical setting.

Why do we want to measure HRQoL?

Measuring HRQoL can provide a **meaningful and comprehensive assessment of our beneficiaries' well-being**, aside from their illness or functional abilities.

This will allow us to understand both the needs of our beneficiaries and the outcomes of our work.

Using measurement tools that have been proven to be **reliable** and **valid** would provide us with the desired quantitative data that allows us to draw meaningful conclusions and make comparisons between populations or across time. **Reliability:** consistency of a measurement that gives the same results on different occasions

Validity: the property of a measurement that tests what it is supposed to test

What are some considerations when choosing measurement tools?



Length of time needed by respondents to complete the questionnaire/ scale



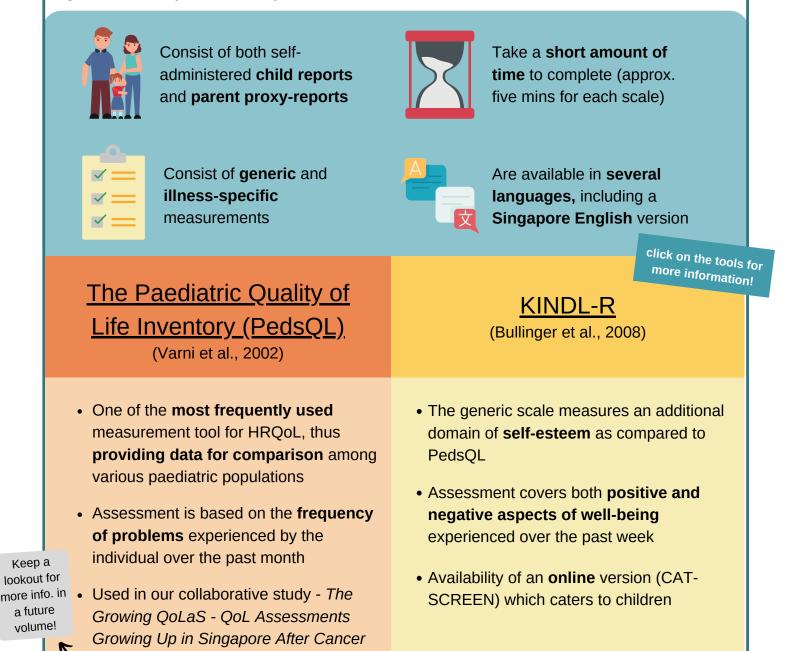
Methods of administration e.g. questionnaire, interview



Age or education level of respondents

Examples of HRQoL Measurement Tools

Below are two paediatric HRQoL measurement tools that have demonstrated good reliability and validity. Both measurement tools:



Measurement of QoL in children with cancer is imperative for us to understand the impact of cancer and its related issues more holistically. This can allow us to **monitor our beneficiaries' well-being** and **provide targeted interventions** accordingly.

While there are several instruments that measure the various dimensions of QoL in paediatric literature, it is important to choose those that address our questions.

1. Varni, J. W., Burwinkle, T. M., Katz, E. R., Meeske, K., & Dickinson, P. (2002). The PedsQL™ in Pediatric Cancer. Cancer, 94(7), 2090–2106. https://doi.org/10.1002/cncr.10428

^{2.} Bullinger, M., Brütt, A. L., Erhart, M., & Ravens-Sieberer, U. (2008). Psychometric Properties of the Kindl-R questionnaire: Results of the bella study. European Child & Adolescent Psychiatry, 17(S1), 125–132. https://doi.org/10.1007/s00787-008-1014-z





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Thank you!

We hope that you've enjoyed reading this issue of The Scope. The Scope is published bi-annually, providing you with exclusive insights into our latest research studies in a digestible format. Through sharing these bite-sized research findings, we hope that we can make research related to childhood cancer more accessible to everyone.

If you are interested to read about our studies in greater detail, please reach out to us via email.