

IJACT 24-6-24

Study on Stress and Quality of life of people with Moderate Disabilities

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Abstract

This study was conducted to explore the relationship between stress and the quality of life experienced by people with disabilities and to provide essential data for improving their quality of life and promoting their health. The data collection period was from November 2023 to January 2024. Fifty questionnaires were distributed, and 48 copies were used, excluding unfaithful responses.

As a result of the study, since people with moderate disabilities show hesitancy in all of their daily life processes, not only physical rehabilitation but also psychological rehabilitation should be necessary so that they can accept their bodies that have turned into disabilities. In addition, programs for the acceptance of disabilities for people with moderate disabilities should be designed to recover more widely.

In the future, education and psychological programs should be activated to overcome the symptoms of moderate disability and receive related information. Finally, disability awareness education should be further subdivided to bring about changes in the perception of disabilities.

Keywords: Stress, life, Quality of life, Moderate Disabilities, Disabilities

1. INTRODUCTION

Life expectancy is increasing due to the development of medical technology and living standards, and the average life expectancy in Korea increased from 83.39 in 2009 to 85.7 in 2018.

In the meantime, various social changes caused by rapid urbanization and industrialization are causing a surge in various accidents and diseases and increasing the likelihood of moderate disability. As of 2017, the incidence of disability in Korea was 5.39%, of which the incidence of moderate disability reached 88.1%.

The meaning of accepting a disability to a person with a moderate disability is the present chapter in the past as a non-disabled person. It can be seen as a 'process' to change and adapt to oneself as a lover—the number of disabled people with moderate disabilities.

Serious psychological difficulties because they became disabled due to unexpected accidents or diseases in the process of use, be able to go through. In addition, through a study on the disability acceptance process of people with moderate physical disabilities, Kim suggests that the disability acceptance stage is the initial shock and anger stage, the denial and confusion stage, the loss stage based on reality awareness, the pain

Manuscript received: March 13, 2024 / revised: April 23, 2024 / accepted: May 10, 2024

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shock and anger stage, the denial and confusion stage, the loss stage based on reality awareness, the pain and despair stage, the depression and defensive seclusion stage, the challenge and enlightenment stage, and the stage of acceptance and growth.

In this study, people with moderate disabilities experience depression in the process of accepting disabilities, which is consistent with the report of depression in the process of accepting disabilities (5 stages of shock, denial, anger, depression, adaptation, or acceptance) of people with spinal cord disorders suggested by Weller & Miller.

This suggests that people with moderate disabilities experience depression in the process of accepting disabilities, and psycho-emotional support for them is essential. A study was conducted on the factors affecting the acceptance of disabilities by people with moderate disabilities.

Kim said in "A Qualitative Study on the Process of Acceptance of Disabilities by People with acquired disabilities" that people with moderate disabilities have a disability. The negative perception of the child is changed, and you have a 'new eye' for disability.

Results were drawn. In the case of people with moderate disabilities, they feel more shame and feel left out than those with congenital disabilities.

This paper aims to find out the relationship between stress and quality of life experienced by people with moderate disabilities and to provide essential data to overcome symptoms of moderate disabilities in the future, as it reported that they experienced savings and insisted that intensive services were needed, especially for people with severe disabilities.

2. RESEARCH OBJECTIVES

This study's specific purpose is to explore the factors affecting the relationship between stress and quality of life experienced by people with moderate disabilities.

First, the degree of moderate disability, stress, and quality of life satisfaction of the study subjects are checked.

Second, the difference between stress and quality of life satisfaction according to the study subjects' degree of moderate disability is identified.

Third, the study subjects' moderate bowel love is identified as having an effect on stress and quality of life satisfaction.

1. Research design

This study is a research study to understand the satisfaction of the relationship between stress and quality of life experienced by people with moderate disabilities and to explore the effects of stress and quality of life satisfaction experienced by people with moderate disabilities.

2. Subject of study

Subjects who lived in the Gyeongbuk region and had a moderate disability for over three years were selected. Only those who understood the purpose of the study and gave written consent to participate voluntarily were selected.

3. RESEARCH TOOL

3.1 Moderate Disability

Kim scale, 20 items that deleted four items in the motivational area unsuitable for people with disabilities were composed of 5 multiple-choice questions. The scale is a Likert scale of 1 point for 'not at all' to 5 points for 'very much,' and the higher the score, the higher the score. Cronbach's α in this study could be confirmed as .885.

3.2 Stress

To measure the stress of the moderately disabled, the stress response scale of Kim was used.

It consisted of 10 questions about physical stress and 10 questions about psychological stress, and it was not at all. It is a Likert scale of 1 to 5 points of 'very yes', and the higher the score, the higher the stress. Cronbach's α in this study showed .899 for physical stress and .853 for psychological stress by sub-area.

3.3 Quality of Life Satisfaction

According to Kim (2018) guidelines of the World Health Organization (WHO), the 26 questions of the World Health Organization's simplified quality of life scale developed in 1998 were composed of 4 sub-areas, with a total of 20 questions excluding unnecessary questions through a prior survey.

It is a Likert scale of 1 point for 'very unsatisfactory' to 5 points for 'very satisfied,' and the higher the score, the higher the quality of life satisfaction. Cronbach's α in this study was .764, environmental relations .828, physical health .718, and psychological health .819.

3.4 Data Analysis

Statistical processing was performed using the SPSS 18.0 program for statistical analysis of this study.

First, Cronbach's α coefficient was calculated to verify the reliability of the measurement tool.

Second, frequency analysis was performed on the general characteristics of the sample.

Third, an independent sample t-test and one-way variance analysis were conducted to determine the difference between moderate disability, stress, and quality of life satisfaction, and post-tests were also conducted.

Fourth, a correlation analysis was conducted to determine the correlation between moderate disability, stress, and life satisfaction.

Fifth, a simple linear regression analysis was conducted to find out the effect of moderate disability on stress and quality of life satisfaction.

4. DISCUSSION

1. General Characteristics

Considering the general characteristics, 15 people (31.8%) were aged 52 to 61, 18 people (29.9%), and 15 people (31.8%) were aged 52 to 61.

The educational background was 40 high school graduates (54.7%), five vocational college graduates (9.4%), and three people (3.7%) with college degrees or higher.

Twenty-three respondents (78.2%) said they had a spouse (married), 25 respondents said they had no spouse (unmarried, bereavement), five respondents (8.8%) had monthly incomes less than 1 million won, 37 (87.6%) had less than 2 million won, and 5 (8.8%) had less than 3 million won.

2. Differences in Stress and Quality of Life Satisfaction According to Moderate Disability

This results from analyzing whether there is a difference in physical and psychological stress according to the moderate disability. As a result of the analysis, statistically significant differences were found in physical and

Life	environme	-0.056	-0.032	-0.147***	-	1	
Satisfacti	ntal					0.422*	
on	relationshi					**	
	p						
	physical	-	-	-0.145**	-	-0.132***	1
	relationshi	0.178***	0.215*			0.268*	
	p		**			*	
	psychologi	-	-	-0.312***	-	-0.346**	-0.187***
	cal health	0.132***	0.178*			0.517*	1
			**			**	

5. CONCLISIONS AND SUGGESTION

According to a study by the Ministry of Health and Welfare in 2020, physical symptoms such as facial flushing and nervousness and mental symptoms such as depression were found to be symptoms of moderate disability.

Moderate disability is intensified by hormonal changes and social and psychological factors, and the intensified stress affects an individual's ability to adapt to physical functions and psychological disorders and can cause or intensify moderate disability.

A study found that 50% of people with moderate disabilities experience minor symptoms, and 25% develop severe symptoms requiring medical treatment.

In this study, moderate disabilities were most often severe or higher symptoms. Minor symptoms and severe, moderate disabilities appeared in order, and it was confirmed that the severely disabled people with moderate disabilities showed differences in symptoms. However, physical and mental symptoms appeared as moderate disabilities.

In addition, this study was conducted to explore the relationship between quality of life and the quality of life of the disabled and to find systematic countermeasures to improve their quality of life and health. The following conclusions were drawn.

Moderate disability symptoms were presented as a perfect score of 5 and confirmed by dividing them into severe, severe, and mild, moderate disability symptoms. At this time, it was found that the more severe the symptoms of moderate disability, the more severe the physical and psychological stress.

People with moderate disabilities who have lived as non-disabled people until a certain period of their lives and became disabled by unexpected accidents experience many changes not only in their physical but also in their personal values, lifestyles, and social roles.

Therefore, it is essential to examine how people with moderate disabilities accept personal and social changes that have occurred after their disability accidents and what they experience in the process of overcoming disabilities.

In particular, understanding the real lives of people with moderate disabilities who have undergone significant changes due to unexpected disabilities in the field of social welfare practice that strives to improve an individual's social function is an essential prerequisite for providing appropriate services for them.

It seems that it is necessary to actively manage moderate disability symptoms to reduce the physical and psychological stress of people with moderate disabilities suffering from moderate disability symptoms. In addition, the more severe the symptoms of moderate disability, the lower the satisfaction with physical and psychological health conditions among the quality of life satisfaction, and it is considered that follow-up studies should be conducted continuously to find out.

In future studies, studies that have been approached from various perspectives are needed, along with detailed observation of the period, symptom, and condition of moderate disability. In addition, education and intervention programs should be activated so that symptoms of moderate disability can be alleviated. Related information can be provided, and symptoms can be alleviated through active management, improving quality of life.

In addition, psychological rehabilitation should be prioritized before functional recovery for acquired disabilities. As the process of correctly accepting one's sudden disability, giving new value to the life changed by the disability, and reintegrating is important, studies related to psychological rehabilitation should be activated in various academic fields in the future.

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