

## **Quality of life of children with Cerebral palsy: An observational study**

**Mr. Dhanraj Babu, Research Scholar, Malwanchal University**

**Dr. Anu V Kumar, Research Supervisor, Malwanchal University**

### **Introduction**

Mobility and posture abnormalities that restrict activities and are related to non-progressive anomalies in the foetal or newborn brain are what set cerebral palsy apart from other conditions that cause similar symptoms. Disorders of the senses and the brain, difficulties communicating and perceiving, changes in behaviour, and/or seizure activity are commonly co-occurring with motor dysfunction. According to the authors who were listed above, some manifestations of CP may be more noticeable or problematic at other stages of a child's development, whilst other manifestations of CP may be more noticeable or problematic during other phases of a person's life or at specific periods. In spite of receiving medical treatment and rehabilitation, these children's functioning, motor skills, health, and quality of life may all be negatively impacted by the numerous motor constraints.

To verify that therapy has an effect on the functioning and motor performance of children who have cerebral palsy, there has been some concern over the difficulty of designing standardised instruments that contain appropriate and objective assessments of what they are intended to examine. The use of spasticity evaluation scales, assessments of gross and fine motor abilities to evaluate function change, and gait analysis to identify standard variances are all examples of assessment methods that have been put into practise. More recently, the necessity to recognise the pathogenic consequences on health and well-being from the perspective of the person or his or her caretaker has resulted in consultative attempts to design measures to evaluate the impact on the quality of life of these children. These attempts are in response to the necessity to recognise the pathogenic consequences on health and well-being from the perspective of the person or his or her caretaker.

It has been challenging to measure children's quality of life since youngsters are often considered to be unreliable respondents. Despite this, there is mounting evidence that children may properly self-report their quality of life (QOL) provided their emotional development, cognitive aptitude, and reading level are taken into consideration. The development of an original quality of life scale that is specific to children with cerebral palsy has been encouraged as a solution to the shortcomings that are inherent in the measurement tools that are now available. To be able to evaluate the quality of life of children who have cerebral palsy (CP), multiple methodological hurdles need to be overcome. These hurdles include problems with communication, the wide range of disabilities that are present in this group, and a lack of appropriate validated instruments.

## Methodology

An observational study methodology was employed for this specific piece of research. One hundred male and female carers of children with cerebral palsy took part in this round of the study investigation. Their average age varied from 35.2 years old. Participants in the study required to be the primary carers or parents of children with cerebral palsy between the ages of 5 and 18 years old. The parents or legal guardians of the youngsters provided informed consent for their children to participate in the study. The strategy of deliberate sampling was employed to choose the samples. Parents and primary carers of children with cerebral palsy should complete the 66-question CP QOL-Child Primary Caregiver Questionnaire to report their child's quality of life in the following areas: well-being and social acceptance; functionality; participation and physical health; emotional well-being and self-esteem; access to services; pain and disability impact; and family health. Reporting on their child's quality of life in these situations During the data analysis process, descriptive and inferential statistics are employed.

## Results

The findings indicated that cerebral palsy is more prevalent in male children in GMFCS V. The majority of responders were females, mostly moms with a high school diploma. According to the research, children have a bad quality of life in the following areas: well-being and social acceptability; functioning;

participation and physical health; emotional well-being and self-esteem; access to resources; pain and disability effect; and family health. Moreover, there is a substantial link between quality of life and parental education, although all other demographical factors do not.

## Conclusion

According to the findings of the study, the quality of life of children is not up to par. As a result, more research with bigger samples is required to determine which variables and under what situations might improve children's quality of life in relation to their health.

## Reference

- 1) Abdullahi H, Satti M, Rayis DA, Imam AM, Adam I. Intra-partum fever and cerebral palsy in Khartoum, Sudan. *BMC Res Notes*. 2013;6:163
- 2) Babatunde OA, Olubunmi OA, Olubukola AO, Olusanjo AC. Quality of life of mothers of children with cerebral palsy and their age matched controls.; *Afr J Neurol Sci*. 2014 33:3. Available from: [http://www.ajns.paans.org/article.php3?id\\_article=460](http://www.ajns.paans.org/article.php3?id_article=460) . [Google Scholar]
- 3) Chen KL, Tseng MH, Shieh JY, Lu L, Huang CY. Determinants of quality of life in children with cerebral palsy: A comprehensive biopsychosocial approach. *Res Dev Disabil*. 2014;35:520–8.
- 4) Dickinson HO, Parkinson KN, Ravens-Sieberer U, Schirripa G, Thyen U, Arnaud C, et al. Self-reported quality of life of 8-12-year-old children with cerebral palsy: A cross-sectional European study. *Lancet*. 2007;369:2171–8.
- 5) Greitane A, Ceiciniece I, Cibule L, Teibe U. Influence of accessibility of services on quality of life of school children with cerebral palsy in Latvia. *EDP Sci*. 2012;2:7.
- 6) Guillamón N, Nieto R, Pousada M, Redolar D, Muñoz E, Hernández E, et al. Quality of life and mental health among parents of children with cerebral palsy: The influence of self-efficacy and coping strategies. *J Clin Nurs*. 2013;22:1579–90

- 7) McIntyre S, Taitz D, Keogh J, Goldsmith S, Badawi N, Blair E. A systematic review of risk factors for cerebral palsy in children born at term in developed countries. *Dev Med Child Neurol.* 2013;55:499–508