

Impact of Spinal Cord Injury on Patients Social Integration in Ibn- Al-kuff Medical Rehabilitation Center.

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Abstract: Social integration is the key point to return the patient with spinal cord injury into the community and to restore normal activities before injury.

Objectives: to assess patient social integration after spinal cord injuries in Ibn- Alkuff Medical rehabilitation center.

Results: The results depicted that the patients social integration were rated in moderate level.

Conclusion: The study concluded that the spinal cord injury has positive impact upon patients social integration.

Recommendations: The study recommended that, an education program should be designed and manual should be distributed to patients' and their family to increase their information toward spinal cord injuries and medical rehabilitation to improve patients health status and quality of life.

Keywords: Patients health status, Social integration, Spinal cord injury.

I. Introduction

Spinal cord injury is considered as chronic medical condition in which the individual is unable to maintain certain vital functions and it may lead to disability which show as limitation that restricts the activity of the individual^[1]. And considered highly disability and focusing in young individual and lead to most painful effect for patients and their families for more than one levels: physical, psychological, social and financial burden for the family during all stages of treatment and rehabilitation period^[2]. The spinal injury affects wide cases in the area of middle east and were considered major health problem and these injuries do not effect patients only but also their families, most of these patients face many challenges in the health status (physically, psychologically, socially) functioning for many years and life expectancy of patients' life depends on medication role, family role especially parents and spouses^[3]. The injuries of spinal cord injury are considered dilemma in the wide area of world and can be impeding the management of the patients, return him to his or her work. Many researches emphasis that approximately one third of patients return to their work or another job after injury^[4]. Injuries consequences will affect wide range of the patient physical, psychological, social and environment which include their family, friends and the social interaction in the community^[5]. The injuries were subversive events for individuals and their family with many physical, social, psychological and economic problems, patients may be rely on their family for long period and need support from them for months or years^[6]. Patients faced many obstacles to the care provider and family and the major objective of rehabilitation is return patients to normal activities, jobs, and roles in the life and re-integration to the community before injury^[7].

II. Methodology

A descriptive design(Cross-sectional study) was used to describe the variables and the relationships that occur among them in the study. The study was initiated from (December, 2014 through June, 2015). A purposive (non-probability) sample of (100) spinal cord injuries patients and were selected who attend to outpatients Ibn- Alkuff Medical rehabilitation center for follow-up periodically. A questionnaire was designed and constructed by the researcher and was consisted from two parts: part one: patient general information: This part was designed to measure the patient demographic characteristics which include: age, gender, marital status, level of education, occupational status and family social characteristics was designed to measure family social characteristics which include: type of family, monthly income, living area (arrangement) residence. Part two: The researcher constructed and structured this domain based on social integration scale through (11) items to measure the variable underlying the present study and which were described patients social integration in the community, reliability through alpha value = (0.936). The validity of the instrument was achieved through a panel of experts, the developed questionnaire was designed and presented to (15) experts, those experts were asked to review the questionnaire for its content clarity, relevancy and adequacy. The data were collected through the utilization of the developed questionnaire and by means of structured interview with the patients, Data were analyzed through the use of statistical package of social sciences (SPSS) version 16.

III. Results

Figure (1) patients gender

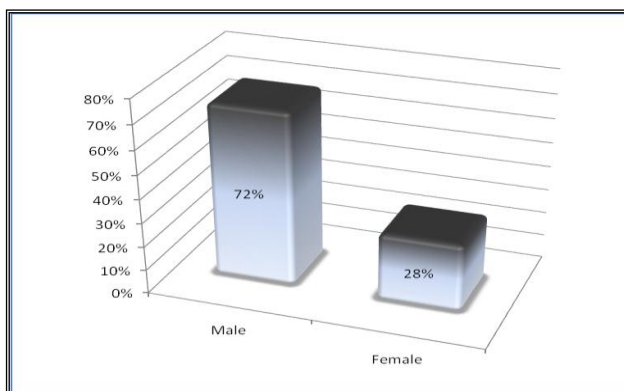


Figure (2) patients Age groups

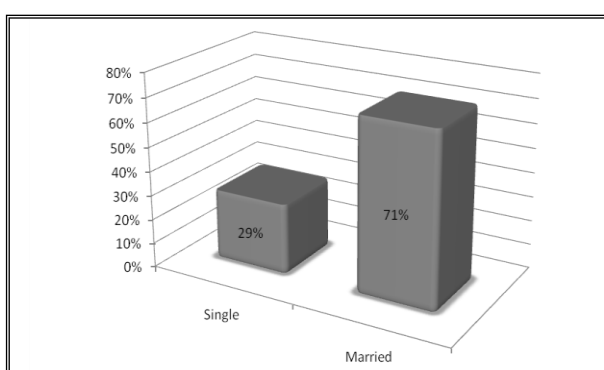
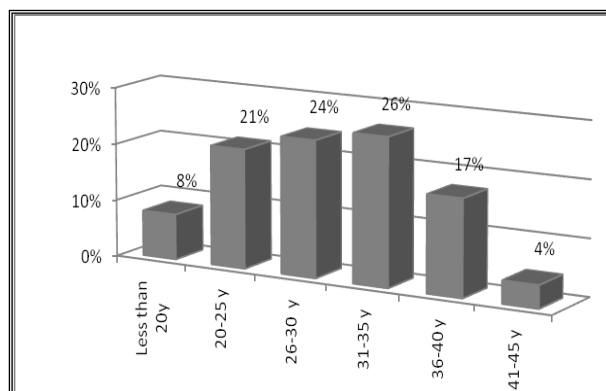


Figure (3) Patients Marital Status

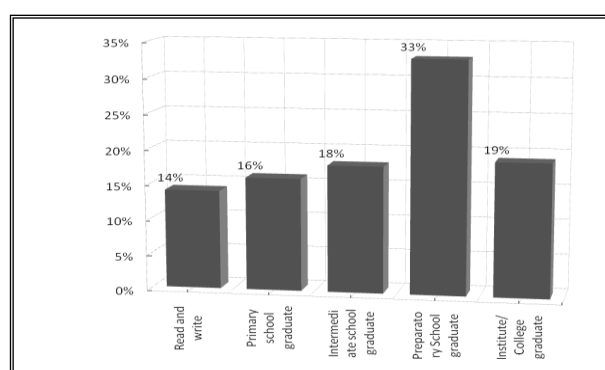


Figure (4) Patients Educational levels

The results show in Figure (1,2,3,4) that one quarter (26%) of the patient are of (31-35) years old and (20-25 y = 21%); (26-30y = 24%); (36-40y=17%); (41-45 y= 4%); mean age (29.76 + 6.048) and the that most of study sample (71%) were married and only(29 %) were Single , Regarding patients educational levels figure ,The results show that one third of the study sample (33%) were educated at an Preparatory (secondary) School level and only (14%) of them read and write .

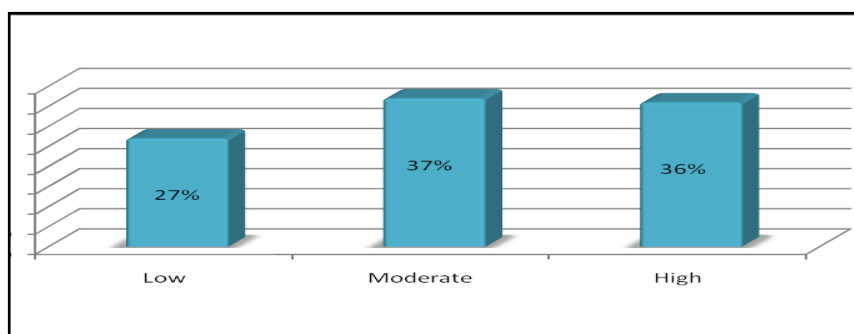


Figure (5) Patients levels of social integration

Figure (5) represent social integration among spinal cord injury, results shows moderate level rated in Patients Social integration =37% in moderate level and 27% in low level.

Table (1) Patients' Socio-demographic Characteristics (N=100)

Variables		F	%	Cumulative Percent
Patients' Occupation	Student	5	5	5
	Privet work	10	10	15
	Workless	22	22	37

	Governmental employee	39	39	76
	House wife	24	24	100
	Total	100	100	
Monthly Income	Insufficient	20	20	20
	Mostly Sufficient	63	63	83
	Sufficient	17	17	100
	Total	100	100	
Family type	Nuclear	24	24	24
	Extended	76	76	100
	Total	100	100	
Residence	Rural	36	36	36
	Urban	64	64	100
	Total	100	100	

Table (1) shows patients' socio-demographic characteristics of the study results, the results reveal that more than one third of them (39%) were governmental employee and (63%) reported that they had moderate monthly income and (20%) of them had insufficient monthly income. Regarding patients residence table shows that the majority of the study sample are living in urban residential area (64%) of the completely sample.

Table (2) Association between Patients Social Integration and their Patients Socio-demographic Characteristics

patients Social integration	Contingency coefficients	Sociodemographic Variables					
		Gender	Age	Education	Marital	Monthly income	Occupation
	Value	18.245	31.847 _a	18.309	12.453	13.431	9.541
	d.f.	2	10	8	2	4	8
	P.value	.001	.001	.019	.002	.009	.299
	Sig.	H.S.	H.S.	S.	H.S.	H.S.	N.S.

C.S. (P.V.) = comparative significant (probability value <0.05), Contingency Coefficient, S= Significant, NS= non significant , S= Significant, , HS= highly significant

Table (2) shows association between patients social integration aspects with patients sociodemographic characteristics , the table result reveals that high significant association between most patients socio- demographic with patients social integration aspects.

IV. Discussion:

Health status and quality of life measurement for spinal cord injury patients usually faced many difficulties which are consider as subjects to researches, some researcher were scope on physical and psychological and social aspect of wellbeing that may be affected by injuries and disability or throughout rehabilitation process, many researchers examine the functional independence or outcomes throughout or after rehabilitation process^[4]. Results regarding gender shows that more than two third of patients were males ; This distribution is consistent with some studies , Ataog˘lu, and his colleagues^[9] mentioned that more than two-third (74.3%) of their research was male and only (25.7%) was female. Abed Ali and Tawfiq showed in their study about two-third (60%) of patients were male while (40%) were female^[10]. Regarding age the result study in shows that more than one quarter of the patient are of (31-35) years old, this result is supported with these studies: Abed Ali and Tawfiq reported that the dominant age group of their study sample (23%) within (31-35) years old ^[10]. Coura, and his colleagues^[11] they found that the half (50%) of their study sample within age group (18-33) years old. Vall and his colleagues^[1] revealed in their study that more than two-third (67%) of the patients within age group (21-40). Robert and Zamzami showed that their study was applied in Saudi Arabia

which reported that their age of the study sample was higher percent(40%) within age group (21-30) and lower percent (2.2%) were within age groups (71-80)^[12]. Regarding educational level, the result study shows that one third of the sample were educated at an secondary school level. this result is consistent with Abed Ali and Tawfiq stated that the majority of the study sample was secondary school graduated (24%) while the minority (6%) of sample can read and write^[10]. Kraizem who demonstrated that the highest proportion (29.2%) of his study was secondary school graduated while the not-educated patients percentage (0.8%)^[7]. The result study in figure (3) shows that one third of the sample were married, this result agrees with these studies: Coura and his colleagues demonstrated in their study that more than one third (38.7%) of their study population was married^[11]. Vall and his colleagues revealed in their study that more than one-third (45.9%) of the patients was married^[1].

The result reveals that general status in the most of study samples were rated as having moderate social integration aspect , and one third of them rated in poor social integration status, this result agree with the following studies: Abed Ali and Tawfiq presented in their study that the spinal cord injury patients have major effect mostly on social aspect and level of independence domain^[10]. Kraizem found in his study that two-third of patients were independent and a little percent of patients has depended on his self in daily activities and emphasized in his study that medium level to high level of community participation for spinal cord patients^[7].

Samuelkamaleshkumar and his colleagues showed in their research the increasing level of social reintegration in patients with high physical independence and activity of daily living and and cognitive independence^[13]. Dijkers emphasized that participation and sharing in community action or activities are correlates significant strongly with subjective health related quality of life^[14].

The results reveals that there is high significant association between most patients social integration aspects with most of patients socio-demographic characteristics this result agrees with these studies: Carpenter, et.al., stated that the patient sharing in social and physical activities was influence by factors of environment and they emphasized that household income had a statistical effect on patient's life satisfaction and higher monthly incomes record greater life enjoyment^[8]. Al-Jadid, et.al., revealed in their study that the patients health status and quality of life is affected by factors such as financial status, and employment^[4]. Kraizem emphasized in his study that there was strong association between patients' gender and community integration and no association between patients educational level and age group with community integration^[7].

V. Conclusions

According to the present study findings, the researcher concludes the following :

- The results depicted that the patients social integration were rated in moderate level.
- The study indicates that there was highly significant association between patients social integration levels and patients' age, gender , marital status , and monthly income.

VI. Recommendations

According to the results of the study the researcher recommends an educational program should be designed for patients and their family to increase their information toward patients integration in the community to improve their patients health status.

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