The Levels of Self-Esteem and Quality of Life of Young People with Chronic Juvenile Arthritis

Wilmer Roldan

Abstract

Juvenile idiopathic arthritis is a disease that affects one in 1000 children is a chronic autoimmune disease that affects children before the age of 16. I want to help these young people to measure their levels of self-esteem and quality of life to help them if they have problems or need psychological help and what factors may affect them. It is important to carry out this study because today young people suffer from depression, so these young people with a chronic disease may be more affected. We would help reduce the cases of depression and suicide since most are caused by chronic diseases.

The study will be carried out with two groups, one as a control group with 10 WPHS students and the other with the experimental 10 BCHP patients who will be between 14 and 20 years old. These data on quality-of-life levels of self-esteem will be measured by means of a survey called Short Form 36 (SF-36).

Surveys will be collected and then we will analyze each question to reach a conclusion. Since according to previous studies, they have shown a poor quality of life and symptoms of depression in adults with rheumatoid arthritis. According to the study, it must demonstrate low levels of self-esteem and poor quality of life affected by certain factors such as fatigue and the impediment of physical activities.

In the investigation, the data are presented in graphs for a better understanding of the results and a diagram to show which factors are affected. As it is going to find low levels like a previous study because it is a chronic disease part of rheumatology. Future studies that I suggest are whether young people with chronic juvenile arthritis can affect their academic performance and ultimately the different subtypes of juvenile idiopathic arthritis can have different impacts on quality of life.

Introduction

Juvenile idiopathic arthritis (JIA) is a rare autoimmune disease that affects children before the age of 16 and can also cause babies at 6 months of age [1]. In the United States in 2015, according to statistics, 294,000 children were detected with this childhood disorder and that most women are more frequently affected [2]. The effects of this disease are joint inflammation, pain, stiffness, loss of joint movement, and functional impairment [3]. So if this disease is present in the adolescence stage, which is a time when the person seeks their identity, they form their personality that is part of development and deal with a chronic disease such as arthritis that is lived with pain, fatigue, reduced activity physical and disability [4, 5]. It can affect the levels of self-esteem and quality of life, resulting in depression, anxiety and, worst of all, suicide, since according to research, chronic diseases are a greater risk of suicide [6].

In previous research, they detected that adolescent with JIA were less active in physical activity due to fatigue and problems with joint movement, but they did not study how adolescents felt not being able to do the activities that an ordinary young person can normally do. affect their self- esteem [7]. In a study, the quality of life of caregivers of people suffering from juvenile idiopathic arthritis was evaluated and it was detected that

people have a poor quality of life due to the burden of this disease and that it is related to psychosocial and socioeconomic. But a study of young people has not been carried out related to the quality of life and how it affects them and that there are certain factors such as not being able to play a sport, feeling very fatigued or getting up every day with pain and having complications from doing things around the house [8].

It is important to examine the effect of fatigue on young people's self-esteem and quality of life because lack of energy, fatigue can affect their mental health [9]. In addition, previous research has identified that physical activity can greatly help the disease, but most were less involved in exercise [7]. Other research has shown that people with rheumatoid arthritis in older people most showed symptoms of depression [10].

Previous studies have shown that the Short Form 36 (SF-36) is an effective tool for measuring self-report of functional health and well-being. There are 36 questions to reflect 8 scales of health such as: physical functioning, physical role, pain, general health, vitality, social function, emotional role, and mental health. In addition, previous reports the (SF-36) is reliable and valid to measure the quality of life in people with chronic diseases [11].

Research has shown that young people with arthritis are less included in physical activity and are more sedentary, although the main thing to live with this disease is to exercise [7]. It was not examined how the young person feels when not being able to carry out activities that an ordinary young person can do, it could affect his self-esteem. Other studies have measured quality of life and depression in adults with rheumatoid arthritis who presented the majority symptoms of depression and low quality of life [10]. So, this can affect young people since they are more prone to depression since living with an illness in an age of exploration of socializing with people can affect a lot [12]. Therefore, we hypothesize that young people with arthritis, where they are more sedentary, have physical limitations and present fatigue, they may present low levels of self-esteem and poor quality of life as consequences of depression, anxiety, and worst of all, suicide.

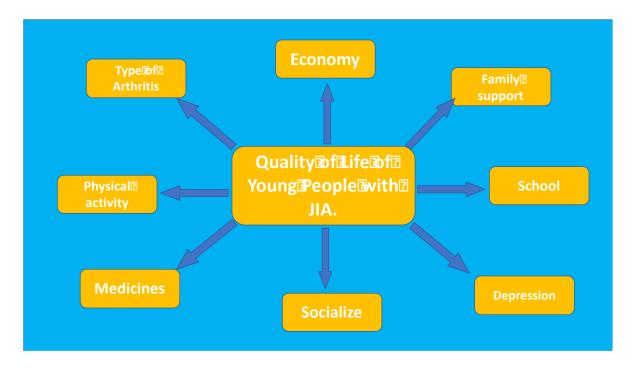


Diagram 1: Quality of Life of young people with JIA factors that may affect.

Methods

The research will take place at two locations at White Plains High School and Boston Children's Health Hospital. Participants are between 14 and 20 years old divided into 2 groups. Control group with 10 participants and experimental group with 10 participants divided into 5 women and 5 men in total 20 people.

There will be no risks in this research. What is going to be done is to use surveys related to the topic of quality of life and mental health of how you have felt in the last few weeks, easy multiple-choice questions that you do not need to write.

The survey is Short - Form 36 that has 36 questions that is divided into its sections on quality of life and mental health. In addition, the same survey will be used for the two study groups, and it is estimated that it will take from 5 to 8 minutes to answer the questions. questions. The surveys will be available in paper and online.

We will conduct youth surveys with the permission of parents, who must sign a consent form. The young people will be explained what the investigation is about after the necessary signatures. You can continue with the surveys. Then the data will begin to be represented in graphs and tables.

Results

Discussion & Conclusions

Recommendations & Future Studies.

The interviewer must be trained and prepared to interact with patients with chronic disease. Have the legal permissions to carry out the survey with the minor and consent.

Future Studies:

Low levels of self-esteem and poor quality of life can affect academic performance. Different subtypes of JIA can have different impacts on quality of life.

References:

[1] US National Library of Medicine, Medical Encyclopedia: Juvenile idiopathic arthritis, (2021) Accessed January 15, 2021.

https://medlineplus.gov/spanish/ency/article/000451.htm

[2]National Center for Advancing Translational Sciences, Genetic and Rare Diseases Information Center, Juvenile idiopathic arthritis , (2021) Accessed January 15, 2021. https://rarediseases.info.nih.gov/espanol/12695/artritis-idiopatica

[3] US National Library of Medicine, Health Topics: Juvenile arthritis (2021) Accessed January 15, 2021.

https://medlineplus.gov/spanish/juvenilearthritis.html

- [4] Psychology of adolescents and their environment, Psychological development, (2021) Accessed January 15, 2021.
- [5] Suris JC, Parera N, Puig C. Chronic illness and emotional distress in adolescence. J Adolescent Health 1996;19:153–6.
- [6] Barnes, A. J., Eisenberg, M. E., & Resnick, M. D. (2010). Suicide and self-injury among children and youth with chronic health conditions. Pediatrics, 125(5), 889–895. [7] Fazaa A, Sellami M, Quenniche K, Miladi Saousen, Kassab S. Physical activity assessment in children and adolescents with juvenile idiopathic arthritis compared with controls. French Society of Pediatrics. 2021;28: 47-52.
- [8]Bruns A, Odette M, Hilario E, Jennings F, Silva C, Natour J. Quality of life and impact of the disease on primary caregivers of juvenile idiopathic arthritis patients. Joint Bone Spine. 2008; 75: 149-154.
- [9] Armbrust W, Siers N, Lelieveld Otto, Mouton L, Tuinstra J, Sauer P. Fatigue in patients

with juvenile idiopathic arthritis: A systematic review of the literature. Seminars in Arthritis and Rheumatism. 2016; 45: 587-595.

- [10]Guerrero JB, Cabrera DM, Muñoz M, Garcia RO.Evaluation of quality of life and depression in patients with rheumatoid arthritis in a General Hospital. A Colombian Association of Rheumatology. 2017; 24: 199-204.
- [11] Ware JE, Sherbourne CD. The MOS 36-item short form health survey (SF-36): I. Conceptual framework and item selection. Med Care 1992;30:473e81.
- [12] TopDoctors, Medical Dictionary: Adolescent Psychology, (2021) Accessed January 27, 2021. https://www.topdoctors.es/diccionario-medico/psicologia-de-la-adolescencia