

**COURSE: HS-02 PSYCHOSOCIAL ASPECTS OF PHYSICAL THERAPY (QUALITY OF LIFE)**

**PROFESSOR:** Pedro Borrego Jiménez, MD

**CONTACT HOURS:** 50

**CREDITS:** 3 American (recommended), 5 ECTS

**LANGUAGE OF INSTRUCTION:** English

**DESCRIPTION:** Quality of life has been described as one of the most relevant measurement tools in health care outcomes. The understanding of Quality of Life is recognized as an increasingly important healthcare topic due to the relationship between cost and value raises complex problems, often with high emotional attachment because of the potential impact on human life. This course makes a full review of actual concepts and how Physical Therapy interventions make a big change in measured outcomes.

**OBJETIVES:**

After successfully completing this course, students will be able to:

- Identify and explain current concerns regarding quality of life in humans, health matters, and environmental change.
- Define basic concepts in quality of life and different measurement tools related to human life.
- Identify the main methods and techniques in Physiotherapy to change and modify QoL.
- Explain the relationship between the environment, QoL, and key biological, cognitive, and socio-cultural evolutionary developments among humans.
- Explain how multiple health and QoL factors influence the effects of human population on the environment.
- Explain how multiple environmental factors affect human population size and quality of life.
- Identify health, social, cultural, ecological, and technological alternatives for reducing the effects of negative matters related to QoL.

**CLASS FORMAT**

In class professor will use different ways to communicate graphic information to students: power points, DVDs, documentaries, articles, readings... Although there will be weekly lectures, this course requires that the student participates in class bringing up questions, formulating doubts, solving puzzling situations, engaging in constructive debates, and thinking aloud about the materials. The strategy followed by the instructor is the cooperative learning process. This is an interactive course in which students learn in large part by contrasting their thoughts with those of their colleagues and with materials provided by the instructor. Visits to different medical/health centers will take place during the course.

**TOPICS:**

- Unit 1: Introduction.
- Unit 2: Quality of Life: Historical definitions and concepts.
- Unit 3: Health Status and Health-Related Quality of Life: measure concepts.
- Unit 4: Assessment of QoL outcomes.
- Unit 5: Psychological Aspects of Health-Related Quality of Life Measurement: Tests and Scales.
- Unit 6: Quality of life in medicine: is it a problem?
- Unit 7: The World Health Organization Quality of life assessment (WHOQOL).
- Unit 8: Quality of Life Assessments across cultures.
- Unit 9: Physical therapy: an international approach (WCPT).
- Unit 10: Basic concepts in Physical Therapy: methods and techniques
- Unit 11: Co adjuvant PT in disabled illness: a study of a case.

- Unit 12: Physical Therapy and HR-QoL.

### GRADING SYSTEM:

1. In-Class Participation 10%
2. Exam I (1-6) 20%
3. Exam II (7-12) 20%
4. Homework 10%
5. Project 30%

### GRADE EQUIVALENCE

UPSA	USA
10	A+
9.5 - 9.9	A
9 - 9.4	A-
8.5 - 8.9	B+
7.5 - 8.4	B
7 - 7.4	B-
6.5 - 6.9	C+
6 - 6.4	C
5 - 5.9	C-
0 - 4.9	F

### ATTENDANCE POLICY:

Every student is expected to attend all regularly scheduled class sessions on time and to be thoroughly prepared for day class activities.

In order to meet the requirements of crediting institutions, instructors compile regular attendance records for every course and when evaluating student participation and performance, the instructor takes this record into account. Absences in excess of 5 contact hours are not permitted and will result in failure of the course.

Limited absence from regularly scheduled class time may be permitted for properly document illness and emergencies. Students must petition in writing the Academic Dean to authorize excused absence. For such excused absence, the students shall immediately consult with the instructor concerning make-up work.

Both the course instructor and the Academic Dean retain the right to dismiss from the course any student who has been absent more than the maximum amounts stipulated above.

### ONLINE REFERENCES:

- [www.cdc.gov/hrqol/](http://www.cdc.gov/hrqol/)
- [www.qualityoflife.org/](http://www.qualityoflife.org/)
- [www.globalbusinessnews.net/story.asp?sid=45](http://www.globalbusinessnews.net/story.asp?sid=45)
- [www.hrcak.srce.hr/file/106428](http://www.hrcak.srce.hr/file/106428)
- <http://www.healthypeople.gov/2020/about/qolwabout.aspx>
- [www.hindawi.com/journals/bn/2013/732038/abs/](http://www.hindawi.com/journals/bn/2013/732038/abs/)
- [www.wcpt.org/](http://www.wcpt.org/)
- [www.aefi.net](http://www.aefi.net)
- [www.apta.org](http://www.apta.org)

### BIBLIOGRAPHY

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- Borthwick-Duffy, S.A. Quality of life and quality of care in mental retardation. In L. Rowitz (Ed.), *Mental retardation in the year 2000* (pp.52-66). Berlin: Springer-Verlag

- LEVI, L. (2001). Psycho-socio-economic determinants for stress and depression: A call for action. En: Coping with stress and depression related problems in Europe. Final Report European Union Presidency, Brussels, 25-27/10/2001: 17-20
- TESTA M. (1996). Current Concepts: Assessment of Quality-of-Life Outcomes. N Engl J Med, Volume 334(13). March 28, 835-840
- PATRICK, D., Erickson P. (1993). Health Policy, Quality of Life: Health Care Evaluation and Resource Allocation. Oxford University Press. New York
- MINAYO, M.C., Hartz, Z.M., Buss, P. (2000). Quality of life and Health: a necessary debate. Ciencia & Saúde Coletiva. ABRASCO, Vol. 5, 1, 7-18
- WHOQOL GROUP (1995). The World Health Organization Quality of life assessment (WHOQOL). Position Paper from the World Health Organization. Soc. Sci. Med. Vol. 41, Nº 10, pp. 1.403-1.409],[ SZABO, S. (1996). The World Health Organization Quality of Life (WHOQOL) Assessment Instrument. En Quality of Life and Pharmaco-economics in Clinical Trials. Spilker, B. (III: 36) (355-362) New York, Lippincott-Raven
- Breivik H, Collett B, Ventafridda V, Cohen R, Gallacher D: Survey of chronic pain in Europe: prevalence, impact on daily life, and treatment. *Eur Pain* 2006, **10**(4):287-333
- Childs JD, Cleland JA, Elliott JM, Teyhen DS, Wainner RS, Whitman JM, Sopky BJ, Godges JJ, Flynn TW, Association APT: Neck pain: clinical practice guidelines linked to the international classification of functioning, disability, and health from the orthopaedic section of the american physical therapy association. *J Orthop Sports Phys Ther* 2008, **38**(9):A1-34