UNIVERSITI TEKNOLOGI MARA

HEALTH-RELATED QUALITY OF LIFE AFTER TRAUMATIC BRAIN INJURY: MALAYSIAN TRANSLATION AND VALIDATION OF QOLIBRI

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MSc

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AUTHOR'S DECLARATION

I declare that the work of this thesis was carried out in accordance with the regulations of Universiti Teknologi MARA. It is original and is the result of my own work, unless otherwise indicated or acknowledge as referenced work. This thesis has not been submitted to other academic institution or non-academic institution for any degree or qualification.

I, hereby, acknowledge that I have been supplied with the Academic Rules and Regulations for Post Graduate, Universiti Teknology MARA, regulating the conduct of my study and research.

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ABSTRACT

Traumatic Brain Injury (TBI) is the world leading cause of mortality among children and young adult worldwide. In the year of 2020, TBI will become the third largest cause of global disease burdened. There will be a lot of problem faced by individual surviving TBI that lead to activity and participation restriction, thus cause to reducing the level of quality of life (QOL). Currently, QOLIBRI questionnaire were used to measure the level of health-related quality of life (HRQOL) among TBI survivors. Thus, the translation and validation of QOLIBRI questionnaire into Malay language were done as part of the process to measure the level of HRQOL among TBI patients in Malaysia. One-hundred and sixty-two TBI patients were involved in this study. The result shows of moderate level of QOL among TBI survivors in Malaysia (n=87, 53.7%). The Malay version of QOLIBRI (M-QOLIBRI) are proved to be reliable with overall alpha value was 0.911. Overall ICC for M-QOLIBRI also shows a good value (ICC = 1.00) thus making the translated version a reliable instrument tool. T-test result also show no significant differences between the first and second administration of the M-QOLIBRI (t = 1.897, p > 0.05). No significant correlation shown between the M-QOLIBRI score with patients age (r = -.111, p > 0.05) and time since injury (r = -.117, p > 0.05). Factor analysis were used to check for the validity of the instrument. The KMO value in this study show acceptable value (0.786) that prove the sample gathered in this study was adequate.

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