

Short Communication

Rajendra Jinjawaria quality of life-22 scale (RJQOL-22) scale

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ABSTRACT

The Rajendra Jinjawaria quality of life-22 (RJQOL-22) scale will help assess the overall quality of life in various acute and chronic diseases such as rheumatoid arthritis, osteoarthritis, and other conditions that affect the quality of life such as cardiovascular, HIV, and cancer. The tool was developed from 29 January 2019 to 01 May 2023 by Rajendra Kumar Jinjawaria at King George's Medical University Lucknow and Banaras Hindu University, Uttar Pradesh, India. The validity of the RJQOL-22 scale was established as per the content validity index (CVI) 98% and validated by more than 100 expert faculty across the world. The scale is standardized and highly valid for assessing the quality of life in acute and chronic diseases. The overall reliability of the scale based on a study was estimated to be (>0.983) through (Cronbach's alpha value) and it indicates a highly reliable scale. While the individual reliability of group I and group II was 0.989 and 0.978 respectively. The acceptable cut-off value of coefficients was 0.7 for moderate and 0.8 for high reliability. This indicates that the tool used in the studies was highly reliable.

Keywords: RJQOL-22, QOL, RKJ, SCALE

INTRODUCTION

The Rajendra Jinjawaria quality of life-22 (RJQOL-22) scale will help assess the overall quality of life in various acute and chronic diseases such as rheumatoid arthritis, osteoarthritis, and other conditions that affect the quality of life such as cardiovascular, HIV, and cancer. The basic concept of the development of scale After an extensive review of literature, discussion with the experts and with the investigator's professional experience. The tool was developed from 29 January 2019 to 01 May 2023 by Rajendra Kumar Jinjawaria at King George's Medical University Lucknow and Banaras Hindu University, Uttar Pradesh, India. Validations of the tool across the country by well-experienced and reputable in institutes (Government and Autonomous institutes across the world) along with expertise in teaching and clinical faculty such as (various orthopedics', rheumatologist, physiotherapist, cardiologist, neurologist, professor, associate and assistant professor, clinical instructor, senior nursing officers) such

as All India Medical Sciences (AIIMS) Delhi, Rishikesh, Patna, Banaras Hindu University (BHU) Varanasi, King George's Medical University (KGMU) Lucknow, Nizam's Institute of Medical Science (NIMS) Hyderabad, Alwar Nursing College Rajasthan, and HIW Holistic Naturopathy Clinic Lucknow. In attempts to develop a quality-of-life assessment that would be applicable cross-culturally. This document gives a conceptual background to the RJQOL-22 scale. It also includes an English language and instruction for administering and scoring and proposed uses for this short form of the RJQOL-22 scale.

METHODS

The rationale for the development of the RJQOL-22 scale

The study was chosen during the postgraduation for requiring an assessment of the quality of life so the researcher felt that developing the RJQOL-22 scale and I

hope this scale is helpful for assessing the quality of life in various diseases that can affect the standard quality of life. And I have tried to cover all domains related to the quality of life such as psychological, physiological, cognition and emotional and develop a concise form of a scale to cover all aspects of quality of life.

Steps in the development of the RJQOL-22 scale

Tool based on the quality of life and development process consisted of multiple stages. When developing the tool first explain the definition of quality of life and an approach to national and international quality of life assessment.

The institutional ethics committee of King George's Medical University (Lucknow, India) reviewed and approved the RJQOL-22 Scale (Registration No: ECR/262/INST/UP/2013/RR-19).

"Quality of life is defined as individuals' perceptions of their position in life in the context of the culture and value systems in which they live and about their goals, expectations, standards and concerns and personal adjustment".³³

This definition reflects the view that quality of life refers to the subjective evaluation and cover psychological, physiological, cognition and emotional parameter but these parameters disturb various disease conditions and health intervention on quality of life.

Content validity (as per CVI) of the scale

The validity of the RJQOL-22 scale was established as per the content validity index (CVI) 98% and validated by more than 100 expert faculty across the world. The scale is standardized and highly valid for assessing the quality of life.

RESULTS

Reliability of the RJQOL-22 scale

The scale uses for assessing the quality of life and the tool was developed by the researcher. To ensure the reliability of the tool, a study was done and it was administered to 90 patients with chronic rheumatoid arthritis and congestive heart failure (45 patients in each group) for the assessment of the effectiveness of the RJQOL-22 scale, and reliability was established by Cronbach's alpha method and the calculated correlated coefficient was (>0.983).and tool is highly reliable for the study.

The overall reliability of the scale based on a study was estimated to be (>0.983) (Cronbach's Alpha value) and it indicates a highly reliable scale. While the individual reliability of group I and group II was 0.989 and 0.978 respectively. The acceptable cut-off value of coefficients was 0.7 for moderate and 0.8 for high reliability. This

indicates that the scale used in the study was highly reliable.

Table 1: Cronbach's alpha test.

Group	Reliability	
	Cronbach's Alpha	No. of items
Overall	0.983	90
Group – I	0.989	22
Group – II	0.978	22

DISCUSSION

This scale is used in various studies for assessing the quality of life and based on the findings of the study toll was found standardized and highly valid and reliable for assessing the quality of life.

Jinjawaria et al conducted a triple-blinded randomized controlled multiple arm trial to evaluate the effectiveness of hydrotherapy versus land-based exercises outcome on quality of life among patients with rheumatoid arthritis. Single centre, the study was done at the department of physical medicine and rehabilitation, KGMU (India). Eligible 90 patients (45 males and 45 females aged 17 to 75 years old suffering from chronic rheumatoid arthritis) and randomisation through the sequentially numbering sealed opaque envelope method (SNSOE).

The intervention (RJHLERA) administered was hydrotherapy exercise (week 30-minutes session for 6 weeks and exercises in a hydrotherapy bathtub submerging body, water temperature (30-35 degrees Celsius) and land-based exercises (weekly 30-minute session for 6 weeks and exercises in land and 11 minutes planned set of an active exercise (as a placebo) on land exercises for the clear control group. Assess the quality of life using by RJQOL-22 scale.

Findings

For the quality of life, the pre-test results showed all the subjects had either poor or neither poor nor good levels of RJQOL-22 selected in each group. At post-test, the hydrotherapy exercise group showed the maximum response with 67.9% very good and, 21.4% good. The group land-based exercises group showed the next to maximum response with 19.2% good while the group the clear control group showed the least/poor response with nil cases in the good/very good category.³⁹

CONCLUSION

The validity of the RJQOL-22 scale was established as per the content validity index (CVI) 98% and validated by more than 100 expert faculty across the world. And overall reliability of the scale based on a study was estimated to be (>0.983) (Cronbach's Alpha value).

The scale is standardized and highly valid and reliable for assessing the quality of life.

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