

Quality of life among individuals with disabilities during the COVID-19 pandemic in the Kingdom of Saudi Arabia

By

Khaled Arab

University of Tabuk - Saudi Arabia

Ahmed Al-Juhani

University of Tabuk - Saudi Arabia

Mohammad Hamdan

University of Tabuk - Saudi Arabia

Nawaf Al-Salami

University of Tabuk - Saudi Arabia

Saleh Al-Atwi

University of Tabuk - Saudi Arabia

Saud al-Anzi

University of Tabuk - Saudi Arabia

Salaheldin Bakhiet

King Saud University- Saudi Arabia

Abstract

This paper aimed to Discusses the level of quality of life for individuals with disabilities in light of the Corona pandemic in Saudi Arabia. The study sample consisted of 158 male and female individuals of different ages with disabilities in the Kingdom of Saudi Arabia. The researcher used the quality of life scale prepared by him, which consists of five dimensions, including (26) paragraphs, and the results showed that all responses of the sample were positive, which indicates the continuation of providing services to people with disabilities during the Corona pandemic.

Introduction

The outbreak of the Covid-19 epidemic has affected the quality of life of almost everyone, especially those with special needs, which are not being met due to the consequent conditions and restrictions. Various kinds of problems have arisen due to the epidemic. Overworked medical staff and postponement of medical treatments other than emergencies have caused the health of the entire population to deteriorate. The category of persons with disabilities was one of the most affected groups in society by this pandemic, as their lives became very difficult during the epidemic (Toquero, 2020).

The COVID-19 pandemic has been an ongoing challenge especially for these people and children with disabilities because their voices are not heard in normal times and this unfortunate situation is heightened during this emergency.” There are a few key reasons why people with disabilities are at particular risk during the pandemic (Parchomiuk, 2021): First, these people have more underlying health problems than the general population,

comorbidities are known to increase the risk of severe symptoms of Covid-19. Second, compared to the general population, a higher proportion of people with Disability in group care settings (Landes et al., 2020) Third, people who rely on assistance in personal care are unable to maintain social distancing (Boyle, Fox, Havercamp, & Zubler, 2020) Fourth, some may experience problems Both in communicating symptoms of illness and obtaining appropriate information (Lake et al., 2021. Fifth, restricted access to health care may present a particular problem for those who require ongoing rehabilitation, without which their health would deteriorate. This access has been postponed, in both From Poland and the first countries then, while the epidemic caused difficulties in the general labor market and many people lost their jobs, this effect was particularly negative for the protection workshops (Kołodziejczyk, 2021. Finally, “people may be People with physical disabilities are at particular risk of emotional stress” (Steptoe & Di Gessa, 2021).

The COVID-19 outbreak emerged as an ongoing crisis in Saudi Arabia at the beginning of 2020, and has rapidly spread across the kingdom. An emergency declaration was issued by the Kingdom suspending work in all government sectors except health and security in May, 2020 as part of efforts to contain the spread of COVID-19. The government has mandated all citizens and residents to stay at home and refrain from outdoor activities for a period of two weeks, and has imposed strict restrictions on The life of the population to limit the spread of the epidemic was represented by local closure, quarantine, closing schools, stopping many recreational activities, wearing face masks, closing restaurants and others (Ministry of Health, 2020; Al-Hasawi, 2021).

As a result, all people in the Kingdom experienced major changes and challenges that affected all patterns and aspects of quality of life as a result of the COVID19 epidemic and the requirements that prompted individuals to stay at home and practice social distancing, which greatly affected different dimensions of their quality of life (Al-Qahtani et al., 2021: Ali et al., 2021). Evidence indicates that the measures implemented to mitigate the spread of the virus not only affect the economy and education, but can lead to direct and indirect psychological effects, they may exacerbate psychological stress, including elevated levels of depression and severe stress, low mood, and patterns of stress. Troubled sleep, financial and other anxiety (Lebrasseur, et al., 2021; Siette, et al., 2021).

Overall, the COVID-19 pandemic has affected and continues to affect the quality of life of all residents, especially individuals with disabilities. The topic of quality of life for individuals with disabilities has attracted many researchers globally and locally. Fridman (2021) conducted a study aimed at discovering the impact of the COVID-19 pandemic on the quality of life of individuals with mental and developmental disabilities, where an analysis of interviews was conducted with 2284 people with mental disabilities. The results indicated that the pandemic was difficult for the lives of these individuals, and it impeded the quality of life of many of them in a number of areas, including continuity and safety, interaction with other members of society, participation in community life, intimate relationships, and choice of goals. Also shown is a study (Gałwiazek, 2021) analyzing the quality of life of people with disabilities during the Covid-19 pandemic based on data collected from the survey. Logarithm model, linear model, chi-square test and significance test for ratios were used. The study found that during the pandemic, the main impact on the quality of life of people with disabilities was due to variables that worsened the mental health of respondents. Thomas et al. (2020) assessed changes in the quality of life of a sample of people with mental disabilities consisting of 137, and a rapid qualitative survey was conducted with a sample of 12 individuals to understand a deeper concept using the retrospective pre-test approach. The results indicated that participants experienced a significant decrease ($p < .001$) in all four

areas measured for quality of life. Participants qualitatively described that declines in quality of life were primarily affected by decreased socialization and effects on health and independence. However, participants also described the ways in which their interactions and mutual support for one another helped maintain some aspects of quality of life.

Perhaps one of the most prominent studies in evaluating the quality of life for individuals with disabilities in the Kingdom is that concerned with multiple sclerosis / multiple sclerosis, a study conducted by a number of researchers (Hazzani, et al., 2018) on 598 participants, (35.8% men and women). 64.2%) in different age groups (15-60 years), and the average duration of the disease with multiple sclerosis was 6.5 years. Diversity was taken into account on the basis of independent research variables, which include educational level, income level, marital status, and employment status to assess the level of quality of life of participants in five different regions in the Kingdom. Using the SF-36 Brief Health Model Questionnaire. This study concluded that MS patients have low quality of life assessments and need more attention to explore the factors affecting their quality of life more broadly. Evaluation rates for females were lower than for males on all subscales, but in general, participants scored lower on all aspects and dimensions of assessment/quality of life. Especially in psychological and emotional indicators, movement indicators and role / status.

This research aims to measure the quality of life of individuals with disabilities during the COVID-19 pandemic in the Saudi context, and to understand the changes related to the areas of performance and the potential health, social and psychological conditions to which these individuals are exposed, and we will reveal the possible factors and variables that are related to understanding their quality of life; this is done by answering the study question:

What is the level of quality of life for individuals with disabilities in light of the Corona pandemic?

2. Methods and materials

2.1. Participants

The study sample consisted of 158 individuals, males and females, and their description is shown in the tables below by type of disability, gender, age group, and the respondent who completed the questionnaire.

Table (1): *Distribution of the sample according to the type of disability*

Disability Category	Number	Percentage
Learning Disabilities	24	15.2%
Visual disabilities	32	20.3%
Autism	32	20.3%
Physical and motor disabilities	32	20.3%
Hearing disabilities	20	11.4%
Mental disabilities	18	11.4%
Total	158	100%

Table (2): *Distribution of the sample according to gender*

Sex	Number	Percentage
Male	94	59.5%
Female	64	40.5%
Total	158	100%

Table (3): Distribution of the sample according to age

Age category	Number	Percentage
Under 12 years	34	21.5 %
from 12 to 18	38	24.1 %
more than 18	86	54.4 %
Total	158	100%

Table (4): Distribution of the sample according to the type of respondent

Category	Number	Percentage
Teachers and specialists	62	39.2 %
Parents	70	44.3 %
person with a disability	22	13.9 %
Brothers	4	2.5 %
Total	158	100%

Study tools

To achieve the objectives of the study, the researcher used the quality of life scale prepared by him after verifying its psychometric properties, and they were as follows:

Validity of the scale

To verify the validity of the scale, the internal consistency of the scale items was found by finding the Pearson's correlation coefficient between each item of the scale, and the total score of the scale. The results were as shown in the table (5) below, the correlations where ranged between (0.221- 0.841) and all correlations were significant at (0.01).

Table (5): Internal consistency validity

paragraph number	Paragraph Correlation to Scale
1	0.620**
2	0.597**
3	0.221**
4	0.230**
5	0.841**
6	0.818**
7	0.791**
8	0.802**
9	0.737**
10	0.759**
11	0.742**
12	0.568**
13	0.620**
14	0.696**
15	0.693**
16	0.743**
17	0.736**
18	0.750**
19	0.796**
20	0.786**
21	0.786**
22	0.785**
23	0.758**
24	0.694**
25	0.685**
26	0.537**

Reliability of the scale

As for the reliability, it was found using the Cronbach's alpha equation, the split-half, after modification by the Spearman and Brown equation, and the Guttman equation, and the

results of this procedure are shown in Table (6), where the reliability ranged between (0.815 - 0.954), which are high stability coefficients.

Table (6): Reliability of the scale

Reliability Coefficient Name	Reliability Coefficient Amount
Alpha Cronbach	0.954
Spilt-Half Method	0.815
Spearman Brown	0.898
Getman	0.883

Data analysis

To answer the study question, which reads, "What is the quality of life for individuals with disabilities in light of the Corona pandemic?"

The arithmetic averages, standard deviations, and percentages of the 26 items of the scale were found, and the rank was found for each item, and the result of this procedure is shown in table (7):

Table (7): Arithmetic mean and standard deviations of the items on the quality of life scale

Paragraph Number	Number	Arithmetic Mean	Standard Deviation	Rank
1	158	3.05	1.008	9
2	158	3.66	1.057	1
3	158	2.59	1.100	18
4	158	2.28	.970	25
5	158	3.00	1.059	10
6	158	3.20	1.251	5
7	158	2.94	1.051	14
8	158	2.95	1.093	13
9	158	2.53	1.127	23
10	158	3.06	1.098	8
11	158	3.32	1.089	3
12	158	2.38	.962	24
13	158	2.56	.968	20
14	158	2.24	.934	26
15	158	2.54	1.056	21
16	158	3.33	1.234	2
17	158	3.00	1.267	11
18	158	2.99	1.302	12
19	158	3.27	1.254	4
20	158	3.13	1.271	7
21	158	2.91	1.356	15
22	158	3.16	1.188	6
23	158	2.85	1.374	16
24	158	2.71	1.337	17
25	158	2.54	1.390	22
26	158	2.58	.979	19
Total		74.77	20.487	-

Table (7) shows the arithmetic means, standard deviations, and ranks of the items of the quality of life scale. Where the averages ranged between (3.66) and (2.24), where the majority of the paragraphs were above the average, except for the last three paragraphs.

Table (8): Percentages of choices for the dimension of "how you feel".

		Evaluate how you feel					
number	Paragraph		Too bad	Bad	Ok	good	v. good
1	How would you evaluate your quality of life?	the number	2	50	64	22	20
		percentage	1.3 %	31.6 %	40.5 %	13.9 %	12.7 %
2	How satisfied are you with your health?	the number	8	18	22	82	28
		percentage	5.1 %	11.4 %	13.9 %	51.9 %	17.7 %

Table (8) shows the percentages of the dimension of how you feel, where the percentages refer to the negative side in assessing the quality of life, while in health satisfaction the percentages are in the positive direction.

Table (9): Percentages of choices for the dimension of “How exposed you are to certain things in the past two weeks”.

How exposed you are to certain things in the past two weeks							
number	Paragraph		Never	a little	moderate degree	a lot	v. much
3	Can you overcome physical pain when you do the things you want to do?	the number	34	36	50	36	2
		Percentage	21.5%	22.8%	31.6%	22.8%	1.3%
4	Can you overcome the feeling that you need medical treatment to be able to carry out daily activities?	the number	44	36	72	2	4
		Percentage	27.8%	22.8%	45.6%	1.3%	2.5%
5	How much do you enjoy life?	the number	12	42	48	46	10
		Percentage	7.6%	26.6%	30.4%	29.1%	6.3%
6	To what extent do you feel that your life is meaningful?	the number	16	28	56	24	34
		Percentage	10.1%	17.7%	35.4%	15.2%	21.5%
7	How far are you able to focus?	the number	14	42	50	44	8
		Percentage	8.9%	26.6%	31.6%	27.8%	5.1%
8	How safe do you feel in your daily life?	the number	14	48	36	52	8
		Percentage	8.9%	30.4%	22.8%	32.9%	5.1%
9	To what extent do you consider the environment around you to be healthy?	the number	32	50	44	24	8
		Percentage	20.3%	31.6%	27.8%	15.2%	5.1%

Table (9) shows percentages of the dimension of how much you've been exposed to certain things in the past two weeks, with the majority of the items in the positive direction.

Table (10): Percentages of choices after how well you were able to complete certain things in the past two weeks

How well have you been able to complete certain things in the past two weeks							
number	Paragraph		Never	a little	moderate degree	a lot	v. much
10	Do you have enough energy to carry out daily life?	the number	20	22	52	56	8
		Percentage	12.7%	13.9%	32.9%	35.4%	5.1%
11	Are you able to accept your outward appearance?	the number	16	16	40	74	12
		Percentage	10.1%	10.1%	25.3%	46.8%	7.6%
12	Do you have enough money to meet your needs?	the number	30	60	48	18	2
		Percentage	19.0%	38.0%	30.4%	11.4%	1.3%
13	What is the availability of the information do you need in your daily life?	the number	22	52	64	14	6
		Percentage	13.9%	32.9%	40.5%	8.9%	3.8%
14	To what extent do you have the opportunity to engage in recreational activities?	the number	40	54	50	14	0
		Percentage	25.3%	34.2%	31.6%	8.9%	0%
15	How far are you able to navigate?	the number	30	48	46	32	2
		Percentage	19.0%	30.4%	29.1%	20.3%	1.3%

Table (10) shows the percentages of dimension of your ability to complete certain things in the past two weeks, with the majority of the items in the positive direction.

Table (11): Percentages of choices for the dimension of your satisfaction with different aspects of your life in the past two weeks

How satisfied have you been with different aspects of your life over the past two weeks							
Number	Paragraph		Not satisfied at all	Not satisfied	Neither satisfied nor dissatisfied	satisfied	fully satisfied
16	How satisfied are you with your sleep?	the number	18	24	28	64	24
		Percentage	11.4%	15.2%	17.7%	40.5%	15.2%
17	To what extent are you satisfied with your ability to carry out your daily activities?	the number	28	30	26	62	12
		Percentage	17.7%	19.0%	16.5%	39.2%	7.6%
18	How satisfied are you with your abilities to work?	the number	28	34	24	56	16
		Percentage	17.7%	21.5%	15.2%	35.4%	10.1%
19	How satisfied are you with yourself?	the number	20	26	26	64	22
		Percentage	12.7%	16.5%	16.5%	40.5%	13.9%
20	How satisfied are you with your personal relationships?	the number	18	36	40	36	28
		Percentage	11.4%	22.8%	25.3%	22.8%	17.7%
21	How satisfied are you with your sexual life?	the number	34	28	36	38	22
		Percentage	21.5%	17.7%	22.8%	24.1%	13.9%
22	How satisfied are you with the support or help from friends?	the number	20	24	40	58	16
		Percentage	12.7%	15.2%	25.3%	36.7%	10.1%
23	How satisfied are you with the conditions in your place of residence?	the number	40	26	26	50	16
		Percentage	25.3%	16.5%	16.5%	31.6%	10.1%
24	How satisfied are you with the health services available to you?	the number	42	32	26	46	12
		Percentage	26.6%	20.3%	16.5%	29.1%	7.6%
25	How satisfied are you with the transportation you use?	the number	56	28	14	52	8
		Percentage	35.4%	17.7%	8.9%	32.9%	5.1%

Table (11) shows percentages of the dimension of how satisfied you are with different aspects of your life over the past two weeks, with the majority of the items in the positive direction.

Table (12): Percentages choices for how many times you've felt or experienced certain things in the past two weeks

how many times you've felt or experienced certain things in the past two weeks							
number	Paragraph		Always	Often	Moderately	Rarely	Never
26	How often have you had negative feelings such as bad mood, hopelessness, anxiety, depression?	the number	24	50	52	32	0
		Percentage	15.2 %	31.6 %	32.9 %	20.3 %	0 %

Table (12) shows the percentages of how many times you have felt or been exposed to certain things in the past two weeks, in which the response to the item was in the negative direction.

Result discussion:

The results showed that the response of the sample members on all items of the scale was above average, that is, it is positive, and the researcher attributes this result to the services provided by the Kingdom of Saudi Arabia to people with special needs, in general and during the Corona pandemic in particular. The Kingdom has taken care of people with disabilities to ensure their access to their rights related to their disability. It enhances the services provided to them by providing the necessary prevention, care, and rehabilitation methods. It worked to build a prevention wall through a set of medical, psychological, social, educational, and informational measurements. These methods aimed to prevent, reduce, and detect early stages of disability to minimizing its effects.

The Kingdom ensured the comprehensive care services provided to everyone in need of care by virtue of the health status, degree of disability, and social status. The Kingdom contributed to facilitating medical, social, psychological, educational, and professional services to help people with disabilities achieve the maximum possible degree of functional effectiveness to comply with the normal environment and social life requirements. The aim is to develop particular abilities without depending on others to make them productive members of society.

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