

Analysis of research report results



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The Effects of Barriers on Health Related Quality of Life (HRQL) and Compliance in Adult Asthmatics Who are Followed in an Urban Community Health Care Facility: A Report Analysis

The selected article was condensed from online site, published on the 24th of October, 2008. Its primary goal is to identify the perceived barriers on health related quality of life, to find out the effects of these barriers among adult asthmatic respondents and determine their compliance. The descriptive cross-sectional design was employed in the study and a total of thirty-four (34) adults filled up the following research instruments, namely:

Demographic and health status survey, MiniAQLQ as well as EWash Access to Health Care Survey.

After the data gathering process it was found out that the most prevalent perceived barriers are the " Long waiting time in provider's office," " someone had to miss work," " cost of care too much, " and " long wait for an appointment". Some of the other perceived barriers were correlated with the moderator variables. The study further suggested that, " strategies designed to decrease the perceived barriers might improve compliance with the treatment regime, thus decreasing costs, absenteeism, and lack of continuity".

In determination of the respondents' profiles such as age, ethnic origin and socioeconomic status, the statistical analysis used was accurate. Descriptive statistics usually involve numerous calculations that attempt to provide brief summary of the information content of the information such as measures of central tendency, measures of dispersion, etc. and could be expressed in frequency or percentage.

In the study (page of the paper), it was mentioned that the ten (10)

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identified perceived barriers on health related quality of life have been associated to the frequency of respondents' reported any missed taking any medication and later found out that there was no significant relationship. This seems to be questionable. The ten perceived barriers on health related quality of life, were measured differently (Likert) from " respondents' reported any missed taking any medication" (frequency). Besides relationship here, could not be measured by ANOVA but of Pearson-r Statistics,

All of the measures described above are univariate, in that they describe one variable at a time. However, there is a class of descriptive measures that describes the degree of association, or co-variation, between two or more variables. One very important measure is the correlation coefficient, sometimes called Pearson's r . The correlation coefficient measures the degree of linear association between two variables.