Predictors of General Functioning and Correlates of Quality of Life: A Cross-Sectional Study among Psychiatric Outpatients

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Abstract

Introduction: Functioning and quality of life (QOL) are negatively impacted as a result of mental illness. This study aimed to determine the: i) socio-demographic and clinical correlates of functioning and; ii) associations between functioning and QOL in a multiethnic sample of psychiatric outpatients. Materials and Methods: This was a cross-sectional study of outpatients receiving treatment from a tertiary psychiatric hospital. Functioning was assessed using the Global Assessment of Functioning (GAF) scale, while QOL was measured using the World Health Organization Quality of Life-BREF (WHOQOL-BREF) which comprises 4 domains: physical health, psychological health, social relationships and environment. Results: Various socio-demographic and clinical correlates were associated with functioning including employment and marital status, education and diagnosis. Depression was the only clinical characteristic which negatively correlated with functioning ($P = 0.035$). Amongst the whole sample, multiple linear regressions revealed that functioning was positively associated with all 4 QOL domains (physical health $[P < 0.001]$), psychological health $[P < 0.001]$, social relationships $[P < 0.001]$ and environment $[P < 0.001]$). Further analysis of each diagnostic group revealed that functioning was positively associated with all 4 QOL domains in the anxiety, depression and obsessive compulsive disorder subsamples, while in the schizophrenia subsample, functioning was only significantly associated with the environment domain. Conclusion: Functional impairments were associated with different socio-demographic and clinical characteristics, which should be addressed when planning tailored treatment and interventions. Given that functioning is significantly associated with QOL, it is crucial to regularly assess and monitor them (in addition to symptomatic outcomes and adopting a more holistic and biopsychosocial approach).

Key words: Anxiety, Depression, Obsessive compulsive disorder, Schizophrenia

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