



RESEARCH ARTICLE

THE CONCEPT OF WORKER QUALITY OF LIFE ACCORDING TO A FOCUS GROUP OF EXPERTS

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ABSTRACT

Background: The aim of this study was to examine the content validity of the construct of worker quality of life for the subsequent development of an assessment instrument. The present study used a qualitative approach involving a focus group of experts in worker quality of life who provided data regarding attitudes, opinions, perceptions and behaviors related to worker health and quality of life. The focus group discussion constituted the first step toward the elaboration of a specific questionnaire for the assessment of this construct.

Method: This was a qualitative study, using a focus group design, involving experts in worker health and quality of life. Bardin content analysis was used to identify domains and subdomains of worker quality of life.

Results: The focus group defined worker quality of life in terms of five domains: physical, environmental, psychological, social and occupational. Each of these domains was further divided into several subcategories, all of which were considered by the expert panel to constitute the construct of worker quality of life.

Conclusões: The present study yielded a comprehensive definition of the concept of worker quality of life, which will be used to develop questions for an assessment instrument and may serve as a basis for future studies on the topic.

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INTRODUCTION

The study of worker quality of life has emerged as a sub-area of general quality of life research. According to the World Health Organization (WHO), quality of life goes beyond the absence of disease and also includes physical, mental and social well-being. Quality of life also contemplates individual perceptions of one's position in life in the context of the culture and value systems in which they live, in addition to their goals, expectations, standards and concerns (WHOQOL, 1995). The assessment of quality of life has aroused growing interest in several areas, especially those related to health research (Ciconelli, 2003; Fleck, 2008; Dorn *et al.*, 2010; Flynn *et al.*, 2011).

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Worker quality of life has also become a major topic of research and discussion for administrative directors, managers, workers, researchers and occupational science as a whole (Limongi-França, 2004). The term "worker quality of life" has been widely disseminated in recent years, and refers to practices such as comprehensive quality of life programs with a focus on individual worker characteristics, the improvement of work conditions and the work environment, and satisfaction with the financial aspects of one's job (Lacaz, 2000). Despite growing research on worker quality of life, no studies so far have employed standardized and reliable methods to provide a unified and comprehensive definition of this term (Bell *et al.*, 2011). Such a definition is indispensable for a precise assessment of worker quality of life. The results of such assessments could help trace the profiles of different groups of workers across different companies, so as to guide and evaluate the efficacy of preventive and corrective programs. The data presented in the current study corresponds to the first stage of the development of an assessment instrument for the collection of data regarding worker quality of life.

A focus group discussion of the topic at hand will serve as an exploratory guide for the construction of a pretest version of a worker quality of life scale (Cheng *et al.*, 2007; David *et al.*, 2011; Hirsch *et al.*, 2008; Linda *et al.*, 2009; Morris *et al.*, 2007; Ni Riordain *et al.*, 2011). The present study used a qualitative approach involving a focus group of experts in worker quality of life who provided data regarding attitudes, opinions, perceptions and behaviors related to worker health and quality of life. The results of the focus group discussion constitute the first step toward the elaboration of a specific questionnaire for the assessment of worker quality of life.

METHOD

This was a focus group study with a qualitative design.

This study was approved by the Institutional Review Board and Research Ethics Committee of the Clinical Hospital of Porto Alegre – RS under project number 100575. All participants provided written consent for the study, and were guaranteed anonymity and confidentiality.

Expert focus group

Composition of the focus group and research team

The focus group consisted of a physiatrist, two psychiatrists, two occupational physicians, one physical therapist, two physical educators and one technician in job safety, all of whom had experience in the area of worker health and quality of life. These professionals were selected and allocated to the focus group based on their experience with the topic of study. Focus group participants were recruited by telephone from the Departments of Occupational Medicine, Psychiatry, and Physiatry and Rehabilitation of the Clinical Hospital of Porto Alegre.

Focus group dynamics

The focus group met for two sessions in the meeting room of the Psychiatry Research Center of the Clinical Hospital of Porto Alegre on July 7th and 12th, 2011. Each session had a mean duration of one hour and thirty minutes. The main aim of this stage of the study was to develop items for each domain of the scale, as well as review, modify and define the major domains of worker quality of life elicited by the focus group. After written consent was obtained from all members of the focus group, the coordinator/moderator welcomed participants and provided instructions regarding the framework and goals of the meeting, in addition to a brief description of the project at hand. The behavior and interactions between participants were monitored by an observer who recorded all relevant aspects for future analysis.

The discussion was initially stimulated by a set of reading materials provided to the focus group consisting of questions related to the topic of worker quality of life developed based on a review of the literature regarding assessment instruments such as the World Health Organization Quality of Life Instrument (WHOQOL-100) (Fleck *et al.*, 1999), the Short Form (36) Health Survey (SF36) (Ciconelli *et al.*, 1999), the Fibromyalgia Impact Questionnaire (FIQ) (Marques *et al.*, 2006), the Work Limitations Questionnaire (WLQ) (de Soárez *et al.*, 2007) and the Nordic Musculoskeletal Questionnaire

(NMQ) (Pinheiro *et al.*, 2000). The focus group was invited to actively analyze the material, and discuss the ways in which currently available instruments and operational definitions failed to contemplate the concept of worker quality of life. After each of the issues raised by the coordinator/moderator was fully discussed, the group was asked as to the importance of the topic at hand, and their willingness to continue the discussion. At the end of each meeting, the coordinator/moderator asked the group whether they felt any additional issues regarding worker quality of life should be added to the discussion. Once discussions were complete, all data were transcribed, analyzed, categorized and summarized. This information served as a basis for the identification of domains (concepts) and subdomains of worker quality of life.

FOCUS GROUP RESULTS

Content analysis

The data obtained from each focus group meeting were summarized and submitted to content analysis, which comprises the following stages: pre-analysis, exploration, evaluation and interpretation. The three main aims of the first step of the process are to select documents for analysis, formulate a hypothesis and objective, and define the features on which to base subsequent interpretations. The exploration stage encompasses the analysis itself, and includes procedures such as coding, sequencing, categorizing, and identifying content units, intermediate categories and overarching themes. Evaluation and interpretation are the most delicate parts of the process, and include the compilation and presentation of results, and their comparison to available research material so that conclusions can be drawn and serve as a basis for further analyses or the development of additional theoretical dimensions (Bardin, 2004; Lervoliino *et al.*, 2001; Victora *et al.*, 2000).

RESULTS

Content analysis shed light on several domains and subdomains of worker quality of life identified by the focus group. The following five domains were identified by the experts: *physical, psychological, environment, social and occupational*. The physical domain comprised the following subcategories: worker quality of life, health, sleep, pain, availability of health care, ability to perform job-related tasks, illnesses, sexual relations, physical activity, substance use, and energy level. The psychological domain was associated with job satisfaction, pleasure in work, respect, burnout, emotional and personal problems, physical appearance, body image and interpersonal relations. The topics subsumed in the environmental domain included work environment, hours worked, job-related health risks and orientations VER SE OK, concentration, problems at work, and quality of work. The social domain included subcategories such as activities of daily living, transportation, education, social conditions, diet, leisure/vacations/holidays. Lastly, the occupational domain comprised topics such as financial compensation, occupational activity, professional status and recognition, and work safety.

Content Analysis Categories

The domains identified by the focus group guided the content analysis process, in which several subcategories were identified and defined. The features of each subdomain of worker quality of life are summarized in Table 1.

Table 1. Content analysis categories

<i>I – Physical Domain</i>		
<i>Dimensions</i>	<i>Definitions</i>	<i>Examples from speech</i>
<i>Worker quality of life</i>	This concept was defined as the combination of three main elements: general life satisfaction, adequate compensation and being healthy/not being ill.	(S7): <i>I think this is a very personal concept.</i> (S9): <i>And what is the concept of "worker quality of life"?... If we already had a definition for worker quality of life, there would be no need to research it any further.</i> (S6): <i>I'm thinking of quality of life, he's thinking of satisfaction [...]. If a job is not good in terms of its pay, is that important, or not important? Quality of life in a general sense is to be satisfied with life [...]. Is that it? [...]</i>
<i>Worker health</i>	This concept refers both to the influence of work on employee health and to the impact of worker health on job performance. It taps into physical (e.g. sleep, physical fatigue, pain), emotional, psychological (e.g. anxiety), or environmental factors which can affect one's social life beyond the workplace.	(S7): <i>[...] When health is influenced, or work influences the quality of health, [...]. The extent to which we believe our work is making us sick, disturbing our sleep, increasing our anxiety, causing more physical fatigue, more pain.</i> (S7): <i>[...] if we could see [...] that the person understood what it is about their work that may be interfering with their quality of life.[...]</i> (S3): <i>worker health is not restricted to work, it applies to work and other areas as well [...]</i>
<i>Physical health</i>	This construct taps into the physical aspects of the manner and attitude with which job-related tasks are performed. Physical health involves the ability to perform work activities (strength and motivation), as well as one's posture and movements during work.	(S3): <i>[...] we know of several movements which are involved in performing different activities.[...]</i> (S8): <i>when we think of the physical domain, the activities we refer to are sitting down, standing up, squatting, lifting and lowering, moving [...] we already know what the movements are, and we can use questions to quantify them.</i>
<i>Sleep</i>	Sleep was defined to include both the period of nocturnal rest as well as diurnal naps. This subdomain assesses both the influence of work on sleep (e.g. sleeplessness, insufficient sleep), as well as the impact of poor quality sleep on work.	(S1): <i>It goes both ways[...] Sleep influences work, but work can also influence sleep.</i>
<i>Pain</i>	In this context, pain was defined by the focus group as a subjective symptom reported by the subject during their work day. This subdomain investigates its intensity and duration, as well as the activities which cause the most pain, its causes, onset, and any differences between the painful feelings identified at home and in the workplace. Additionally, participants in the focus group noted that, in some cases, non-work related pain may also interfere with job performance.	(S3): <i>Do you mean to say there are differences between the way in which pain is experienced in different situations?</i> (S6): <i>Of course, the pain is not always the same.</i> (S7): <i>[...] sometimes pain has a greater impact on job performance toward the end of the shift, or at the end of the day, [...]</i> (S7): <i>[...] do you feel pain during most job-related activities, or only in some of them?</i>
<i>Health care</i>	The expert panel defined health care as the methods used by the worker to improve health (e.g. medical appointments, pharmacological treatment, physical therapy, pilates, massages) as well as their duration and the time spent obtaining these treatments.	(S1): <i>"Any medical treatment", [...].</i> (S7): <i>[...] sometimes, people with pain problems may seek treatments like massages, chiropraxy, pilates[...].</i> (S8): <i>[...] their access to health care,</i> (S7): <i>[...] should we limit this question to a specific period of time, say, the past twelve or six months? [...]</i>
<i>Ability to perform job-related tasks</i>	This concept was defined as the extent to which the worker is available to help other colleagues, and whether he is satisfied with his availability.	(S3): <i>[...], how satisfied the worker is with their ability to perform their job, and the extent to which his satisfaction interferes with daily activities.</i> (S4): <i>It's more like his capability to perform on the job, not his actual performance.</i> (S2): <i>[...] I don't know, perhaps it depends. If he is a loader, or a stevedore, for instance, he may be in trouble if he is unable to lift something, whereas if he is an intellectual, a writer, this would have little effect on his work.</i> (S9): <i>In addition to carrying out their own work, they may be willing or able to help somebody else.</i>
<i>Being sick</i>	The absence of illness was considered synonymous with quality of life.	(S8): <i>So [...], in this case, we investigate quality of life by verifying whether the worker is sick or not?</i>
<i>Sexual relations</i>	This domain was defined as the extent to which work activities or job-related tasks interfere with the individual's sex life.	(S4): <i>Does your work interfere with your sex life? [...]. Is that okay?</i> (S8): <i>I think it's okay.</i>
<i>Physical activity</i>	This subdomain assessed the practice of regular physical activity (e.g. walking, exercising, frequenting a gym) and its benefits to quality of life.	(S4): <i>[...] does he exercise, perform physical activities?...</i> (S7): <i>Regular exercise, then?</i> (S5): <i>Yes, since physical activity has known beneficial effects on quality of life [...]</i>

Continuine

<i>Substance use</i>	This concept was defined as the impact of legal (e.g. alcohol and tobacco) and illegal (e.g. cannabis, cocaine and crack) substances on worker health and quality of life.	(S7): [...] Smoking? Drinking? (S7): This may give us an idea of the subject's efforts to improve their quality of life [...].
<i>Energy</i>	"Energy" was defined as the worker's ability to perform job-related activities. This construct also evaluated whether, at the end of his shift, the worker still had the energy to perform daily activities outside of work.	(S6): [...] To what extent does your work interfere with your energy for daily activities? [...] (S1): [...] for instance, I may have energy to work, but be too exhausted to do anything else. My life may be over, but I need to continue working.
II – Environmental domain		
<i>Work environment</i>	This was defined as the physical location (environment) in which the subject works (some people may work from home, others may work on site, and still others may be freelance workers), and the extent to which this location is pleasant, even when good working conditions are absent. This concept also taps into behavioral differences between workspaces and interpersonal relationships at work.	(S8): [...] we must know, for instance, whether he can see outside or works in an enclosed space, whether he is exposed to natural sunlight or only artificial light. (S3): That's what I think! We're referring both to on site work and home-based work. [...] (S3): But the behaviors observed at work and at home aren't the same, right? There is a difference... (S8): And sometimes the environment can be pleasant even if working conditions are not good, (S2): but here we're not referring to an illness or to the worker's age. We're talking about specificities of the workplace that do not apply outside of it [...]. (S7): there's the organization, the work schedules and their construction, how the work is controlled, and also interpersonal relationships. I think the work environment includes all of these factors[...]
<i>Hours worked</i>	This concept was defined as the number of hours taken up by work, either at home or on site, for those performing one or multiple jobs. Some workers have additional occupations in addition to their paid work (e.g. employed women are often responsible for household chores), and may be satisfied - or not - with this situation.	(S7): Some people prefer not to work at home so they can work on site. (S8): Is your workload above or below your energy level, like it says here? (S2): [...] the person has to be satisfied with their workload regardless. The objective number of hours worked is not the most important factor; what matters is, as you said, whether the worker is satisfied with it.
<i>Job-related health risks and orientations</i>	This was defined as the information provided to workers regarding the risk factors to which they may be exposed. The occupational risk factors mentioned in the group discussion included physical (noise, vibration, radiation, cold, heat, abnormal pressure, humidity), chemical (dust, smoke, fog, gas, vapors, substances, chemical compounds or products), biological (virus, bacteria, protozoans, fungi, parasites or bacilli), climate-related (cold, heat, humidity), pollution-related (dust, smoke, gases), and noise-related risks (noise, sounds). This facet also evaluated the attractive features (e.g. beach, people) of the work.	(S7): which occupational risks, [...] maybe you have serious chemical risk factors, maybe climate-related, pollution, noise, distractors, [...] there are also physical, chemical and biological risks, (S3):[...] how readily available are orientations regarding the occupational risks of your job?
<i>Concentration</i>	This subdomain evaluated the worker's ability to focus in the workplace, as well as the VER SE NÃO É APESAR presence of appealing workplace features (e.g. landscape, people and noise).	(S4): To what extent can you focus in your work environment? (S7): [...] also, the extent to which the worker is able to concentrate, or remain focused, despite surrounding distractors, or noise.
<i>Problems at work</i>	This facet included all work-related problems which may have an emotional impact on the worker (e.g. increasing depression symptoms), interfering with his performance and work schedule.	(S1): Does your job make you depressed? (S7): [...] not depressed, but does it affect you emotionally. (S9): [...] it's the effect of work on emotional problems, not the presence of emotional problems at work.
<i>Quality of work</i>	This was defined as the extent to which the job interferes with quality of life, increasing anxiety and depression.	(S6): [...] is work interfering with your quality of life [...], (S5): Your job may have repercussions which make you more anxious or depressed.
III – Psychological domain		
<i>Satisfaction/Pleasure</i>	This was defined as the feelings of the worker toward his job (pleasure, recognition and professional satisfaction), and his satisfaction with his income.	(S8): How do you evaluate your quality of life with regards to your job?[...] – pleasurable, recognized [...], for instance - how do I feel about working [...] In terms of job satisfaction. [...] if you're satisfied with your salary.
<i>Respect</i>	This was defined as the feeling of being respected for their activities at their workplace. It also refers to the feeling of being respected even when one is sick or is not in condition to perform his duties.	(S2): [...] people at work might, for instance, acknowledge the fact that I am sick, and avoid asking for things which I can only perform when I am healthy. [...] Respecting my health status, [...] as opposed to not caring if I am sick or not...

Countinue

<i>Draining</i>	This term refers to the extent to which the job causes the worker to become too emotionally drained (e.g. tired, depressed and unmotivated) to perform other activities.	(S7): [...] Drained, tired. (S1): [...] how much does the work drain you? [...] With regards to worker disposition.
<i>Emotional problems</i>	This subdomain assesses personal problems which may interfere with work. (e.g. an employee may struggle with the length of the work day, or have trouble beginning his shift early in the day). Work may also be the cause of the emotional problem.	(S5): [...] have you had any emotional problems which influenced your work, reduced your productivity, caused you to perform fewer activities than usual... we should say right away that we are referring to emotional problem, [...] (S6): or, was your emotional problem caused by your work? (S1): It's a two-way street. Emotional problems may interfere with work, but work may also be the cause of the problem [...]
<i>Personal problems</i>	This term refers to personal problems which affect job performance (e.g. failure to complete tasks), and the effects of such a phenomenon on worker quality of life.	(S6): Ok, so if a personal problem affects you at work, what ends up being compromised? The quality of your work, not your quality of life. (S5): And if you have depressed, well, you already have that condition, the job didn't make you depressed.
<i>Physical appearance and body image</i>	Physical appearance/body image were defined as the importance of one's appearance to one's job, and whether it gives you positive or negative feelings regarding the tasks performed.	(S3): We want to know whether [...] negative feelings about one's physical appearance [...] make workers feel less valued? (S3): what we want to investigate with this question is the extent to which the worker himself is affected by their physical appearance, not the impact of their appearance on others.
<i>Interpersonal relationships</i>	This facet refers to one's satisfaction with interpersonal relations at work (e.g. colleagues, superiors and subordinates).	(S7): With your relationships at work? Your bosses? Colleagues? I don't think ""subordinates" applies, since the workers may themselves be subordinates. (S7): How are the interpersonal relationships, (S5): For instance, in the case of a difficult work relationship: say there are two people who are always fighting, but have to spend 6h a day in the same place. Everyone ends up being affected by that. So, sometimes, the work itself is not bad, but relational problems due to personal differences may create a bad atmosphere.
<i>IV – Social Domain</i>		
<i>Daily living activities</i>	This was defined as the extent to which work (e.g. delays, overtime, days off and fatigue) interferes with leisure and daily activities.	(S8): Now, if I had a terrible day at work, that would influence all my other activities. (S5): Yes! [...] I may not be happy with the impact of work on my day-to-day activities, [...] and the way in which it interferes with things I do outside of work. That's something I may not be satisfied with.
<i>Transportation</i>	This subdomain refers to the availability of reliable and safe transportation (e.g. taxi, cars, train, subway, bus) between home and work.	(S8): [...] if he has access to reliable transportation to and from work (S3): Maybe it should be a more general question, since workers may take public transport, company vehicles, their own car, bicycle, or even live so close to work that they may not need any additional transportation.
<i>Leisure/vacations and holidays</i>	This construct referred to the time spent traveling, shopping, attending parties, taking courses or attending conferences. These activities may be positively or negatively influenced by work, or may themselves have an impact on the work environment.	(S8): Do you have time for leisure activities? (S7): [...] I think this has to do with satisfaction or pleasure. Life satisfaction. (S7): It can be both negative and positive. (S7): Some people feel terrible when they are away from work, even if due to illness, and others don't actually like taking vacations. (S4): You might go somewhere to take a course, and when you come back, the work dynamics have changed completely and you've lost your place at work.

Continuine

<i>Education</i>	The focus group defined this subdomain as the extent to which workers are encouraged (e.g. through financial rewards, time off, adjusted work schedules) to improve their education and qualifications. This construct also includes incentives for professional growth.	(S8): [...] access to education (S3): [...] does the company gives him the opportunity to study, pursue further qualifications [...] (S5): [...] if he is free to take courses outside of work, or if the company encourages that.
<i>Social conditions</i>	This term referred to the way in which workers' living conditions (e.g. access to sewage treatment, safety of the neighborhood environment, home ownership, access to government support, opportunities for leisure with his family) and social relationships (e.g. if he is married, has children) influence their quality of life.	(S8): [...] it means knowing whether he has access to a sewage system, if his neighborhood is safe, if he has leisure time to spend with his family... (S8): If he is a homeowner? [...] if he has adequate living conditions, [...] or access to government support...
<i>Diet</i>	This subdomain evaluated the influence of diet on worker health and quality of life.	(S3): [...] diet can influence both health and quality of life, and needs to be evaluated.
<i>V – Occupational domain</i>		
<i>Income</i>	This subdomain evaluated the worker's financial compensation and professional growth. The focus group emphasized the importance of verifying whether the worker's salary is sufficient to meet their financial needs, or if he has had to seek additional sources of income.	(S4): Does your work allow for professional growth? (S7): [...] We mean their formal work, which provides their financial support. (S4): Do you earn enough money to meet your needs? (S3): This is an important question. Each person will respond according to their own private circumstances.
<i>Worker/occupational activity</i>	A worker was defined as anyone who provides a service, with or without pay. Unemployed persons may also continue working to meet their financial needs, and can still be considered workers.	(S2): [...] a worker is a person. Not an abstract entity, but is someone like us. People are either employed or unemployed, but even those who are unemployed may continue to perform informal work, either at home or somewhere else, so we can assume everyone to be a worker until we have proof of the contrary.
<i>Professional growth and recognition</i>	This was defined as the financial and emotional compensation received by the worker for their occupational activity. The focus group also noted the importance of work for individual identity and recognition.	(S7): So the person's identity is defined by their job? (S5): [...], how much recognition do you gain for your work? are you happy with the recognition you experience? are you happy with the returns you receive from your work? (S5): [...] If I'm performing a certain job, and people recognize my work, [...] and my skills are important for the job market [...], all of these factors are important for worker quality of life.
<i>Stability</i>	This construct evaluated job security and comfort.	(S7): Well[...], we become very uneasy in the absence of job stability. (S6): [...] When we talk about stability, we're usually referring to job security.

Considerations

The present study yielded a comprehensive definition of the concept of worker quality of life, which will be used to develop questions for an assessment instrument and may serve as a basis for future studies on the topic. All domains and subdomains were defined based on representative and relevant issues and concerns, and will serve as a valid guide for the construction of an assessment instrument for worker quality of life. The focus group design was successful in capturing the concerns and opinions of experts with different backgrounds. Our findings allowed for the testing of our hypotheses and were able to illustrate and expand on the concepts and themes identified in the literature review which served as a basis for group discussions. However, unlike other studies on the topic, the present investigation also emphasized the importance of comprehensive and integrated assessments of work quality of life, and of extending the assessment beyond the job environment itself.

Author Contributions

Marcio conducted, recorded and transcribed the discussion sessions. João and Neusa performed qualitative data analysis. Antonio Cardoso and Marco Stefani were involved the design and execution of the study and contributed to manuscript drafting. Carlos. revised the entire manuscript. All authors read and approved the final version of the paper.

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