From the Department of Neurobiology, Care Sciences and Society

A COMPARISON OF SELF-RATED HEALTH AMONG IRANIANS IN TEHRAN, IRANIAN IMMIGRANTS AND SWEDES IN STOCKHOLM
A cross-sectional study on self-rated health, mental health and sleep quality among three urban populations, aged 60–75 years

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ABSTRACT

Background: Self-rated health (SRH) is one of the most widely used single measures of perceived current health status. It is used across disciplines to explore and explain people's perceived health. SRH reflects an interaction between five broad health dimensions: physical and functional health, psychological resources and health, attitudes and expectations regarding health and aging, social support, and demographics. This thesis explores the SRH of three growing populations aged 60 to 75 years old: Iranians in Tehran and Iranian immigrants and Swedes in Stockholm. The health of this particular population is currently on the agenda for policy and decision makers, who aim to proving care that is appropriate and fits the needs of the elderly. A goal of this thesis is to also add to the body of knowledge regarding this age group, such that healthcare personal and policy makers stand on firmer ground when making decisions.

Aim: To describe the process of developing and testing the validity and reliability of the study specific questionnaire "Self-reported health and health-care needs among elderly" *(Sub-study I)*. To establish factors that influence SRH in the above mentioned groups in order to better understand health outcomes *(Sub-study II)*. To investigate and compare self-reported factors of mental health and depressive symptoms *(Sub-study III)*. To investigate variables that could explain sleep quality *(Sub-study IV)*.

Method: A quantitative approach was adopted, using a study specific questionnaire created for the intention of exploring aspects of SRH in the above mentioned populations. The first version of the questionnaire was constructed in Farsi, and then translated by bilingual researchers from Farsi into Swedish. An independent professional translator back-translated the questionnaire to Farsi in order to compare the congruency between the Swedish and Farsi versions. The data collection started at the same time in both countries, and finalized during 2005. The total number of respondents in the entire sample was 1088; 515 (49 %) men and 542 (51 %) women ranging from 60 to 75 years (mean age = 67). The three groups did not differ significantly with regard to age or gender.

Results: In *sub-study I*, the development phases of the questionnaire is described which confirmed the validity and reliability of the final version of the questionnaire. In *sub-study II* the results demonstrated that women generally reported lower SRH than men. Both Iranian groups reported having lower SRH compared to the Swedish group. The two Iranian groups had three common factors influencing SRH; education, satisfaction with ones social life and sleep quality. Other factors important to SRH among Iranians in Iran included nocturia (night time urination), weight loss, feeling weak, and income satisfaction. The Swedes was the only group where depression and satisfaction with leisure activities were found to be important. In *sub-study III*, with regards to gender aspects the Iranians in Iran revealed differences in almost every item concerning mental health whereas the Swedes and Iranian immigrants exhibited differences in only three of the ten items. Women reported more depressive symptoms in almost all cases. SRH, smoking, satisfaction of social life and sense of connection to ones cultural roots and traditions were statistically significant factors related to mental health. Demographic variables that were found to be significant were group belonging (Swedes vs. Iranians), sex and satisfaction with income. In *sub-study IV*, aspects of self-reported sleep quality were explored showing that both Iranian samples reported sleep problems to a greater extent than the Swedish sample. Sex was found to be a significant factor only in the Swedish group. Nocturia was found to be important among all three groups. Other factors important for sleep quality in the Swedish group was SRH, how one views the future and being happy and in a good mood. Education, marital status, depression and appetite were only found to be significant in the Iranians in Iran.

Conclusion: In general women report lower scores than men with regard to SRH and thereto related dimensions , e.g., sleep quality and mental health. The different sub-studies also concludes that more attention should be given to the impact of SRH and related aspects such as sleep quality, sociodemographic and socioeconomic factors calling for more attention by healthcare workers in both countries so that good quality. The findings also indicate that the Iranian populations living in both Tehran and Stockholm report poorer SRH, mental health and sleep quality to an extent that raises concern. Although researchers have repeatedly acknowledged the importance of SRH, being the strongest predictor of future morbidity and mortality, this recognition and awareness has yet not gained the full attention it deserves from policy makers and healthcare workers in both countries.

Keyword: *Self-rated health, Elderly, Cross-sectional, Questionnaire development, Cross-cultural comparison, Mental Health, Depression, Sleep quality, Nursing.*