

**Fair or Poor Health:**

*Respondents who reported their health in general as “fair” or “poor”.*

**Any Activity Limitation:**

*Respondents who reported that they had any limitation in any activities due to any impairment or health problem.*

**Pain Limited Usual**

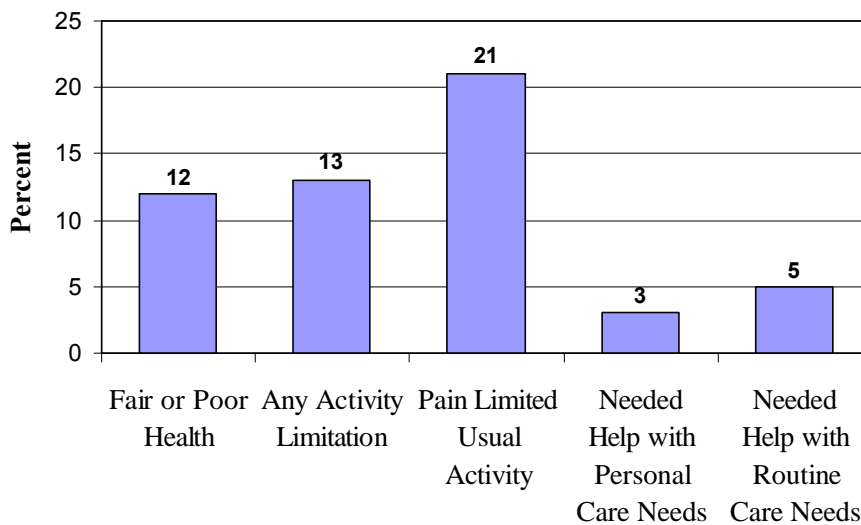
**Activity:** *Respondents who reported one or more days in the past 30 where they had pain that limited their activity.*

**Needed Help With Personal**

**Care Needs:** *Respondents who reported that they need the help of other persons in handling personal care needs, such as eating, bathing, dressing, or getting around the house.*

**Needed Help With Routine Care Needs:** *Respondents who reported that they need the help of other persons in handling routine needs, such as everyday household chores, shopping, and doing necessary business.*

**Health Status & Disability Risk Factors**



**HEALTH STATUS AND DISABILITY**

**Background**

*Activity limitation refers to a person’s inability to perform activities such as, but not limited to, work, school, recreation, or various activities of daily living such as eating, dressing, cleaning, or shopping.*

More than 54 million Americans experience some limitation in their activities as a result of an acute or chronic health problem. Activity limitation refers to a person’s inability to perform activities such as, but not limited to, work, school, recreation, or various activities of daily living such as eating, dressing, cleaning, or shopping. The prevalence of activity limitations or disability will likely increase by about 50% by the year 2010 due to improved survival of persons with chronic health problems and increased numbers of persons over age 65.<sup>1</sup> Because disabilities are long-term impairments caused by injuries, congenital anomalies, and chronic diseases, preventing injuries, congenital anomalies and chronic diseases should be the first priority of community health improvement efforts. Preventing the complications of chronic impairments and improving the functional capabilities and quality of life of persons with disabilities offers substantial health benefits to community members.

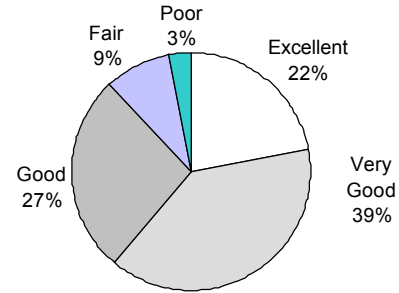
The five risk factors chosen as indicators of health status or disability are (1) self-reported “fair” or “poor” health status, (2) any activity limitation, (3) pain limited usual activity one or more of the past 30 days, (4) needed help with personal care, and (5) needed help with routine care. Persons with severe routine and personal care limitations are at greater risk of being institutionalized, especially when there is an absence of a spouse or other family member to help with health and maintenance needs.

## Fair or Poor Health Status

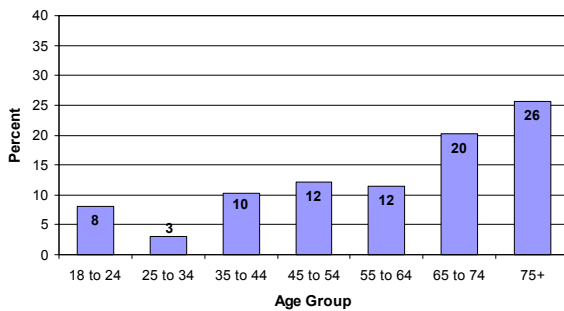
Twelve percent of respondents reported their health in general as “fair” or “poor”, the same as the statewide statistic of 12% (2000). Sixty-one percent reported their health in general as “very good” or “excellent”.

The percentage of respondents reporting their general health as “fair” or “poor” tended to increase with age, with persons aged 75 and older having the highest risk. Looking at employment status, self-employed respondents had the lowest observed percentage of “fair” or “poor” health. Retired respondents had the highest risk percentage, probably due to the age of these respondents.

**Self-Perceived General Health Status**



**Fair or Poor Health by Age**

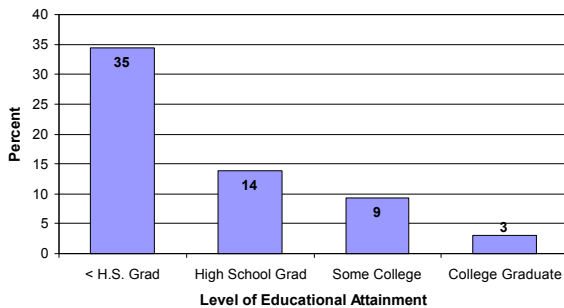


**Fair or Poor Health by Employment**

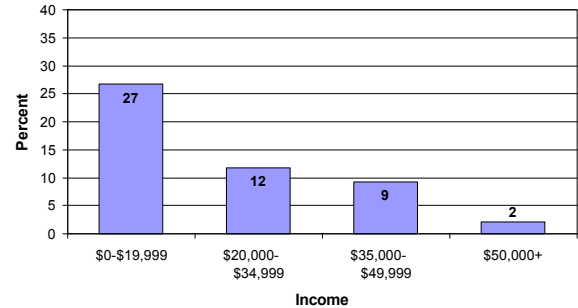


Risk for fair or poor health decreased with increasing levels of educational attainment and household income.

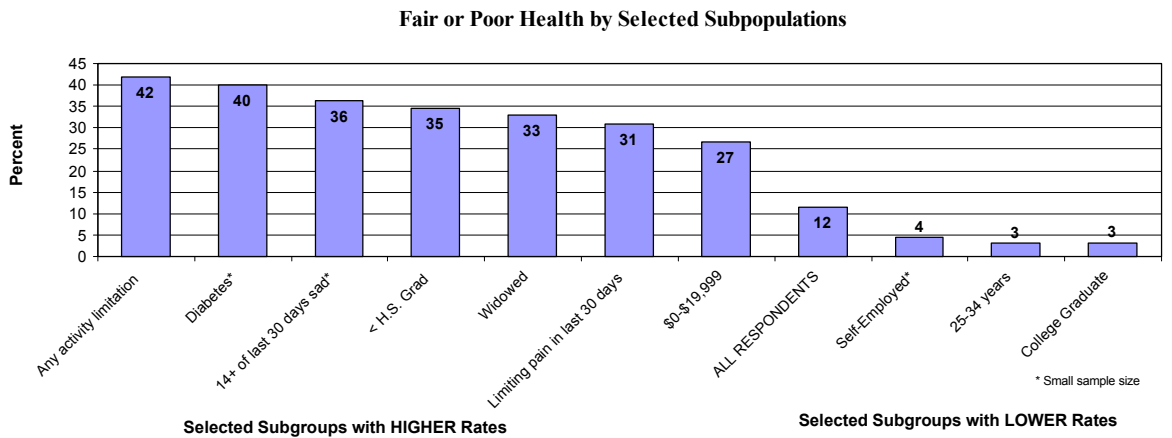
**Fair or Poor Health by Education**



**Fair or Poor Health by Income**



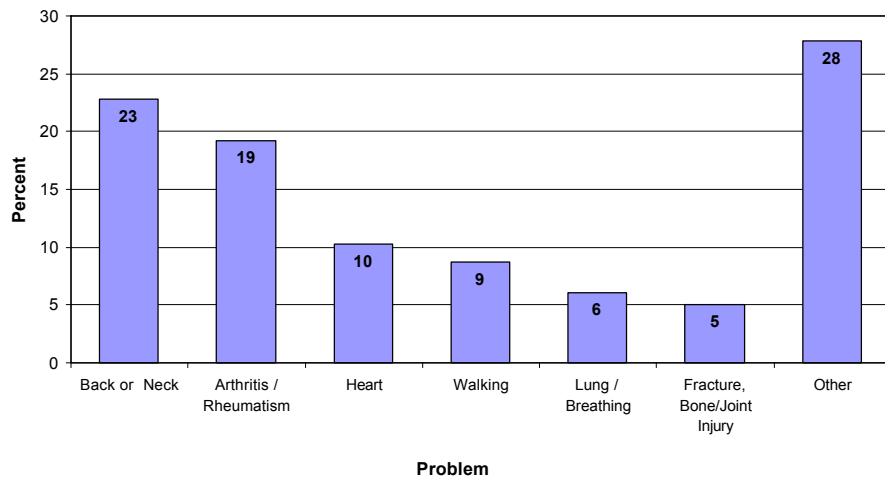
Higher-than-average proportions of fair or poor health were also observed among persons who reported an activity limitation, diabetes, and having been sad/blue/depressed 14 or more of the past 30 days.



## Any Activity Limitation

Thirteen percent of Saline County respondents reported a limitation due to an impairment or health problem. This is similar to the 12% observed statewide in 1999. Eighty-eight percent of those with limitations have had them for at least one year. The top three problems (52% of respondents with impairments) were conditions of the back or neck, arthritis/rheumatism, and heart conditions.

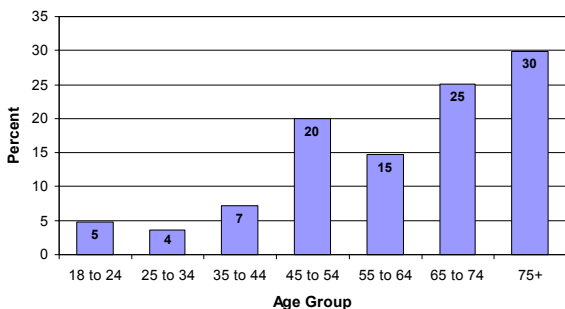
### What is the major impairment or health problem that limits your activities?



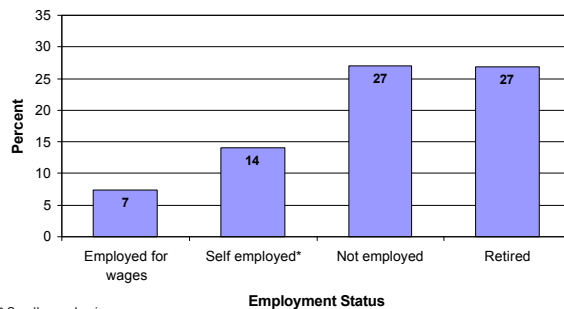
## Who?

The risk for an activity limitation generally increased with age. Comparing employment categories, respondents not currently employed were more likely to have an activity limitation than the those employed for wages.

**Any Activity Limitation by Age**



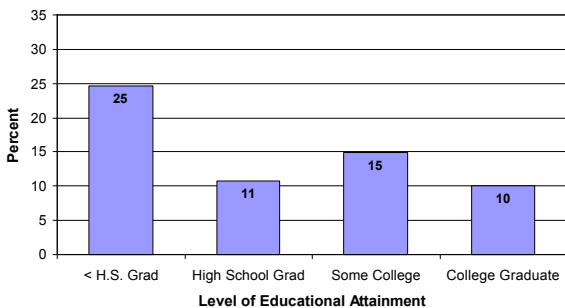
**Any Activity Limitation by Employment**



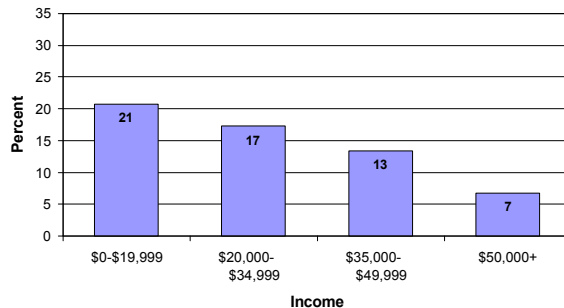
\* Small sample size

Risk for activity limitation generally decreased with increasing educational attainment and household income.

**Any Activity Limitation by Education**

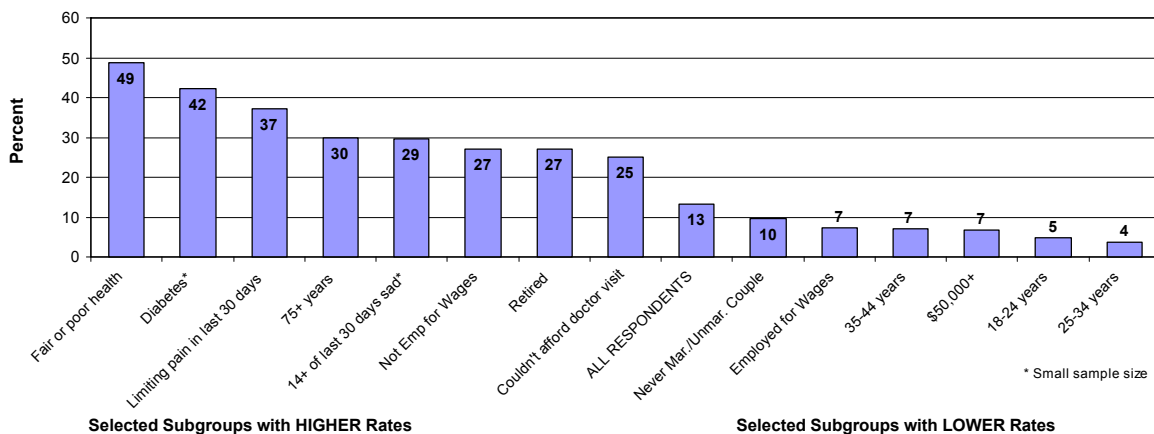


**Any Activity Limitation by Income**



Nearly half (49%) of respondents with self-reported “fair” or “poor” general health and forty-two percent of those with diabetes reported an activity limitation. Also at a higher risk were those reporting one or more days of limiting pain in the last 30 and having been sad/blue/depressed 14 or more of the past 30 days.

**Any Activity Limitation by Selected Subpopulations**



\* Small sample size

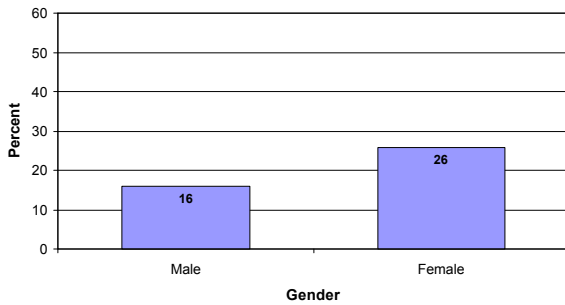
**Selected Subgroups with HIGHER Rates**

**Selected Subgroups with LOWER Rates**

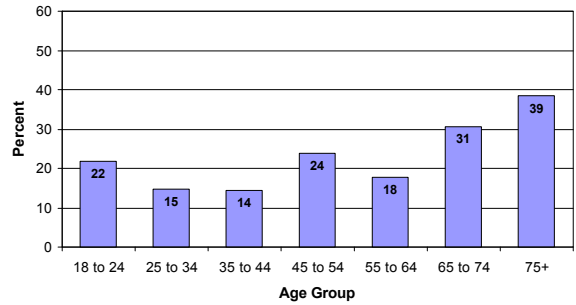
## Pain Limited Usual Activity

Twenty-one percent of respondents reported having one or more days in the past month where pain limited their usual activities, such as self-care, work, or recreation, which is exactly the same as the percentage reported statewide in 1999. Females were at a higher risk than males (26% to 16%) and risk for limiting pain was highest among respondents aged 65 and older.

**Pain Limited Usual Activity by Gender**

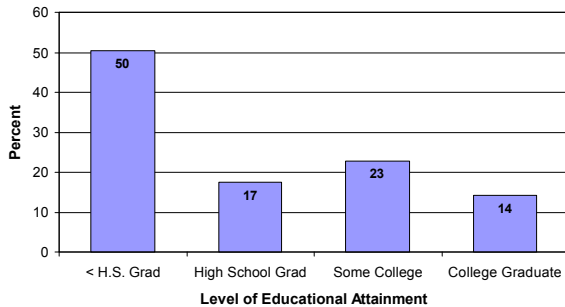


**Pain Limited Usual Activity by Age**

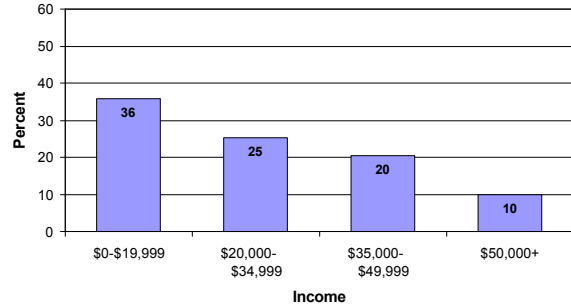


Risk for limiting pain tended to decrease with increasing income and levels of educational attainment.

**Pain Limited Usual Activity by Education**

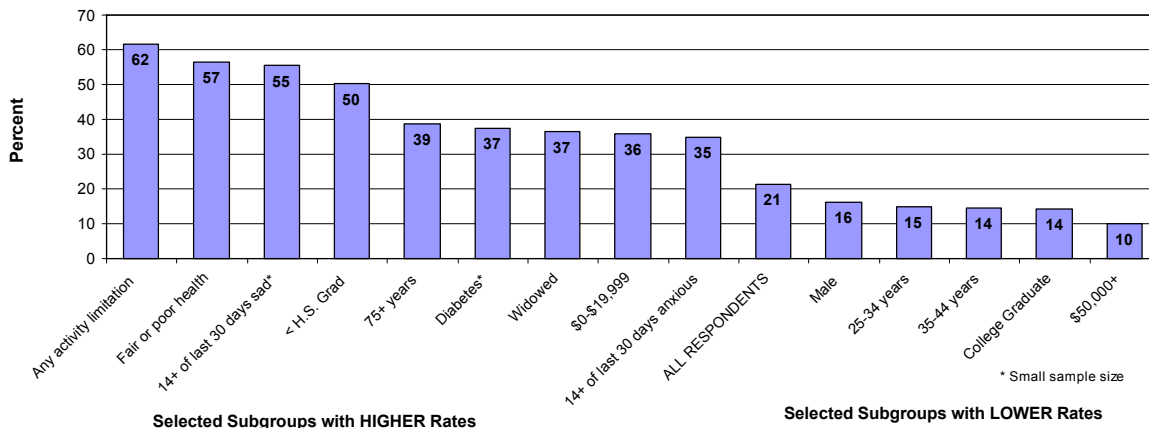


**Pain Limited Usual Activity by Income**



Risk for limiting pain was over two-and-a-half times that for the general population for those reporting an activity limitation (62%), fair or poor health (57%), and having been sad/blue/depressed for 14 or more of the past 30 days (55%). Other risk factors which appeared to be associated with higher-than-average risk for limiting pain include diabetes and having been worried/tense/anxious for 14 or more of the past 30 days.

**Pain Limited Usual Activity by Selected Subpopulations**



**Personal and Routine Care Limitations**

Three percent of respondents reported that they needed help with personal care needs (such as eating, bathing, dressing, or getting around the house) due to an impairment or health problem. Five percent of respondents reported that they needed help with routine needs (such as everyday household chores, doing necessary business, shopping or getting around for other purposes) due to an impairment or health problem. However, sample sizes for both of these risk factors were too small to support estimates by demographic stratifications.

**Reference**

<sup>1</sup>Centers for Disease Control and Prevention. (1999). Disability and Health Branch [On-line]. Available: <http://www.cdc.gov/nceh/programs/cddh/dh/scabout.htm>