

Disability may be on the rise again after 20-year decline

December 21 2009, By Sarah Yang

(PhysOrg.com) -- Disability rates among non-institutionalized older Americans increased between 2000 and 2005, a trend that could seriously impact the quality of life of seniors in the coming decades if it continues, according to a study led by researchers at the University of Toronto and the University of California, Berkeley.

The findings are troubling, said the authors, because they suggest that the steady decline since the 1980s of disability rates among older adults may have ended. Adding to the concern is the expected doubling between 2000 and 2030 of the number of Americans over 65 as the Baby Boom generation continues to age.

"The combination of increasing disability rates plus a growing population of older adults emphasizes the importance of prevention of the many [chronic conditions](#) giving rise to disability in the first place," said the study's lead author, Esme Fuller-Thomson, professor of social work at the University of Toronto. "There is evidence, for example, that the doubling of [obesity rates](#) over the last three decades may be linked to rising disability in older people, yet the obesity problem is largely preventable."

The study, appearing in the December issue of the *Journals of Gerontology*, reflects a 9 percent increase over five years in non-institutionalized adults 65 and over reporting difficulty in basic activities of daily living. Those functions include dressing, bathing and in-home mobility due to a physical, mental or emotional condition lasting six

months or more.

"People are living longer, but many are also living sicker," said study co-author Amani Nuru-Jeter, assistant professor of community health and human development at UC Berkeley's School of Public Health. "This study is providing an early warning sign that the decline in disability rates we've been hearing about might be ending."

The authors pointed to the potential to stem the increase in disability rates if health care reform passes.

"About two-thirds of Medicaid spending and over a third of Medicare spending are associated with disability, so any increase in costs due to increased disability is a federal liability," added Nuru-Jeter. "If we do nothing, those costs will grow as more middle-aged adults develop diseases that lead to disability because they lack preventive services or are uninsured. If we cover all children and adults, we are likely to slow or even reverse this trend."

Most of the people in this study were 65 and over and hence already covered by Medicare or Medicaid.

"The prevention of disability could get a big boost if health care reform passes and retains its strong emphasis on health promotion and disease prevention," said Meredith Minkler, professor of health and social behavior at UC Berkeley's School of Public Health and another co-author of the study.

The U.S. Senate is expected to vote on health care legislation this week. If it passes, it will need to be reconciled with the health reform bill passed last month by the U.S. House of Representatives before being sent to President Barack Obama for his signature.

"The Senate [health care reform](#) bill, as it now stands, provides coverage for a range of evidence-based prevention services, with no cost sharing by individuals," said Minkler. "Since disability rates are highest in the poor, providing prevention and screening services without copayments and deductibles could encourage more of those most vulnerable to disability-related problems to seek the help they need, reducing costs down the line."

The study was based upon 2000-2005 data from the American Community Survey, which was conducted by the U.S. Census Bureau. The number of households responding to the annual survey ranged from half a million to nearly two million.

The researchers said the rise in disability among those living in the community could be partially attributed to the decrease in elderly adults living in nursing homes. The American Community Survey did not include those living in group homes.

"People are less likely to go to a nursing home compared to 20 years ago," said Fuller-Thomson. "Today, there are more options, such that only those with the most serious physical health problems, and lack of alternatives, go to long-term care facilities."

"Other studies need to be conducted to confirm our findings of an increase, but what does seem evident is that the 20-year decline in disability rates may be ending," said Fuller-Thomson.

Provided by University of California - Berkeley

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