

Middle-aged Americans reporting more mobility related disabilities, study finds

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The proportion of older middle-aged Americans who report disabilities related to mobility increased significantly from 1997 to 2007, in contrast to the disability decline that has been found among Americans ages 65 and over, according to a new study by the RAND Corporation and the University of Michigan.

Researchers found a rise in the proportion of Americans aged 50 to 64 who reported mobility-related difficulties or the need for help in daily personal care activities such as getting out of bed, according to findings published in the April edition of the journal *Health Affairs*.

The reason for the increase is not clear, although many of those reporting disabilities say they are due to <u>health problems</u> that began in their 30s and 40s.

"Although the overall rate of needing help with personal care among this group remains very low -- less than 2 percent -- this rise in disability is reason for concern," said Linda Martin, the study's lead author and a senior fellow at RAND, a nonprofit research organization. "It does not bode well for future trends for the 65 and older population, plus there are substantial personal and societal costs of caring for people of any age who need help."

Researchers examined disability trends among people aged 50 to 64 by analyzing information from the 1997 to 2007 National Health Interview Survey, a nationally representative effort that asks thousands of



community-dwelling Americans each year about a broad range of issues regarding their <u>health status</u>.

More than 40 percent of people aged 50 to 64 reported that because of a health problem they had difficulty with at least one of nine physical functions and many reported problems with more than one. Over the study period, researchers noted a significant increase in the number of people reporting that a health problem made it difficult for them to stoop, stand for two hours, walk a quarter mile or climb 10 steps without resting.

There also was a significant increase in the proportion of people who reported needing help with <u>personal care</u> activities of daily living such as getting in or out of bed or getting around inside their homes.

"This a disappointing trend with potentially far-reaching and long-term negative consequences," said Richard Suzman, director of the Division of Behavioral and Social Research at the National Institute on Aging, which funded the study. "If people have such difficulties in middle age, how can we expect that this age group -- today's baby boomers -- will be able to take care of itself with advancing age? If it continues, this trend could have a significant effect on the need for long-term care in the future."

From 1997 to 2007, increasing proportions of people aged 50 to 64 attributed their need for help to back or neck problems, diabetes, and depression, anxiety or emotional problems. By 2005-07, the most common causes for needing help were these ailments plus arthritis or rheumatism. People who reported these conditions as causes were most likely to report that the ailments started at ages 30 to 49 years.

The reported increases in conditions causing disability may reflect real deterioration of health or improved awareness of conditions as a result



of diagnosis and treatment. It also could be that improved medical care has extended the lives of people whose disabilities began early in life and who might have not survived to age 50 in earlier decades.

Despite continuing concerns about obesity in the United States, those needing help did not cite obesity as an important cause of their limitations.

"We have this uptick of people in their 50s and early 60s who say they need help with their daily activities of living and we're not sure why," said study co-author Vicki A. Freedman, a research professor at the Institute for Social Research at the University of Michigan. "But the patterns suggest the need for prevention and early intervention before the age of Medicare eligibility."

Provided by RAND Corporation

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