

This Update highlights a recent analysis of the prevalence of disability among adults. It was conducted using 2001 data from the Behavioral Risk Factors Surveillance System (BRFSS) survey. The BRFSS is an ongoing effort by the Utah Department of Health in conjunction with the U.S. Centers for Disease Control and Prevention (CDC) to assess the prevalence of and trends in health status and health-related behaviors in the non-institutionalized Utah adult population. A more detailed summary of these analyses may be found in the February 2003 *Utah BRFSS Brief*.

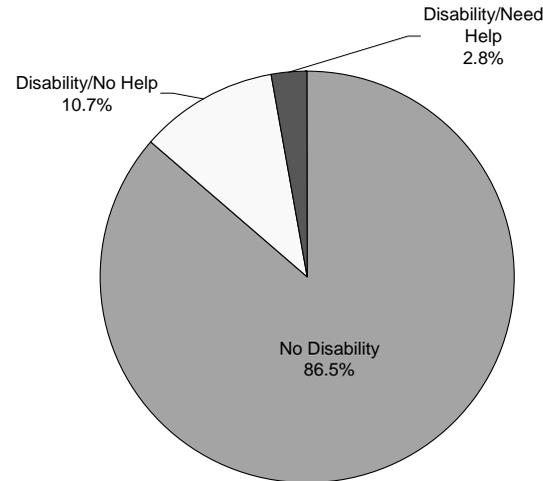
Prevalence of Disability

Respondents were considered to have a disability if they reported having been limited for 12 months or more by a physical, mental, or emotional problem. Respondents who met this definition of disability were classified by whether they needed assistance with either routine needs (e.g., household chores, shopping) or personal care (e.g., eating, bathing). It is important to note that the BRFSS survey is conducted with non-institutionalized adults. As a result, many individuals with the most severe limitations were not represented in the analyses.

- In 2001, 13.5%, or approximately 198,000, of the non-institutionalized Utah adult population reported having a health problem or impairment that met the definition for disability. About 2.8% of adults had a disability and required assistance while 10.7% had a disability but did not require assistance (Figure 1).
- The most common conditions reported by people with disabilities were orthopedic, including back or neck problems, bone or joint injuries, and walking problems (34.2%); followed by arthritis (16.7%); medical conditions, including respiratory and heart disorders, stroke, diabetes and cancer (12.7%); affective disorders, including depression, anxiety or emotional problems (10.6%); and sensory impairments, including hearing and vision problems (1.9%) (Figure 2).

Disability Among Utah Adults

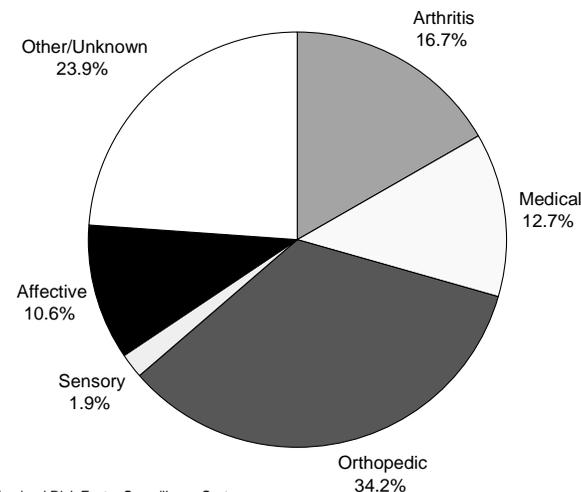
Figure 1. Disability status among Utah adults, Utah BRFSS, 2001.



Source: Utah Behavioral Risk Factor Surveillance System

Major Impairment or Health Problem

Figure 2. Major impairment or health problem among adults with disabilities, Utah BRFSS, 2001.

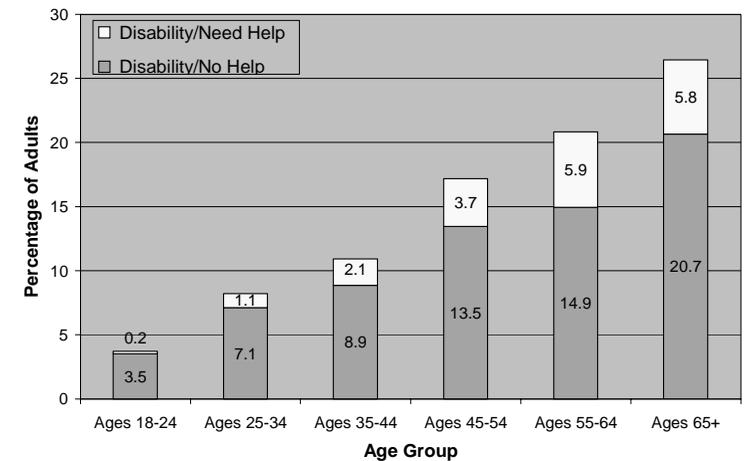


Source: Utah Behavioral Risk Factor Surveillance System

- The prevalence of disability increased substantially with age for Utah adults (Figure 3). There was no significant difference in the prevalence of disability between men and women (not shown).

Prevalence of Disability by Age

Figure 3. Prevalence of disability among adults in Utah by age group, Utah BRFSS, 2001.



Source: Utah Behavioral Risk Factor Surveillance System

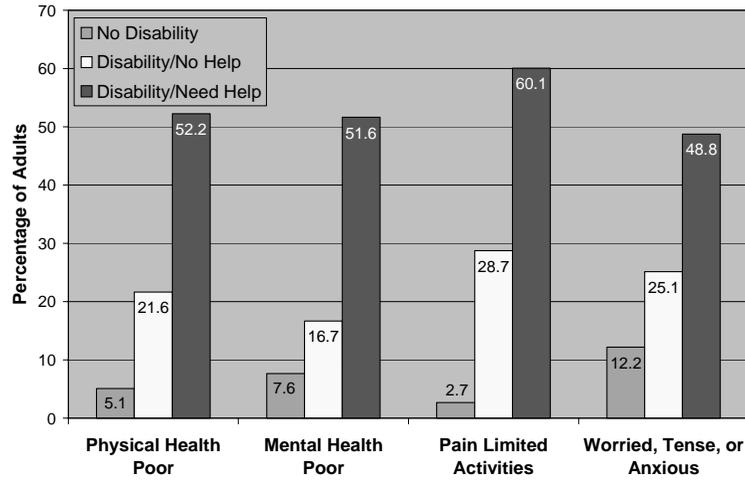
Quality of Life

Utah adults with a disability, and especially those who needed assistance with routine or personal care, were more likely to report:

- 15 or more of the last 30 days when their physical health was not good.
- 15 or more of the last 30 days when their mental health was not good.
- Pain made it hard for them to do their usual activities.
- They felt worried, tense or anxious. (Figure 4).

Quality of Life by Disability Status

Figure 4. Percentage of Utah adults who reported physical health not good >15 of past 30 days, mental health not good >15 of past 30 days, pain limited activities, or feeling worried or anxious by disability status, Utah BRFSS, 2001.



Source: Utah Behavioral Risk Factor Surveillance System

Socioeconomic Characteristics

On average, when compared to adults who reported no disability, Utah adults with a disability reported lower socioeconomic status.

- Utah adults with disabilities were less likely to be college graduates (those requiring assistance, 23%; with a disability but not requiring assistance, 27%; no disability 31%).
- For working-age adults (ages 18-64), annual household incomes less than \$25,000 were reported more often by adults with disabilities than adults without disabilities (those requiring assistance, 44%; with a disability but not requiring assistance, 27%; no disability 16%).
- Over one quarter of those with disabilities who required assistance were much more likely to report being unable to work (27%) compared to those not requiring assistance (7%) and those with no disability (1%).

In summary, the analyses indicated that Utahns with disabilities are more likely to experience poor quality-of-life and less likely to achieve higher levels of education and income. Health promotion and disease prevention measures that help to avoid chronic diseases or to limit their effects will decrease disability for Utah adults. For people living with disabilities, educational and vocational programs and assistive technologies that promote their participation in the labor force will lead to their improved economic well-being.

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