

Incidences of and predisposing factors for task-combined and task-specific disabilities: An analysis of a national representative survey of middle-aged and older community adults in Taiwan, 1996-2003

Athena Tsai^{1,2}, Virginia Lan³, Ching-Lin Hsieh⁴, Shiao-Chi Wu⁵, Chung Fu Lan⁵

¹*Institute of Public Health, National Yang-Ming University, Taipei, Taiwan,* ²*Department of Occupational Therapy, Kaohsiung Medical University, Kaohsiung, Taiwan,* ³*School of Nursing, Eastern Michigan University, Michigan, United States,* ⁴*School of Occupational Therapy, College of Medicine, National Taiwan University, Taipei, Taiwan,* ⁵*Institute of Health and Welfare Policy, National Yang-Ming University, Taipei, Taiwan*

Objectives: To determine the incidences of and predisposing factors for task-combined and task-specific disabilities among community-dwelling independent older adults aged 50 years and over in a 7-year period.

Design: Secondary data analysis with the data from the national representative survey, the Survey of Health and Living Status of the Elderly, 1996 and 2003.

Setting: Taiwan.

Participants: Four thousand four hundred and twenty eight initially non-disabled community elderly aged 50 and older were interviewed at baseline. Three thousand three hundred and fifty two of them received follow-up interviews.

Measurements: Demographic, health-related, and lifestyle variables were used as potential factors at baseline. Perceptions of difficulty in 6 daily tasks (i.e. eating, dressing, bathing, transfers, indoor walking, and toileting) were collected twice, 7 years apart.

Results: The accumulated incidence of 7-year task-combined disability was 7.1%. The task-specific disabilities ranged from 2.6% (eating) to 5.7% (bathing). Age, education, disease number, hospitalization in the past 1 year and exercise > 6 times/week were common predisposing factors across disabilities. Unsatisfied self-rated health was a risk factor of bathing (odds ratio =2.77, CI= 1.47-5.22), dressing (OR=3.08, CI= 1.53-6.20), and eating (OR=3.70, CI= 1.50-9.12) disabilities. Social club attendance (OR=0.79, CI=0.65-0.95) was a protector against task-combined disability onset.

Conclusions: This study confirmed that task-combined and each task-specific disability had different predisposing factors. We suggested specialized prevention for task-specific disabilities to reduce the size and potential utilization of mildly disabled older adults.