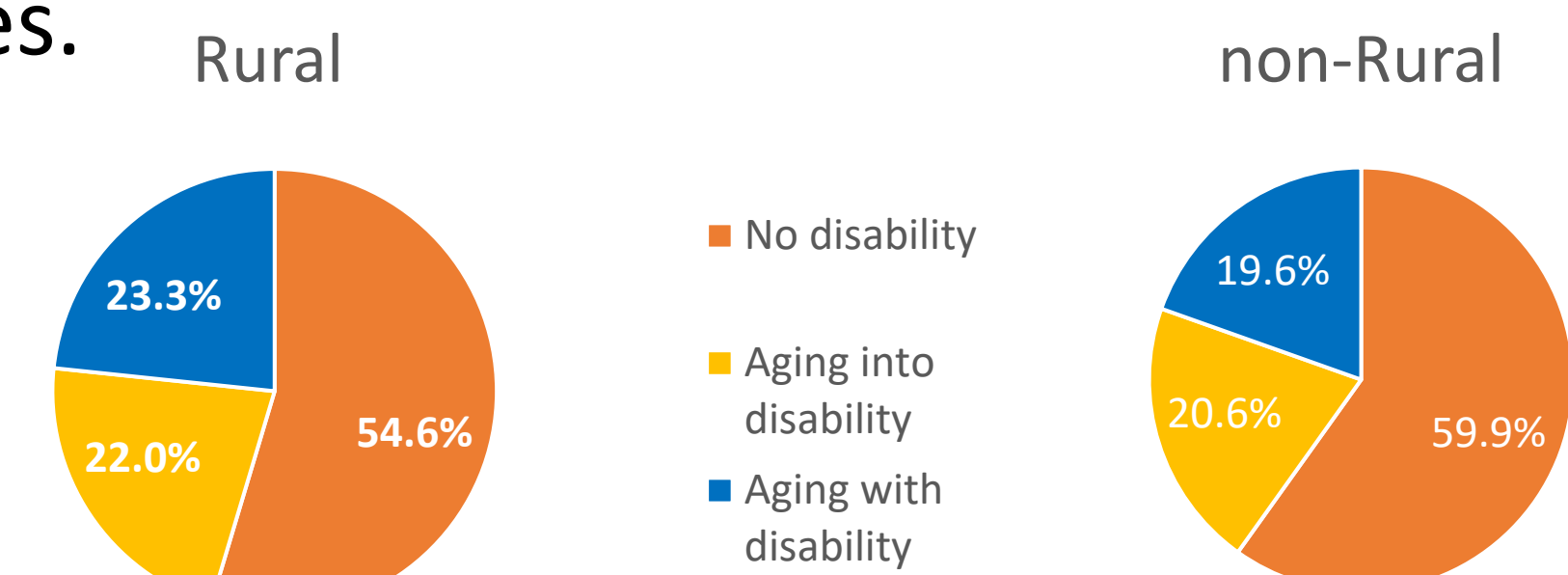


## Introduction

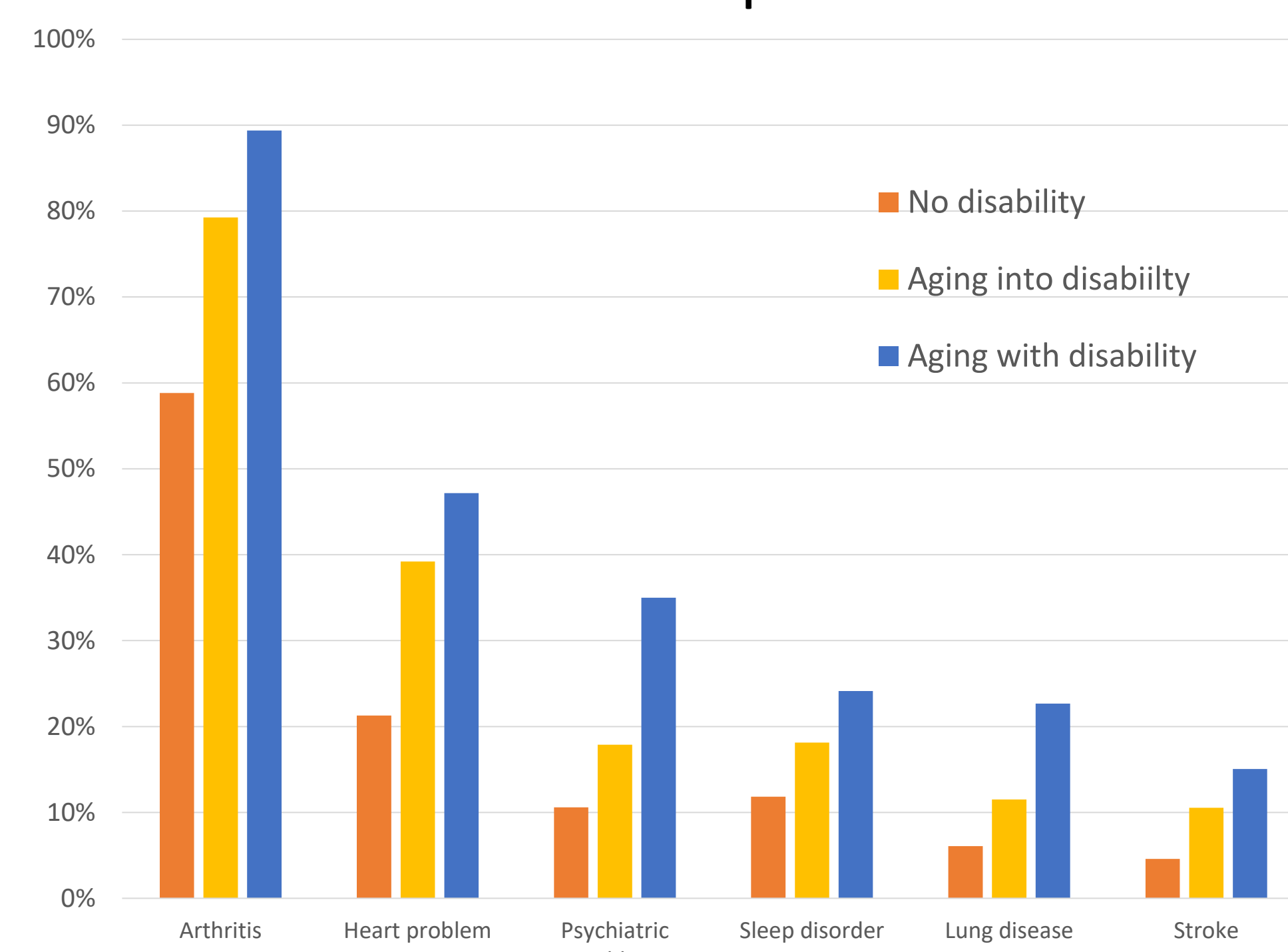
People with disabilities, older adults, and older adults with disabilities are all more prevalent in rural counties compared to nonrural counties.



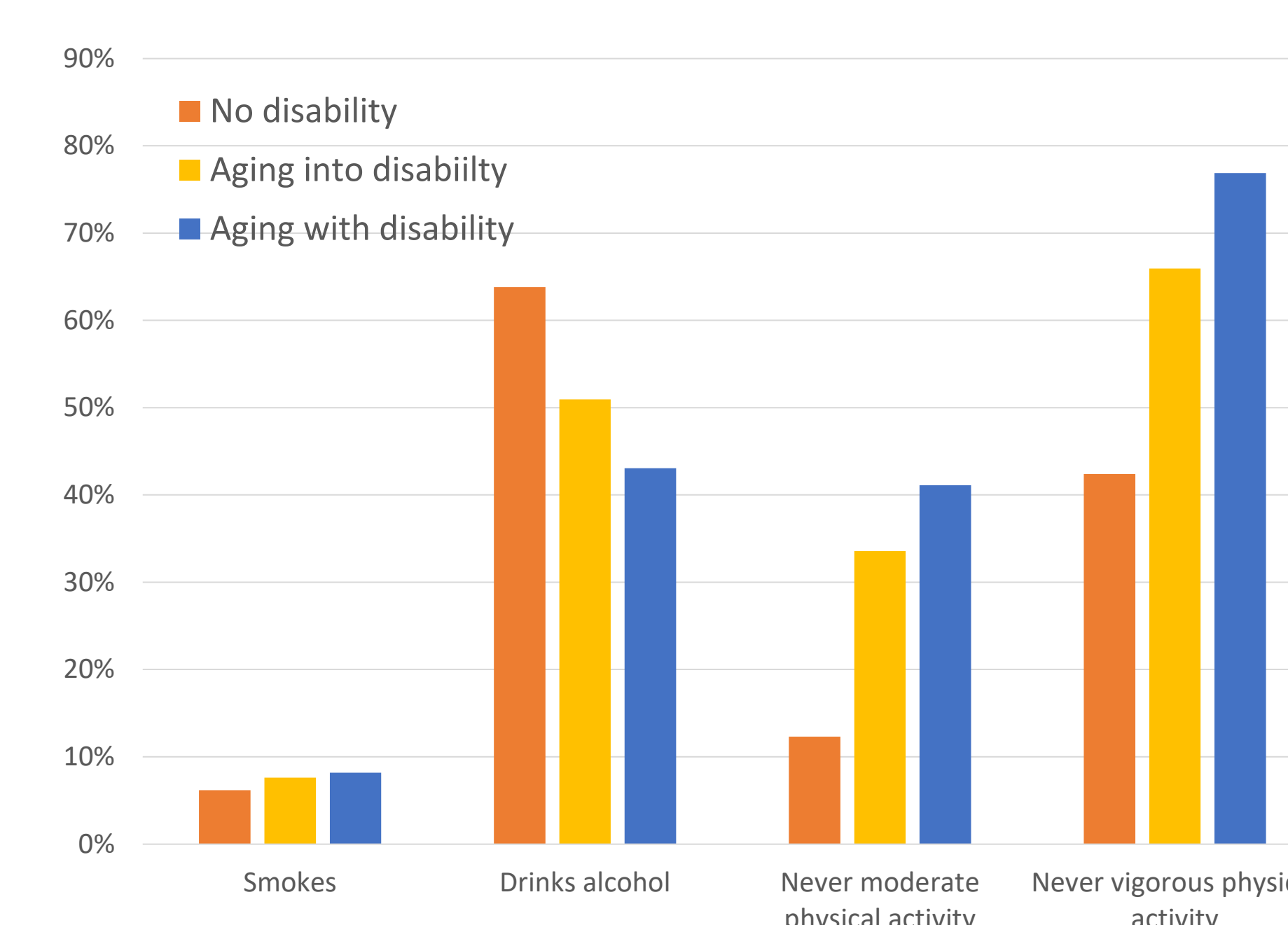
Among the 65 and older population with disability, a large proportion will be experiencing disability as a result of aging (that is, aging *into* disability) and some will be aging *with* disability, that is, having experienced an earlier or life-long disability. This research describes health outcomes for older adults by rurality and disability status/onset.

## Health Outcomes by Disability Group

Chronic disease prevalence



Preventive health behavior



## Results

- This work highlights differences in health outcomes across disability groups and between community types, recognizing that the experiences of older adults with disability varies depending on whether disability onset was earlier or later in life, and that it varies across types of places for some characteristics.
- Those who are aging with a disability have more substantial health needs, including higher rates of chronic disease and higher rates of negative mental health measures relative to the other disability groups. Preventive health behavior measures are mixed, but those who are aging with disability are significantly less likely to get any physical exercise.
- Differences by rurality were most pronounced in mental health measures.

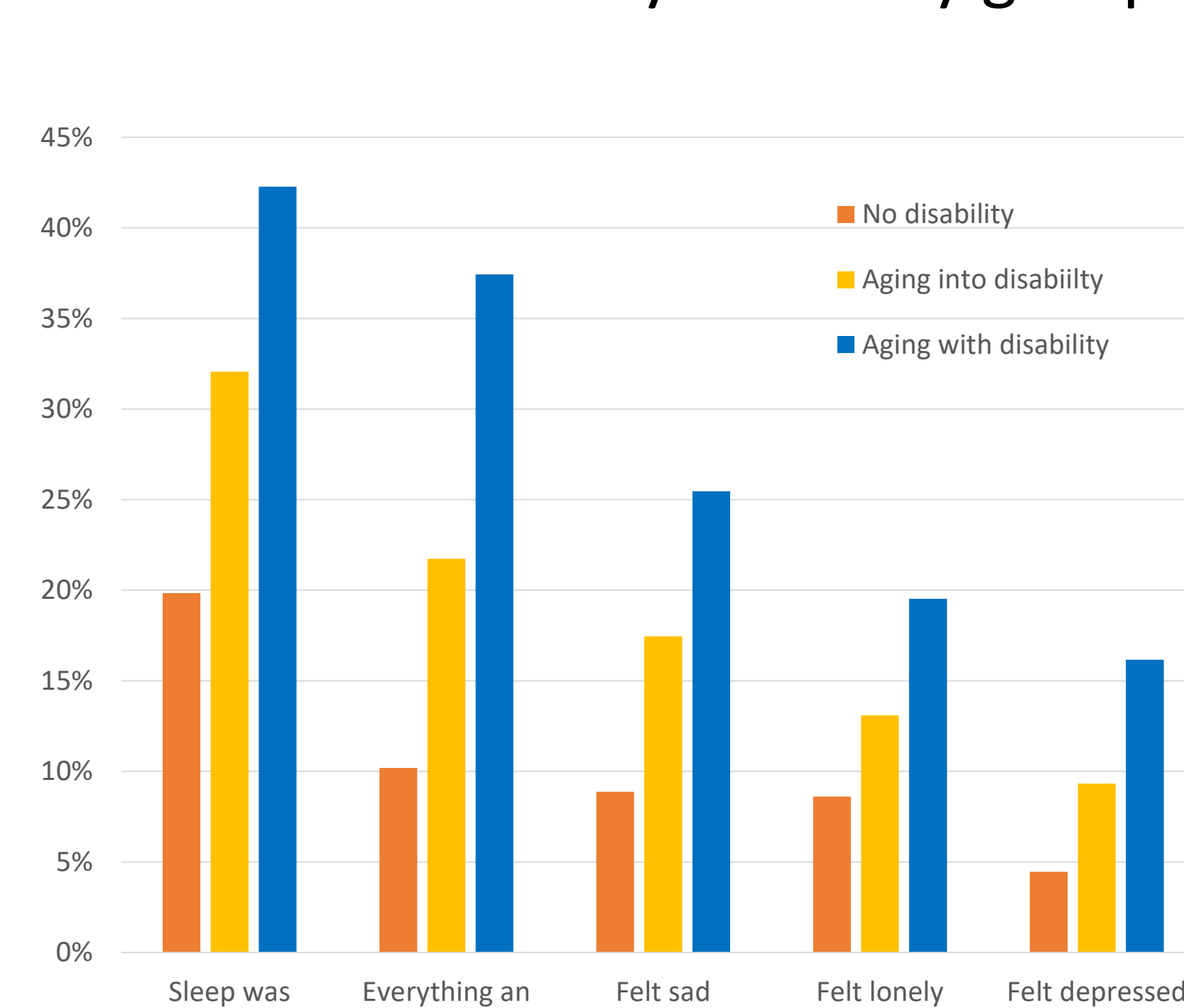
## Data and Methodology

**Data:** 2018 Health and Retirement Study (HRS) data limited to those aged 65 and older in 2018 (n=5,387). Health characteristics are shown for three groups: those who are aging with a disability (20.6%); those who have aged into disability (21.0%); and those with no disability (58.4%).

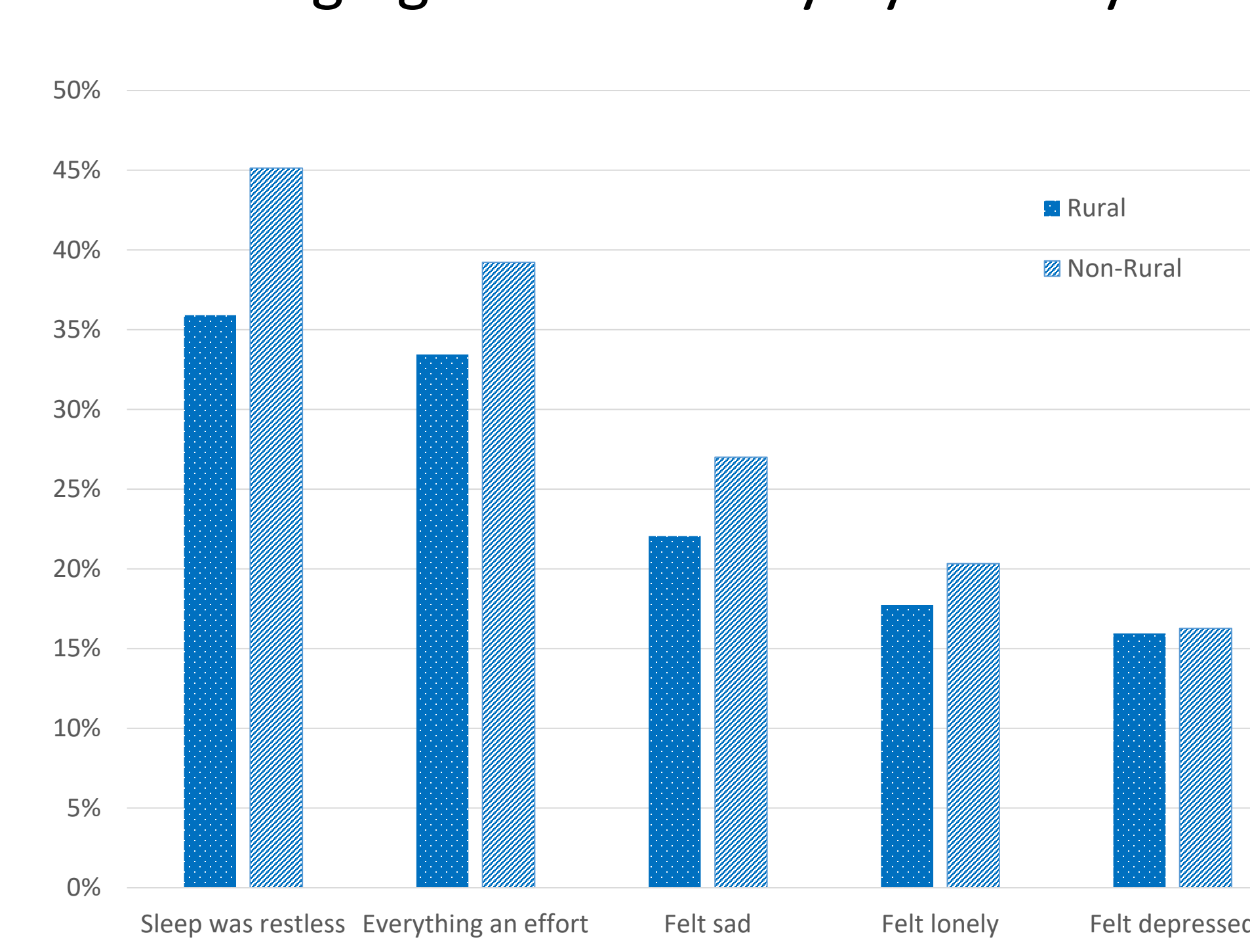
**Methods:** Bivariate analysis examines chronic disease prevalence, mental health self-reports, and preventive health behaviors. Odds ratios (and 95% confidence intervals) for logistic regression models predicting select mental health characteristics are shown for those living in rural communities. These control for age, gender, race/ethnicity, and educational attainment.

## Mental Health Outcomes by Disability and Rurality

Mental health by disability group



Aging into disability by rurality



## Conclusions

- Assessing health outcomes for different disability groups within community type may be a useful approach for evaluating modes of intervention or identifying different types of intervention.
- Efforts to target people with disabilities for health interventions could benefit by considering disability characteristics and community characteristics.
- Older adults with disabilities are a heterogeneous group. This analysis examines just two characteristics. Further work should explore other ways in which we can better understand the varied needs of this population.

## Measures

### Operationalizing Disability:

"[if applicable: You said you are not working anymore, but we would like to ask how your health might affect paid work activities you could do.] Now I want to ask how your health affects paid work activities. Do you have any impairment or health problem that limits the kind or amount of paid work you can do?"

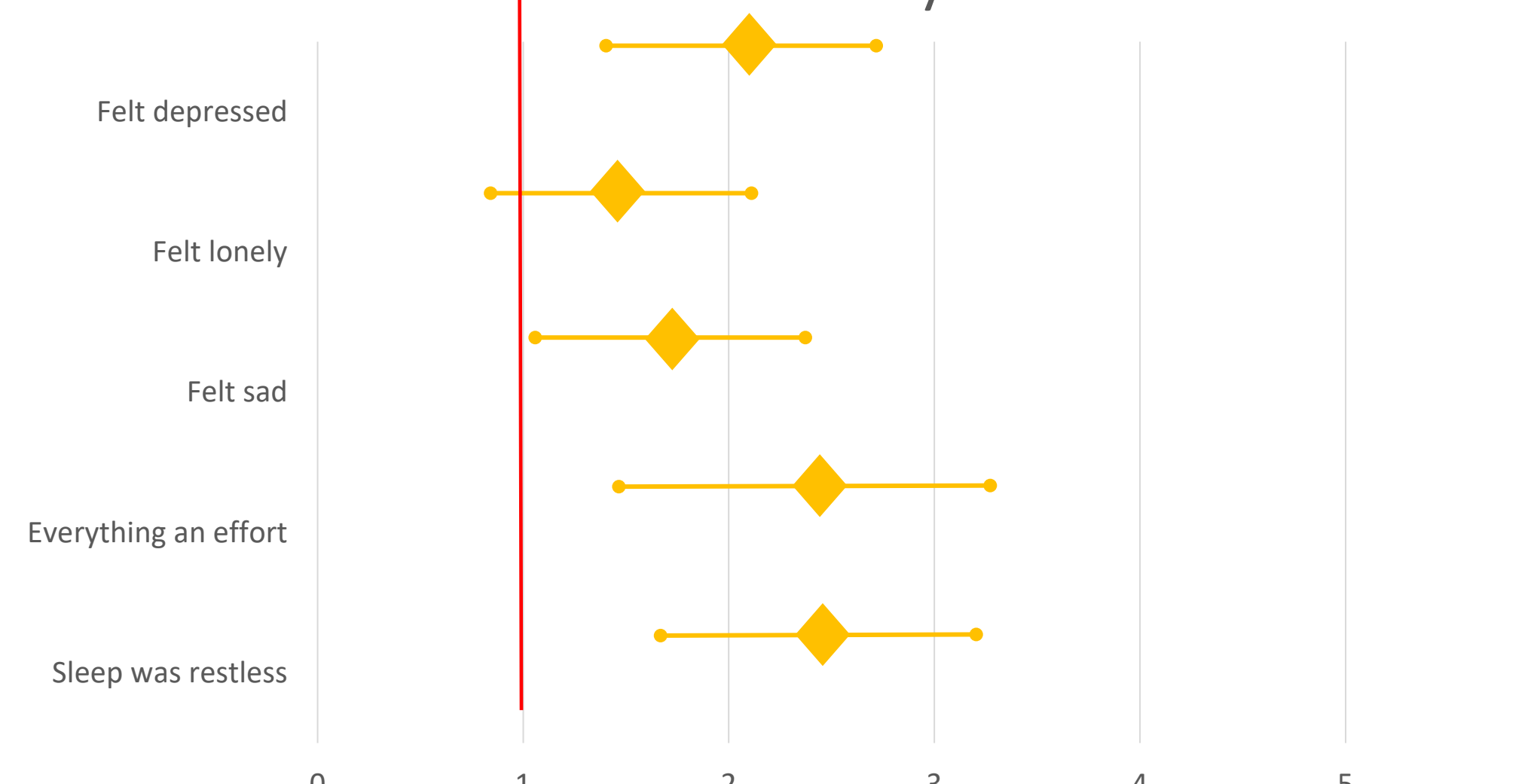
- If *no* in 2010 and 2018: No disability
- If *no* in 2010 and *yes* in 2018: Aging into disability
- If *yes* in 2010 and *yes* in 2018: Aging with disability

### Operationalizing Rurality:

Beale urban/rural continuum codes of 3 and higher are coded as rural. This is based on county of residence. Only those who did not move between 2010 and 2018 are examined.

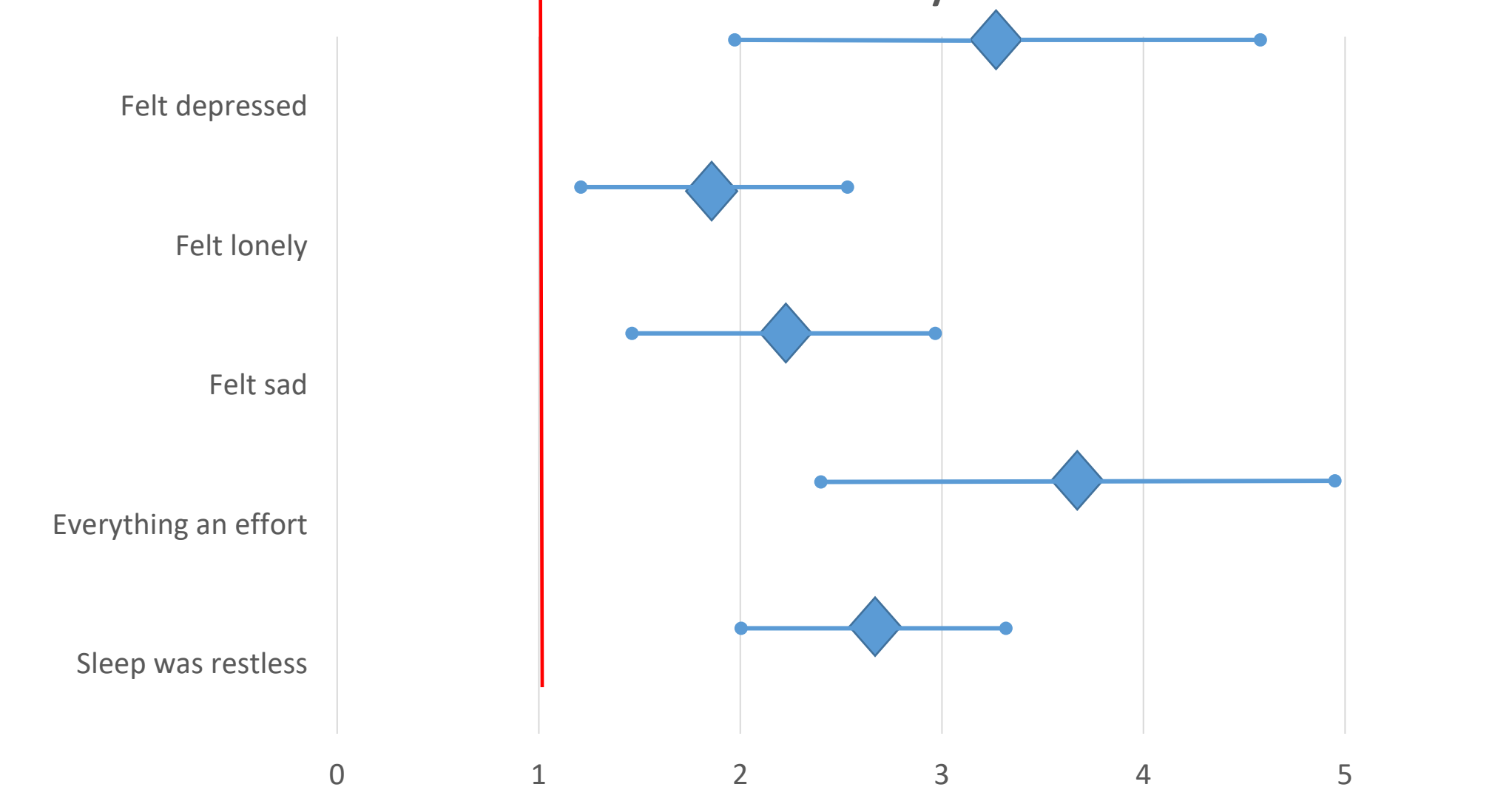
## Role of Disability Type in Predicting Mental Health in Rural Communities

Odds ratios for aging *into* disability in a rural community



Relative to those with no disability, those aging into disability had significantly lower mental health outcomes in four of five areas, holding other demographic characteristics constant.

Odds ratios for aging *with* disability in a rural community



For those aging with a disability, significant differences in all mental health areas were more prominent than in the other disability group.

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