

Social Participation of Adults Aging with Physical Disabilities: A Cross-Sectional Study Investigating the Role of Transportation Mode and Urban vs Rural Living

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INTRODUCTION

- Social participation is associated with positive physical and mental health outcomes for adults aging with long-term physical disabilities (AAwPD)
- AAwPD face built environment barriers to social participation in the community
- Interventions addressing built environment barriers to participation for AAwPD are limited

METHODS

- N=331 AAwPD ages 45-65 living in Missouri who participated in comprehensive online survey
- Multivariate analysis of covariance (MANCOVA), Mann-Whitney U, Kruskal-Wallis tests examined differences in social participation across transportation mode and residential location
- Hierarchical multiple linear regression explored the weighted role of categories of factors in predicting social participation

RESULTS

Participant demographic characteristics (N = 331)

Characteristic	Total Sample
Age in years, mean (SD)	57.3 (5.1)
Years with disability, mean (SD)	21 (14.7)
Female, n (%)	209 (63.5)
White, n (%)	190 (57.4)
Living in urban area, n (%)	258 (78.0)
Private transportation user, n (%)	224 (67.9)
Medicaid eligible, n (%)	190 (57.4)
Transportation availability as a barrier, n (%)	138 (41.7)
Desire for more social activities, n (%)	132 (40.2)
Desire for more community leisure activities, n (%)	169 (51.2)
Living alone, n (%)	160 (48.3)

Adults aging with long-term physical disabilities reported lower average ability to engage in, and satisfaction with, social participation than the general population

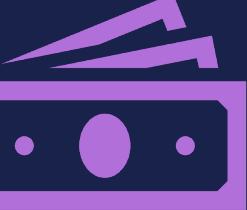
Variance in the predictive model explained by:



Pain, physical function, and other personal and health characteristics = 43.4%



Transportation barriers, urban vs rural location, and other built environment factors = 6.1%



Education, socioeconomic deprivation, marital status, and other social resources = 2.5%



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STATISTICAL FINDINGS

Analysis	Summarized Results
MANCOVA	Statistically significant differences found in two PROMIS social participation measures across public vs private transportation (p=.025) and urban vs rural residential location (p=.034)
Hierarchical Linear Regression	Produced final R ² of 0.520 (p<.001), with health and demographic factors accounting for 43.4% of model's variance
Mann-Whitney U	Public transit users reported higher social participation than private transit users (U=8558.5, p<.001); urban participants reported higher social participation than rural participants (U=5925, p<.001)
Kruskal-Wallis	Paratransit users showed highest mean rank in social participation (H=16.6, p=.002) of all transportation modes

DISCUSSION

- AAwPD highly value social participation and want to engage in more than they currently do
- Health and demographic factors = more predictive of social participation than environment, yet these intrinsic factors also likely reflect the *environment* on a larger systems level
- Interventions targeting both environmental barriers (e.g., improving access to and availability of transportation) and aging-with-disability symptoms may promote social participation

LIMITATIONS

- Findings may not generalize to other geographic regions due to infrastructure, transportation systems, policy, etc.

IMPLICATIONS

- Findings may inform researchers, community organizations, and clinicians in intervention development and implementation to promote social participation for AAwPD

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