

Disability and self-sufficiency among the elderly persons

The case of Czechia

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Background

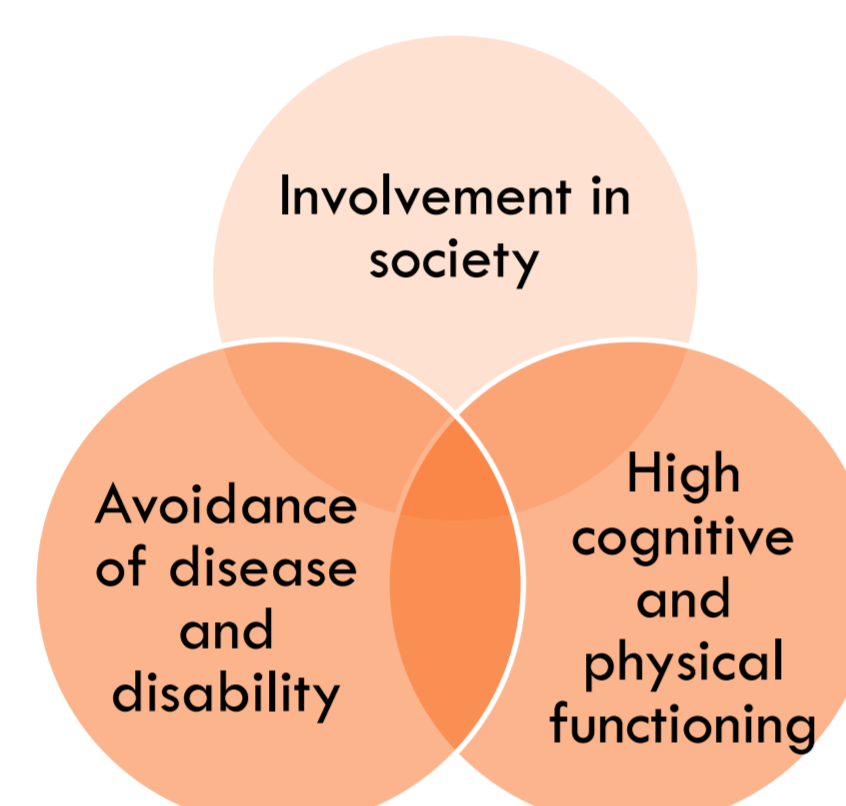
One of the basic components of evaluating the health potential at old age is “functional” health. Limitation of functionality (health, social, physical and cognitive) that is frequently called disability can be considered to be an indicator of health limitation.

It is an indicator of the severity of illness, of the quality of life, as well as an indicator estimating the ability of an ageing person to live independently of others, i.e. to be self-sufficient.

Low probability of disability and maintaining of functional health are two of the three key premises of successful ageing and the maximisation of independency is critical when improving health of elderly.

Figure 1 Model of successful ageing

Model is based on definition of Rowe and Kahn (1997), who define it as combination of low level of disease and disability, high cognitive functioning, and active engagement with life



Methods

On the base of SHARE dataset (wave 5, 2013) the prevalence of disability among the Czech population was assessed with deeper focus on 80-89 years old population. Self-sufficiency of the elderly was measured on the basis of a battery of questions on

- activities of daily living (ADLs),
- instrumental activities of daily living (IADLs) and
- occurrence of problems and limitations of mobility and fine motor.

Also selected health measures were compared in Czechia and Europe.

Results

During the last decade the life span at age 65 years among the Czech population has been prolonged, as well as life span in health or without any limitation.

On the other hand the life expectancy **at age 85 years** is increasing, while the **healthy life expectancy is decreasing**. In that case the increase in functionally serious morbidity and disability can be observed (see Figure4).

Figure 2 Proportion of elderly persons (80-89 years) with 1 and more limitations with activities of daily living (ADLs), Europe, 2013

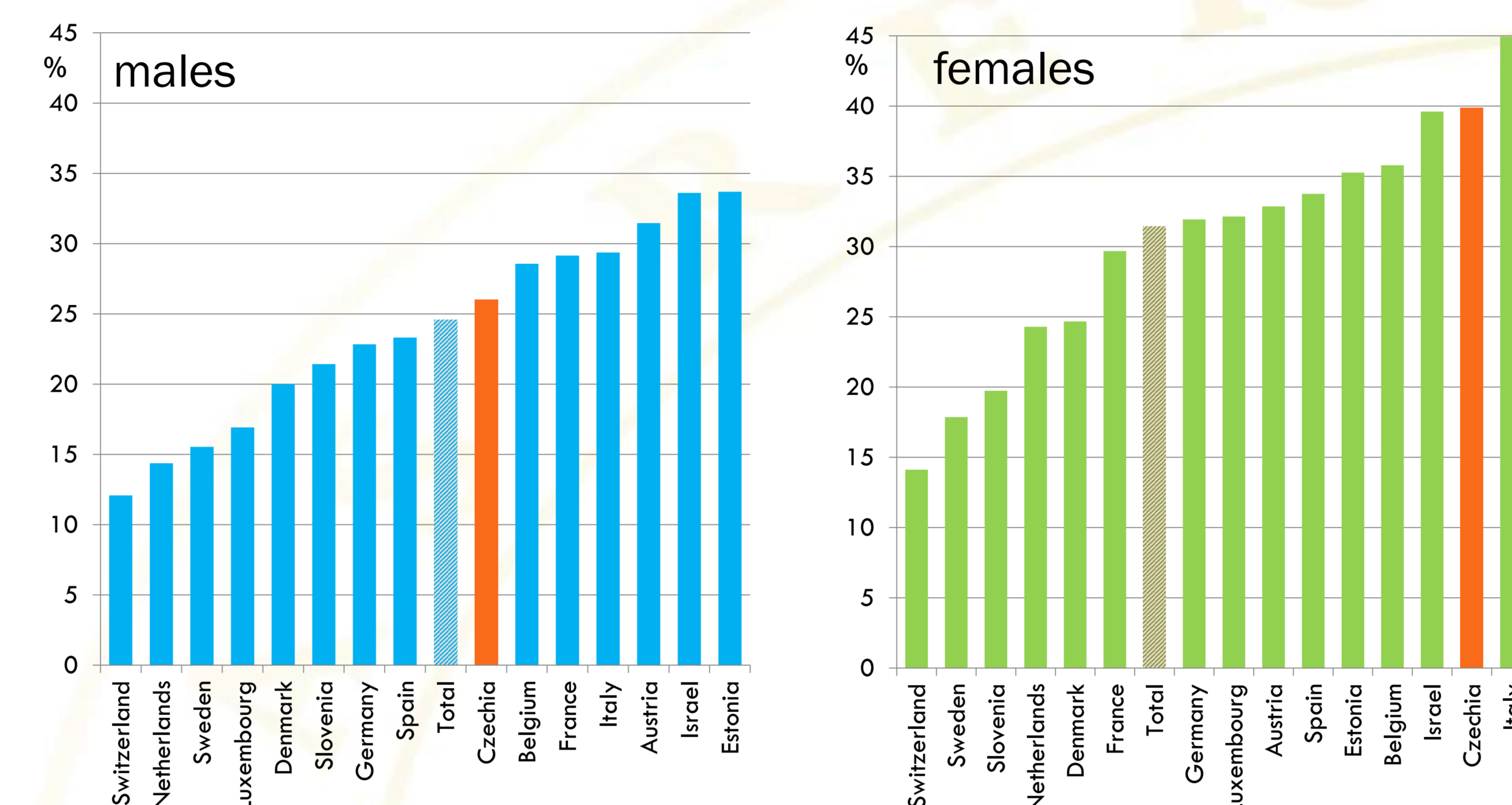


Figure 3 Proportion of elderly persons (80-89 years) with disability, Czechia, 2013

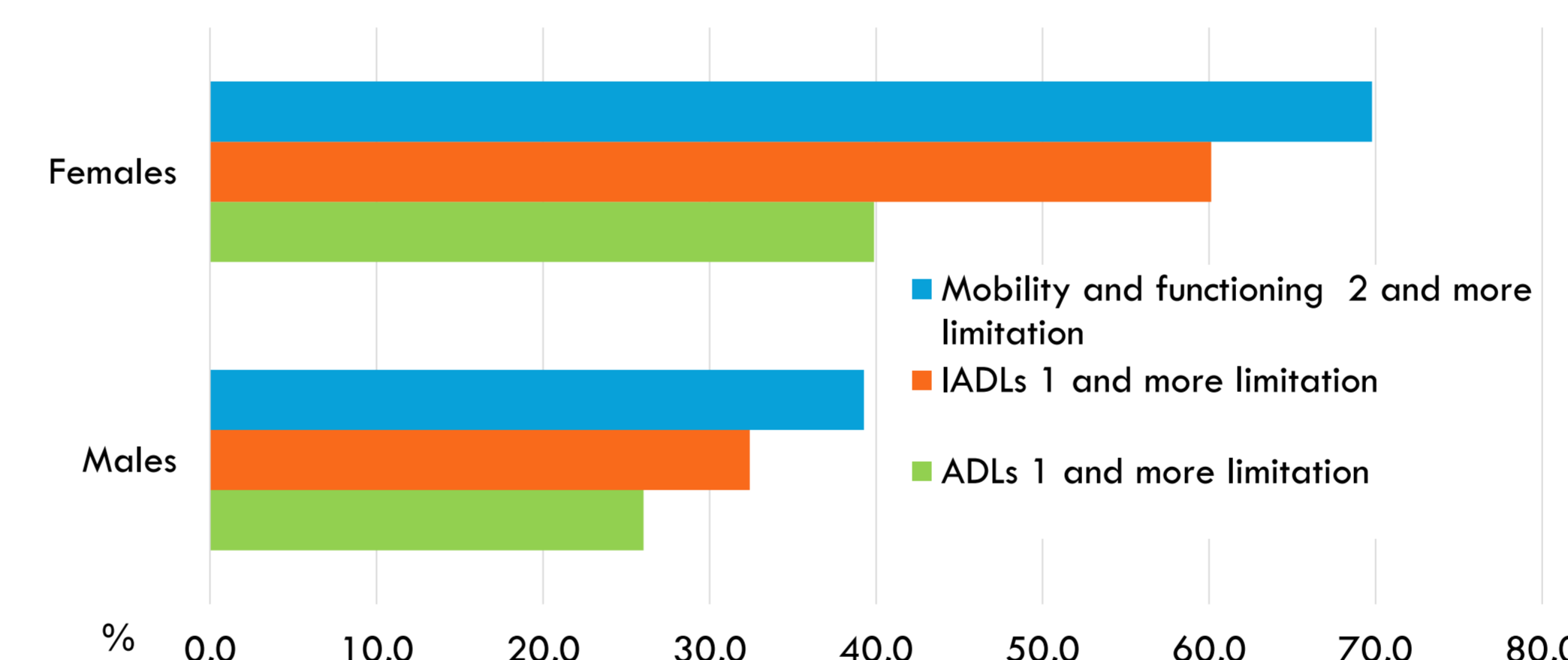


Table 1 Health problems based on selected health measures among males and females aged 80-89 years in Czechia and Europe (%), 2013

		Czechia		Europe	
Health Measure		males	females	males	females
Self perceived health	less than good	57,5	73,8	55,3	63,4
Activity limitation (GALI)	severely limited	69,3	78,6	63,2	71,4
Chronic diseases	2 and more diseases	70,8	82,7	63,5	71,4
ADLs	1 and more limitations	26,0	39,9	24,6	31,5
IADLs	1 and more limitations	32,4	60,1	35,5	50,0
Mobility and functioning	2 and more limitations	39,3	69,8	40,0	60,8

Results (cont.)

Prevalence of health problems among males and females aged 80-89 years in Czechia and comparison with European average is presented in Table 1.

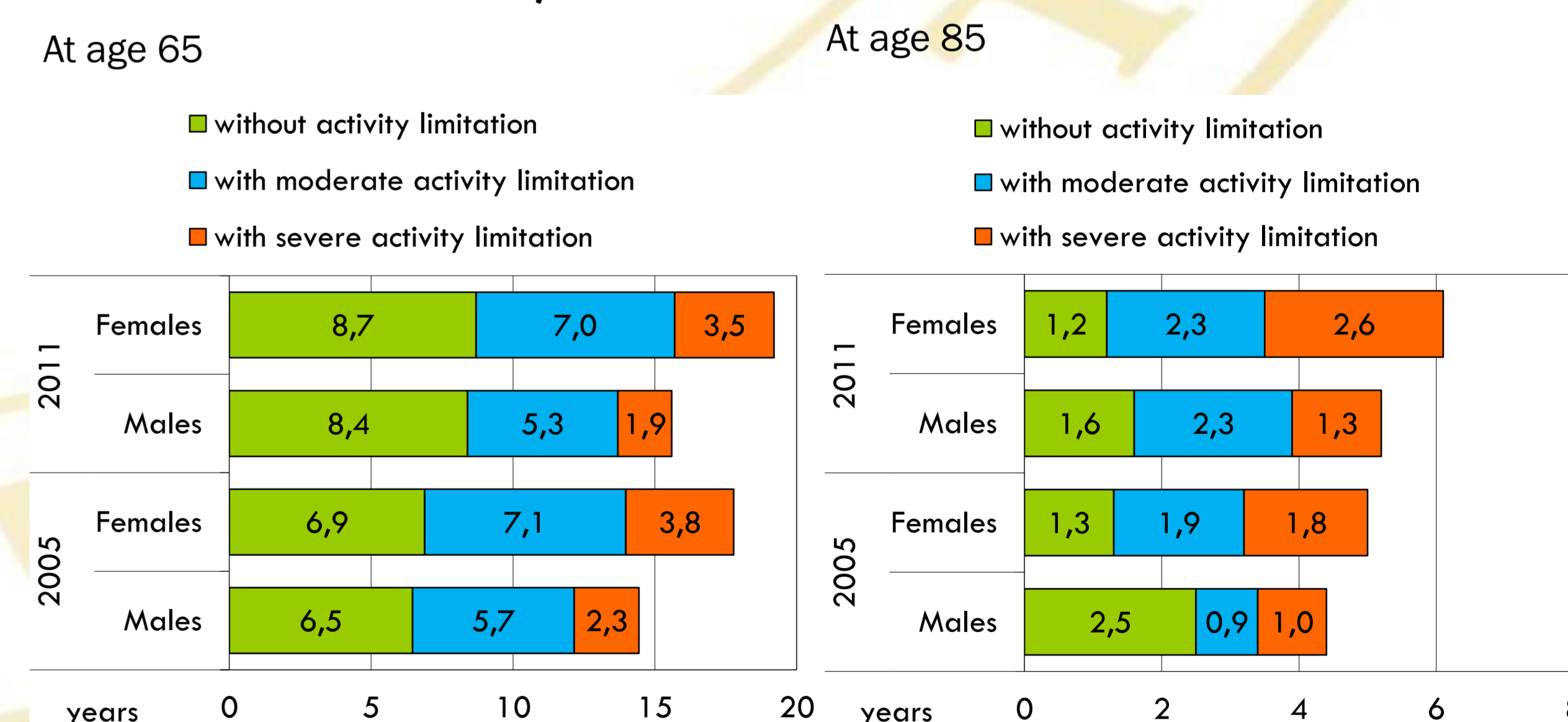
The functional health among the Czech male population was comparable to the European average, while among the Czech elderly females one of the worst health condition and the highest prevalence of disability in Europe was found (see Figure 2).

Nearly 40 % of Czech females (80-89 years) was found as having problems with activities of daily living, 60 % having problems with instrumental activities of daily living and almost 70 % had problems with mobility and functioning (see Figure 3).

Conclusion

Among the Czech population the healthy life expectancy at age 85 is decreasing, thus increase in functionally serious morbidity and disability can be observed. Healthy life expectancy at that age is higher among males than among females; hence health potential of Czech females considers being worse than of Czech males. **Prevalence of disability is one of the highest in Europe among Czech females.**

Figure 4 Life expectancy based on disability, Czechia, 2005 and 2011, source JA EHLEIS



References

Rowe, John W., Robert L. Kahn. 1997. „Successful Aging.“ The Gerontologist 37 (4): 433–440.