



Age Institute

# Association of functional capacity with health-related behaviour among the urban home-dwelling older adults

**Tommi Sulander**

Pertti Pohjolainen

Sirkkaliisa Heimonen

Elisa Virkola

Riitta Koivula

Elina Karvinen

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# Aims

To determine whether functional capacity associates with health-related behaviour

To determine whether health behaviour and certain diseases can be seen as mechanisms explaining socio-economic disparities in functional capacity

# Seniors in the City Project 2008–2010

In the first wave, cross-sectional postal survey was conducted in 2008

Information about state of health, functional ability, lifestyles and coping with everyday life demands

Sample consisted of all home dwelling older adults aged 75 and over living in the Kampinmalmi, one of the central area in the city centre of Helsinki, capital of Finland.

Sample size: 1981

1394 respondents aged 75–100 years

Average response rate 70 %

# Methods

Smoking status, physical activity and use of vegetables and / or fruits were used as an indicators of health-related behaviour

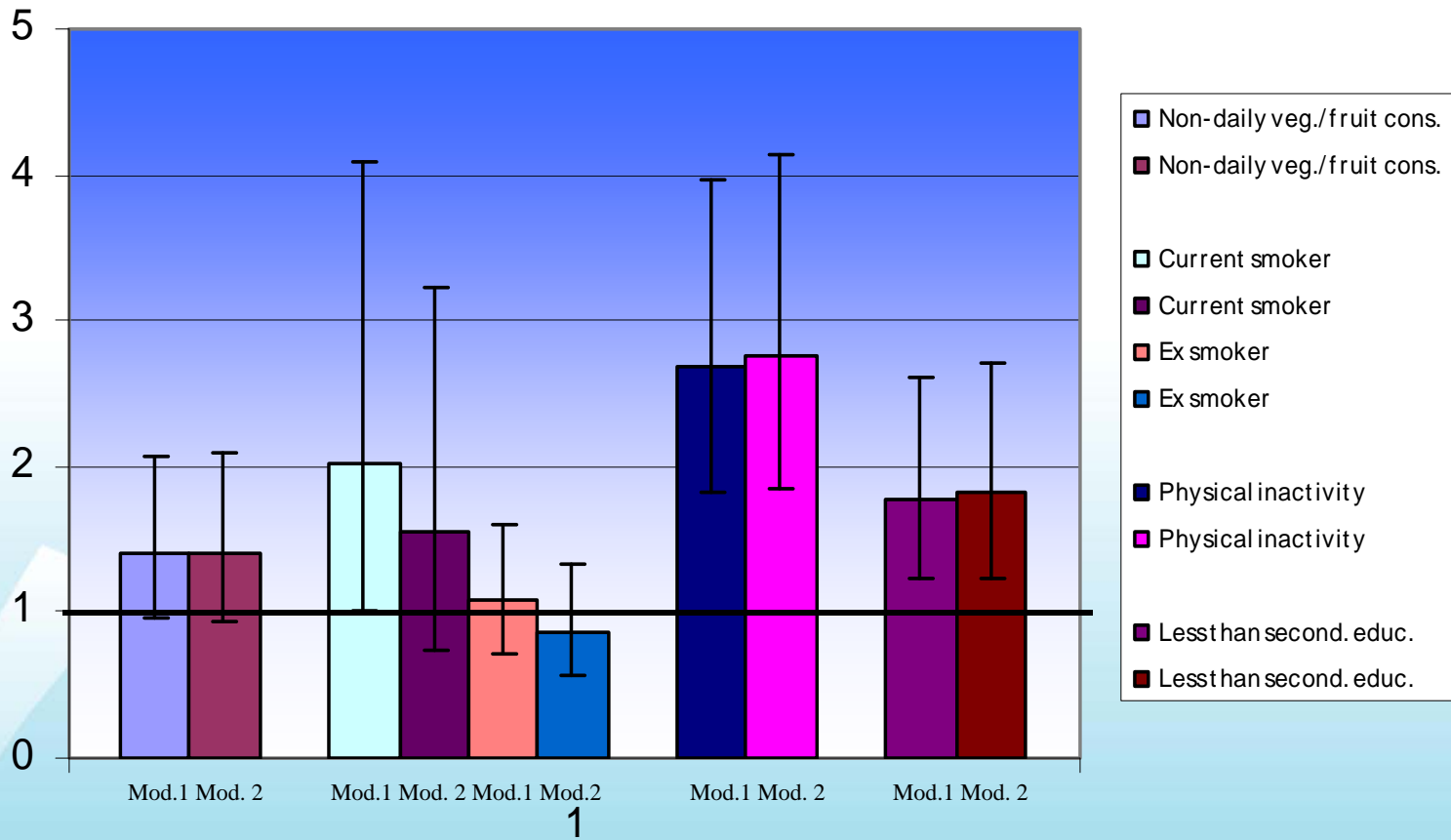
Sum index from activities of daily living was used as an indicator of functional capacity

Cardiovascular and musculoskeletal diseases were used for control purposes

Ordinal regression model was used as a main method of the analyses

		Men	Women	Total
		%	%	N
Age (yrs)	75-79	50	35	559
	80-84	31	33	450
	85+	19	32	386
	Total	100	100	1395
Education	Secondary	58	46	692
	No secondary	42	54	695
	Total	100	100	1387
Vegetables/ fruits	Daily	47	56	727
	Not daily	53	43	633
	Total	100	100	1360
Smoking	Non	36	66	772
	Ex	56	27	498
	Current	8	7	101
	Total	100	100	1371
Physical activity	At least 2-3 times per week	47	40	569
	Once a week or less	53	60	763
	Total	100	100	1332

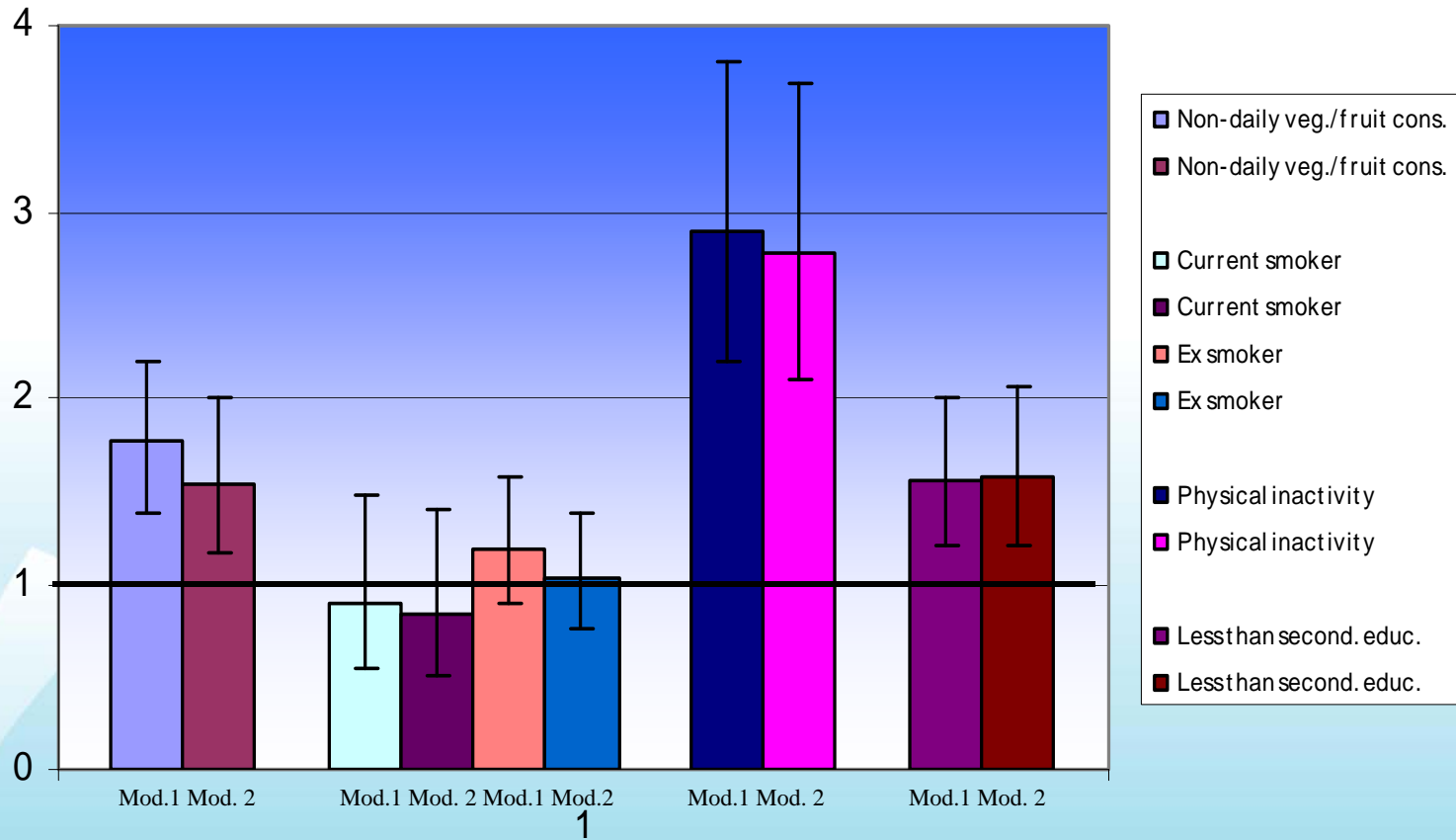
# Association of functional capacity with health behaviour and education among men. Cumulative odds ratio and their 95% confidence interval.



Model 1. Age-adjusted.

Model 2. Adjusted for, health behaviour, education and chronic disease variables.

# Association of functional capacity with health behaviour and education among women. Cumulative odds ratio and their 95% confidence interval.

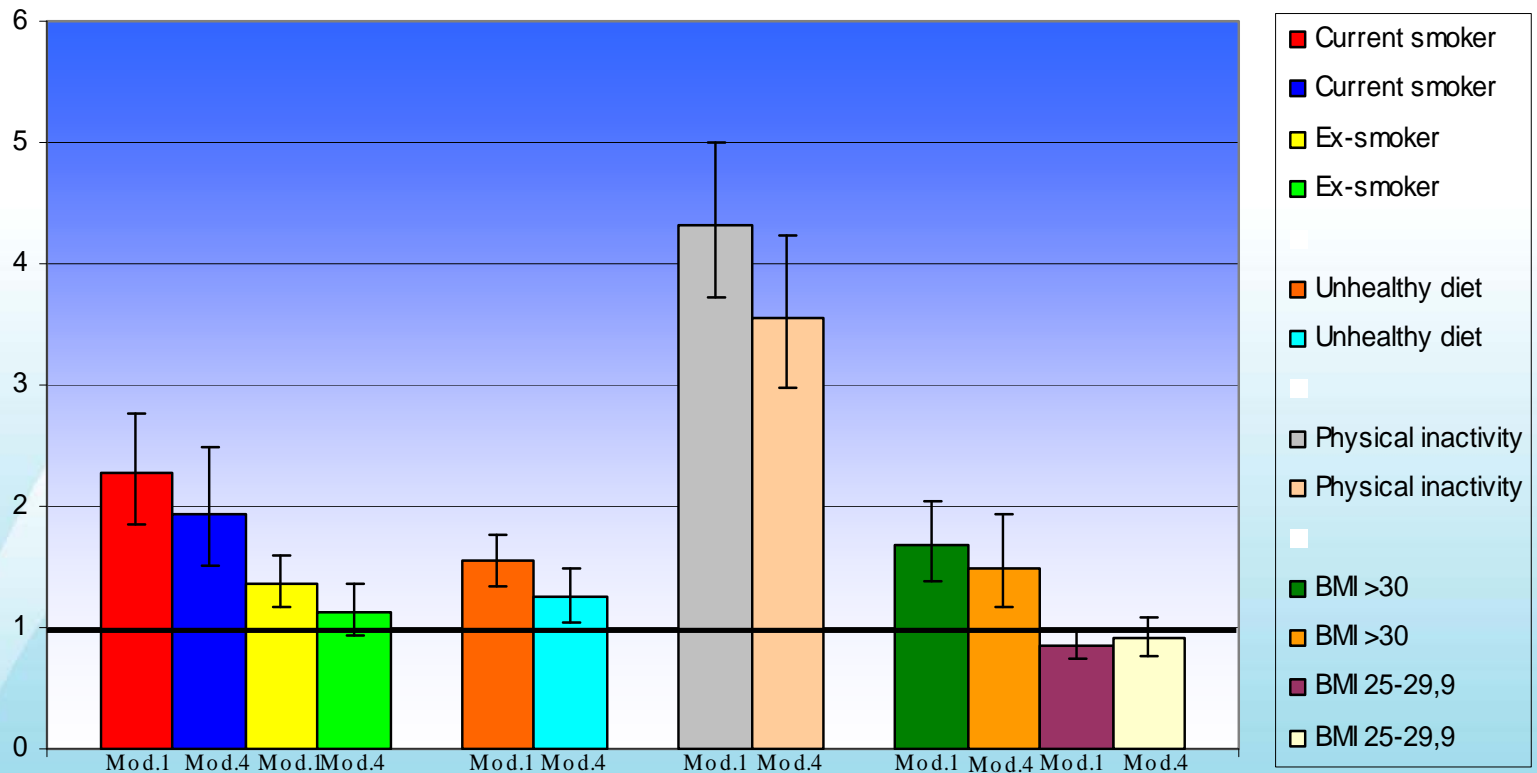


Model 1. Age-adjusted.

Model 2. Adjusted for, health behaviour, education and chronic disease variables.

Results from national monitoring survey among residents of Finland aged 65 to 79 years

## Association between health behavior and functional ability among men. Cumulative odds ratio and their 95% confidence interval.

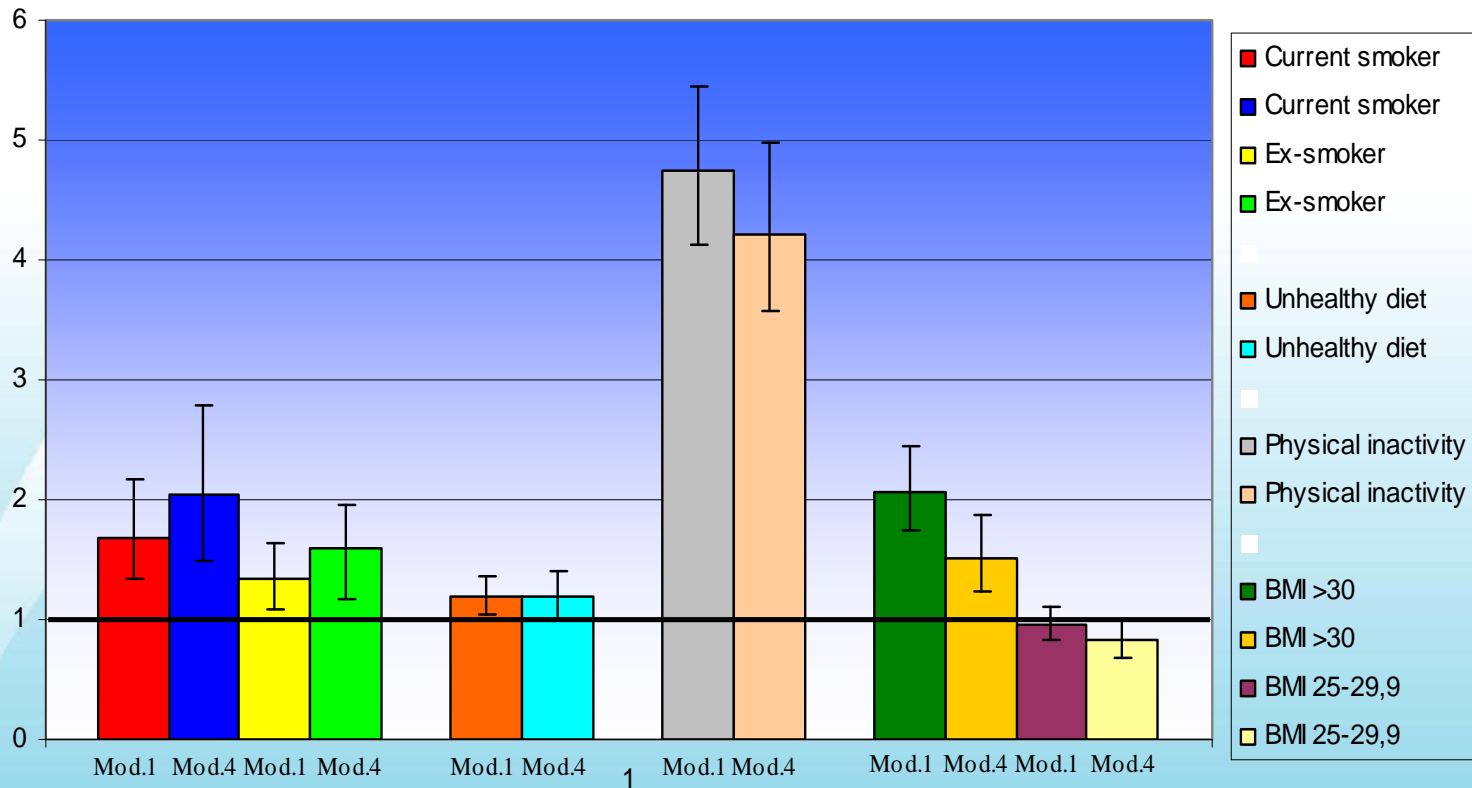


Model 1. Age-adjusted.

Model 4. Adjusted for background, health behavior and chronic disease variables.

Results from national monitoring survey among residents of Finland aged 65 to 79 years

## Association between health behavior and functional ability among women. Cumulative odds ratio and their 95% confidence interval.



Model 1. Age-adjusted.

Model 4. Adjusted for background, health behavior and chronic disease variables.

# Summary and conclusions

Physical inactivity among both genders and not using vegetables and / or fruits daily among women were associated with inferior functional capacity

Current smoking was associated with poorer functional capacity only among men

Differences in functional capacity by education remained after adjustment of multiple factors

Modifiable health-related behaviours should be key priorities in intervention programs targeted to all older adults with or without health problems