PERCEPTIONS OF HEALTH AMONG ADULTS WITH ARTHRITIS IN NORTH CAROLINA

Abstract

Background: In the US, arthritis and other rheumatic conditions are the number one leading cause of disability and a major public health concern. Arthritis can affect an individual’s self-rated health status due to limited physical, social, and mental functioning. We examined perceptions of health among adults with doctor-diagnosed arthritis.

Methods: Using a cross-sectional study of the 2009 Behavioral Risk Factor Surveillance System, we examined the differences in race/ethnicity and socioeconomic status (SES) in self-rated health status among North Carolina adults diagnosed with arthritis. The relationship between self-rated health status and the covariates was examined using univariate, bivariate, and multivariate analysis. Unadjusted and adjusted odds ratios (ORs) and 95% confidence intervals (CIs) were determined using survey logistic regression analyses.

Results: Among adults with arthritis in North Carolina, low SES was associated with a non-favorable self-rated health status. Individuals with less than a high school diploma and individuals with a high school diploma had lower odds of favorable self-rated health status (OR = 0.48; 95% CI: 0.29, 0.79) and (OR = 0.67; 95% CI: 0.50, 0.91), respectively. Individuals with less than $24,999 household income and $25,000-$49,999 household income had lower odds of favorable self-rated health status (OR = 0.28; 95% CI: 0.20, 0.41).

Conclusion: Public health efforts and policy recommendations should focus on the needs of low SES individuals with doctor-diagnosed arthritis through the promotion of healthy lifestyles. SES differences due to environmental and/or lifestyle factors should be further examined to determine their influence on the risk of developing arthritis.