

Exploring the Relationship Between Impaired Mobility and Physical and Emotional Well-Being in Adults Living in New York City

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This study aimed to understand challenges faced by New York City residents living with mobility impairments and the factors that modify the risk of negative outcomes in their physical and emotional well-being.

BACKGROUND

The CDC reports that mobility impairment is the most common disability in the United States, affecting nearly 1 in 7 American adults.¹ Mobility impairment greatly limits the ability of individuals to travel for work, errands, social events, medical appointments, and other activities that typically constitute independent adult life. While the Americans with Disabilities Act (ADA) became law in 1990, expanding public transit and paratransit options for those with mobility impairments, there are still many barriers, both physical and non-physical, to urban travel for this population.² Existing evidence has shown that mobility impairment can negatively impact physical and emotional health by reducing access to healthcare and decreasing life satisfaction. One study found that women in the UK with a mobility impairment had 1.3 times lower odds of having a mammogram than women without a mobility impairment.³ Another study found that decreased mobility, independent of any comorbidities, has a greater negative impact on health-related quality of life than many other conditions, including migraines, stroke, asthma, and anxiety.⁴ However, all the ways in which mobility impairment harms health, and the protective factors that may mitigate such harm, remain to be clarified.

DESCRIPTION OF ORGANIZATION

Patients were recruited from the Farrell Family Medicine Clinic and the Young Men's Clinic, which are part of New York Presbyterian's Ambulatory Care Network. These clinics are located in the Washington Heights neighborhood of Manhattan and serve all in need of care, regardless of the ability to pay.

PRELIMINARY RESULTS



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METHODS

We aim to recruit 10 adult participants who have a mobility impairment via physician referral from New York Presbyterian clinics. We have defined mobility impairment as any neurological or musculoskeletal condition that limits one's ability to walk on a flat, unobstructed surface, or to climb any number of stairs. Participants undergo a telephone interview that addresses their mobility impairment, current physical and emotional health, mobility within and outside the home, support networks, and challenges accessing medical care. Qualitative content analysis will be used to identify themes and patterns that emerge from the interviews. To date, two out of ten interviews have been completed.

Preliminary results indicate:

- the importance of timely and accessible transportation to medical appointments
- complex referral processes, paperwork issues, and a lack of transparency from organizations delay access to mobility devices, therapy, and specialist care
- the presence of anxiety and depression in people with mobility impairments
- close relationships are key to improving mobility, receiving assistance with tasks, and coping with emotional issues

DISCUSSION

We can not yet make any conclusions about the data we have collected, as we have only preliminary results based on two interviews out of an eventual ten interviews. The final results of this study will be useful in the design of a questionnaire that can be used to survey a larger sample of New York City residents with mobility impairments.

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