



Happiness Matters in Aging with a Disability

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HAPPINESS

What is Happiness?

“The experience of joy, contentment, or positive well-being, combined with a sense that one’s life is good, meaningful, and worthwhile.”¹

How is Happiness Measured?

Subjective Happiness Scale⁴

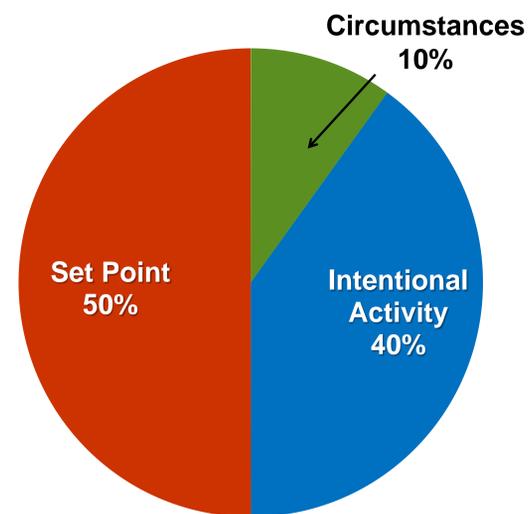
- 4-item measure
- Scores range from 1 (lowest) to 7 (highest)
- Average range: 4.5 – 5.5
- Retired community adults: M = 5.62 (0.96)

What are the Benefits of Happiness?

- Broadens attention and builds physical, social, & cognitive resources¹
- Helps regulate negative emotions
- Promotes resilience in the face of hardship
- Associated with better health and life expectancy

What Determines Happiness?

LYUBOMIRSKY’S MODEL



BACKGROUND

Psychosocial well-being, including happiness, is rarely studied in people with disabilities, despite the potential for such research to expand our understanding of the full range of functioning in the context of aging with a disability.

Therefore, this study aims to answer the following questions:

1. Where do people with disabilities fall on a happiness scale overall and across age groups (by disability group)?
2. How do they compare to community samples without disability?
3. What are some of the correlates of happiness in people aging with physical disability?

METHODS

Design & Setting: Cross-sectional postal survey in the community setting

Participants: 1862 adults (63.3% female; 59.3% married or cohabitating) with muscular dystrophy, multiple sclerosis, post-polio syndrome, or spinal cord injury. The survey’s response rate was 91.2%

Main Outcome Measures: The Subjective Happiness Scale⁴ and the Patient Health Questionnaire-9 Depression Scale² (PHQ-9).

Procedures: All participants completed the PHQ-9 and measures of demographics and comorbid conditions from the 2008 National Health Survey. A subset of the sample (n = 929) completed the Subjective Happiness Scale.

RESULTS

•Analyses examined levels of happiness for the total sample and for each disability condition individually across four age cohorts: 18-44, 45-64, 65-74, and 75+ years.

•The sample’s mean happiness level varied between 5.04 (SD: 1.26) for those age 45-64 and 5.6 (SD: 1.16) for those age 65-74.

•Happiness differed significantly by disability condition and by age; older cohorts were happier than younger cohorts.

•Pain, vision loss, and falls were negatively correlated with happiness.

LEGEND

X-AXIS: Age **Y-AXIS:** Percent (T1); Mean (T2)

■ Muscular Dystrophy (MD)
 ■ Multiple Sclerosis (MS)
 ■ Post-Polio Syndrome (PPS)
 ■ Spinal Cord Injury (SCI)

Table I. PERCENT WITH MDD ON PHQ-9 (N=1843)

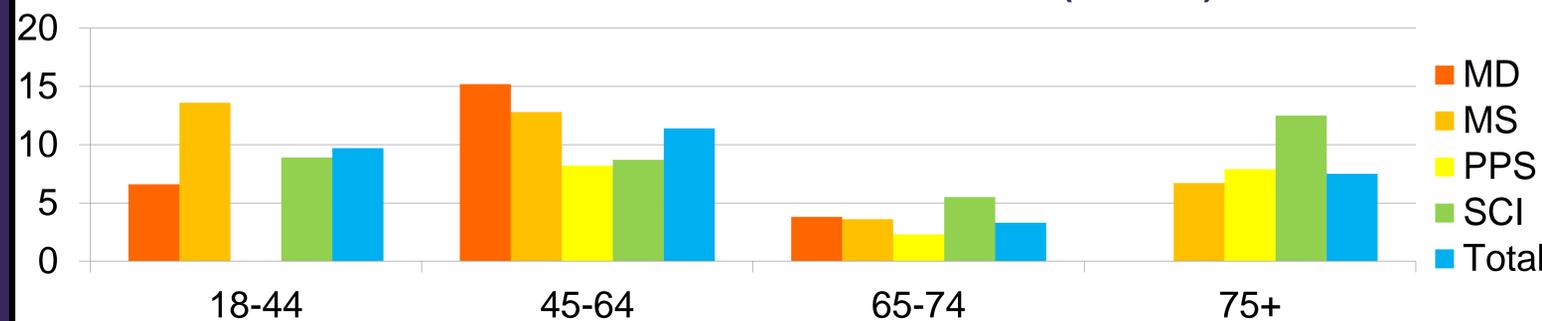
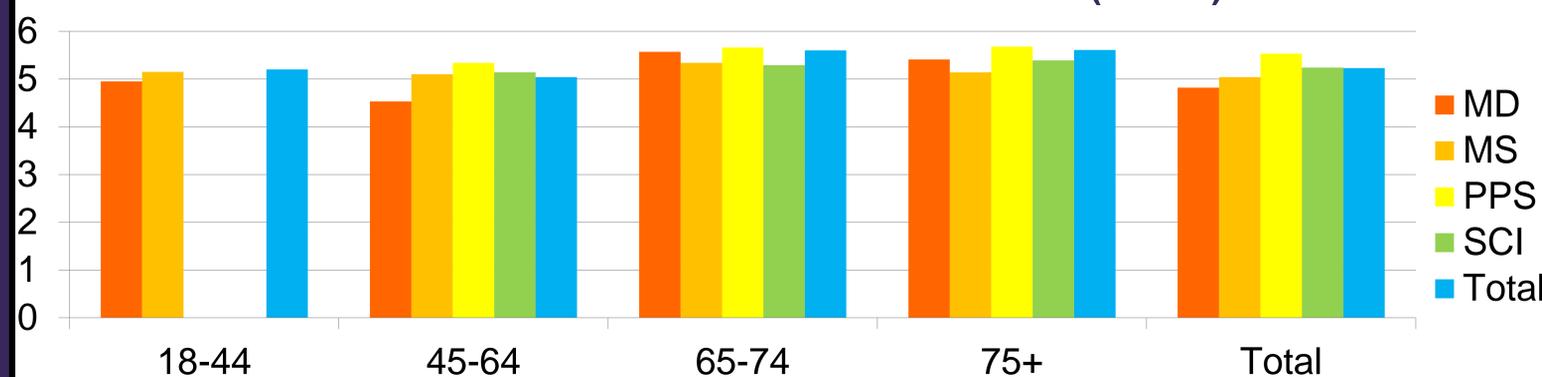


Table II. SUBJECTIVE HAPPINESS SCALE (N=929)



CONCLUSIONS

•The overall sample’s level of happiness for the sample was comparable to levels in other samples of adults without physical disabilities, including older adults.

•However, potentially meaningful differences exist between disability conditions and cohorts.

•Studying the full spectrum of psychosocial functioning, including happiness, may broaden our understanding of successful aging with physical disability.

REFERENCES

1. Fredrickson, B. L. (1998). What Good are Positive Emotions? *Review of General Psychology*, 2(3), 300-319.
2. Kroenke, K., Spitzer, R. L., & Williams, J. B. (2001). The PHQ-9: validity of a brief depression severity measure. *J Gen Intern Med*, 16(9), 606-613.
3. Lyubomirsky, S. (2008). *The how of happiness: A scientific approach to getting the life you want*. New York: The Penguin Press.
4. Lyubomirsky, S., & Lepper, H. S. (1999). A measure of subjective happiness: Preliminary reliability and construct validation. *Social Indicators Research*, 46(2), 137-155.

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