

Factors Associated With Engagement in Advanced Activities of Daily Living: Evidence From Elsi-Brazil.



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Low engagement in advanced activities of daily living is common among Brazilian older adults and is strongly shaped by socioeconomic inequalities and potentially modifiable health factors.

INTRODUCTION

Brazil is undergoing rapid population ageing, with increasing functional vulnerability, particularly among socioeconomically disadvantaged older adults (IBGE, 2024). Although basic and instrumental activities of daily living are commonly used to assess functional capacity, they may fail to detect early declines in autonomy. Advanced activities of daily living (AADL), which encompass social, leisure, and productive activities, have emerged as sensitive indicators of subtle functional and cognitive decline (Sánchez-Rodríguez et al., 2023). Previous studies have shown that lower AADL engagement is associated with older age, lower education and income, multimorbidity, depressive symptoms, and poorer cognitive performance (Sposito et al., 2016; Gao et al., 2025). However, evidence from nationally representative populations in socially unequal settings remains limited.

This study aimed to investigate social, economic, behavioural, and health-related factors associated with lower AADL scores among older adults in Brazil.

METHODS

Population

ELSI-Brazil, 2019–2021. Nationally representative sample of Brazilian adults aged ≥50 years.

N = 9,698 (mean age = 66.0 ± 10.1)

Measures

Outcome: lower frequency of AADL

Sociodemographic and socioeconomic factors: sex, age, education, income, marital status, rurality

Health and behavioural factors: self-rated health, physical activity, depressive symptoms, hypertension, diabetes, and stroke

Functional status: basic activities of daily living and instrumental activities of daily living

Cognitive performance:

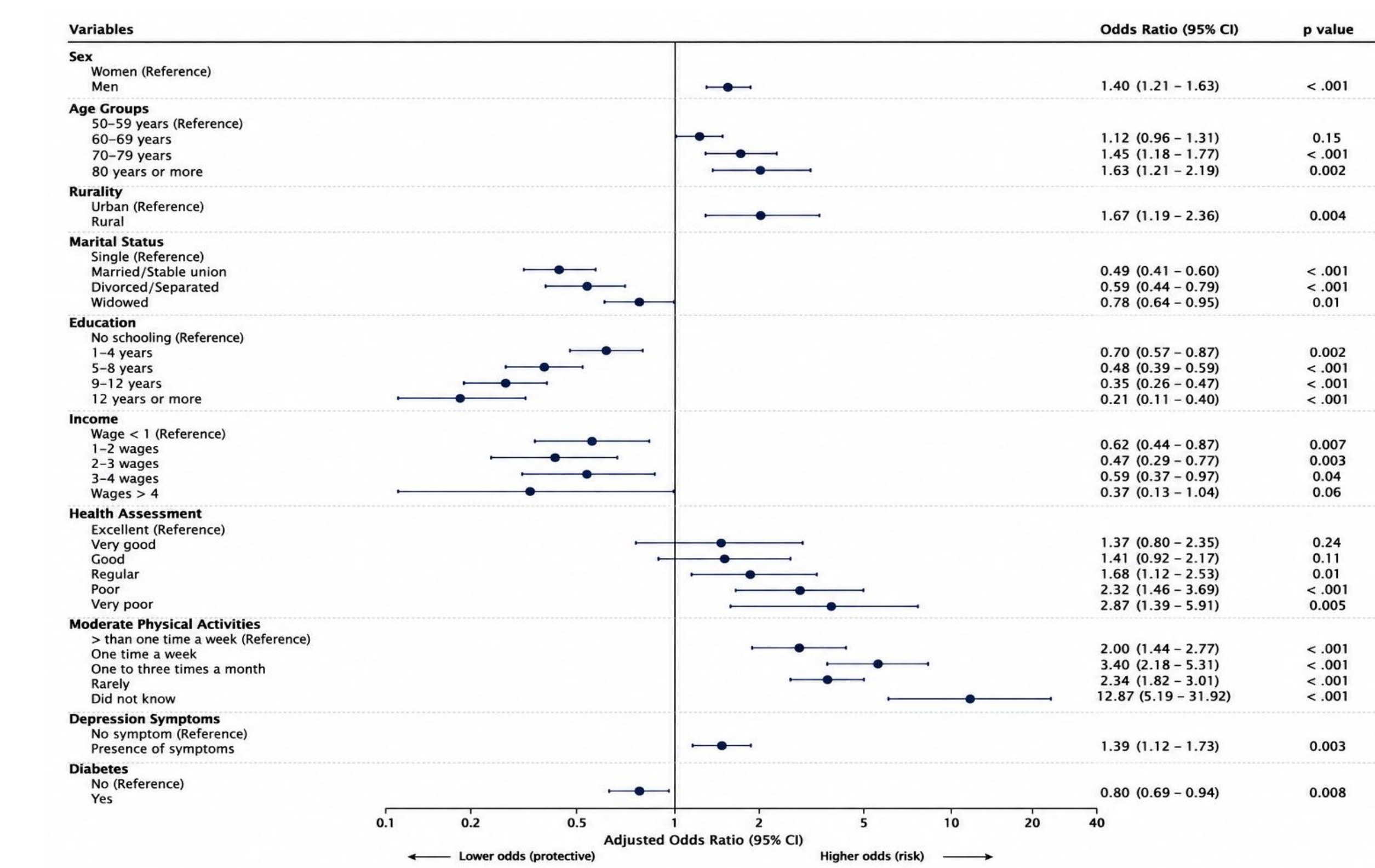
immediate and delayed recall, orientation, and verbal fluency

Statistical analysis:

Rao–Scott χ^2 tests

Hierarchical survey-weighted logistic regression models

RESULTS



Lower frequency of AADLs were more common among men, individuals aged 70 years and older, rural residents, and participants with lower education and income levels. Poor self-rated health, lower levels of physical activity, depressive symptoms.

These associations remained significant after adjustment for clinical conditions, basic functional limitations, and cognitive impairment, whereas cognitive impairment itself was not independently associated with AADL performance.

CONCLUSIONS

Nearly one-third of Brazilian older adults showed a lower frequency of AADL, which was associated with social disadvantage, poor health, physical inactivity, depressive symptoms, and functional limitations. AADL assessment may help identify vulnerable older adults and support healthy ageing interventions.

References

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