



Arthritis in California

Behavioral Risk Factor Surveillance System (BRFSS 2013)

California adults ≥ 18 with doctor-diagnosed arthritis

How many adults in California have arthritis?

- 5,953,000 (20%) adults have arthritis (down from 22% in 2011)
- 3,646,000 (25%) of adult women have arthritis (same % as 2011)
- 2,307,000 (16%) of adult men have arthritis (down from 18% in 2011)

By age:

- 753,000 (5%) of adults age 18-44 years have arthritis (down from 6% in 2011)
- 2,748,000 (28%) of adults age 45-64 years have arthritis (down from 29% in 2011)
- 1,304,000 (48%) of adults age 65-74 years have arthritis (same % as 2011)
- 1,148,000 (55%) of adults age 75 years or older have arthritis (up from 53% in 2011)

By race/ethnicity:

- 3,279,000 (27%) White adults have arthritis (down from 28% in 2011)
- 1,257,000 (12%) Hispanic adults have arthritis (down from 14% in 2011)
- 554,000 (33%) African American adults have arthritis (up from 26% in 2011)

By education:

- 1,102,000 (20%) adults with less than a high school education have arthritis (down from 22% in 2011)
- 1,278,000 (20%) adults with a high school education have arthritis (same % as 2011)
- 3,523,000 (21%) adults with more than a high school education have arthritis (down from 22% in 2011)

Health status, arthritis-attributable limitations, and joint pain among adults with arthritis:

- 1,993,000 (34%) of adults with arthritis report their general health status as fair or poor
- 2,613,000 (51%) of adults with arthritis have activity limitation due to their arthritis
- 1,280,000 (43%) of working-age (18-64 years old) adults with arthritis have work limitations due to their arthritis
- 963,000 (19%) of adults with arthritis have social participation restriction due to their arthritis
- 1,582,000 (31%) of adults with arthritis have severe joint pain due to their arthritis

Arthritis prevalence among adults with diabetes, heart disease, obesity, and risk factors:

- 1,276,000 (43%) of adults with diabetes *also* have arthritis
- 758,000 (52%) of adults with heart disease *also* have arthritis
- 3,210,000 (38%) of adults with high blood pressure *also* have arthritis
- 3,129,000 (37%) of adults with high cholesterol *also* have arthritis
- 2,074,000 (21%) of adults who are overweight *also* have arthritis
- 1,923,000 (29%) of adults who are obese *also* have arthritis
- 1,433,000 (25%) of adults who are inactive *also* have arthritis

Physical inactivity among adults with arthritis:

- 1,433,000 (27%) of adults with arthritis are insufficiently active or inactive
- 1,923,000 (34%) of adults with arthritis are obese

Management of arthritis:

- 2,011,000 (39%) of adults with arthritis cannot do everything or most things they want to do
- 1,601,000 (43%) of adults with arthritis were told by their doctor to lose weight for their arthritis
- 3,235,000 (63%) of adults with arthritis were told by their doctor to exercise for their arthritis
- 906,000 (18%) of adults with arthritis have attended a self-management course

Public Health Strategy: Evidence-Based Physical Activity and Self-Management Education Interventions

Physical Activity

Walk with Ease, a program of the Arthritis Foundation, is designed for people with and without arthritis that would like to begin a regular walking program. Walk with Ease is a multi-component program that includes walking, health education, stretching and strengthening exercises, and motivational strategies. Walk with Ease classes meet 3 times a week for 6 weeks and are led by a trained leader. The program is available as a group program or a self-directed option. **Program benefits include increased physical activity; increased walking distance and speed; decreased pain; and decreased depression** (*English*).

Arthritis Foundation Exercise Program is led by a trained leader and covers a variety of range-of-motion and endurance-building activities, relaxation techniques, and health education topics. Exercises can be modified to meet individual participant needs. Program classes meet 2 - 3 times per week. **Program benefits include improved functional ability; decreased depression; decreased pain; and increased confidence in one's ability to exercise** (*English*).

EnhanceFitness is a low-cost, highly adaptable exercise program offering levels that are challenging enough for active older adults and safe enough for the unfit or near frail. One-hour group classes are led by a trained leader and include stretching, balance, low-impact aerobics, and strength training. **Program benefits include increased strength, flexibility, and activity levels, as well as improved balance and elevated mood** (*English*).

Self-Management Education

Healthier Living and Tomando Control de su Salud (Chronic Disease Self-Management Program) are self-management education programs for people with a variety of chronic health conditions. Developed by Stanford University, workshops are facilitated by 2 trained leaders, held in community settings, and meet 2 ½ hours per week for 6 weeks. Highly interactive workshop sessions focus on building skills, sharing experiences, and support. **Program benefits include reduced pain, depression, fear, frustration; improved mobility and exercise; increased energy; and a boost in confidence to manage a chronic health condition** (*English and Spanish*).

Arthritis Self-Management Program is a self-management education program for people with different types of rheumatic diseases, such as osteoarthritis, rheumatoid arthritis, fibromyalgia, and lupus. Developed by Stanford University, workshops are facilitated by 2 trained leaders, held in community settings, and meet 2 ½ hours per week for 6 weeks. Workshop sessions are highly interactive and focus on building skills, sharing experiences, and support. **Program benefits include reduced pain, depression, fear, frustration; improved mobility; increased energy; and a boost in confidence to manage a chronic health condition** (*English and Spanish*).

The Diabetes Self-Management Education program is designed for people with type 2 diabetes. The workshop covers topics such as: techniques to deal with diabetes symptoms, fatigue, pain, hyper/hypoglycemia, stress, and emotional problems such as depression, anger, fear and frustration, appropriate exercise for maintaining and improving strength and endurance, healthy eating, appropriate use of medication, and working more effectively with health care professionals.

The Centers for Disease Control and Prevention-led National Diabetes Prevention Program is designed to bring to communities an evidence-based lifestyle change program for preventing type 2 diabetes. Research studies have shown that such classes can reduce the risk of type 2 diabetes by 58% in people at high risk for developing the disease. The lifestyle change program can help participants adopt the healthy habits needed to prevent type 2 diabetes. Trained lifestyle coaches lead a 1-year lifestyle change program that includes 16 core sessions and 6 post-core sessions to help participants improve their food choices, increase physical activity, and learn coping skills to maintain weight loss and healthy lifestyle changes.
