



### PERRIN

Pediatric Rehabilitation Research in the Netherlands

# Difficulty and Independence in Participation of Emerging Adults with Cerebral Palsy

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#### **Aim**

To describe how difficulty and independence in participation of individuals with cerebral palsy (CP) without intellectual disability develop from adolescence into their late twenties and early thirties.

Participant characteristics		
N (observations):	151 (379)	
Age-range (yrs):	16-34	•
GMFCS: level I	71%	П
level II level III	11% 7%	Ш
level IV Intellectual disability	11% none	IV



#### **Conclusions**

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Life-H domain

- Many individuals with CP aged 16-34 experience difficulty in participation
- In individuals with CP, difficulty in participation increases in the mid- and late twenties

#### **Methods**

- Three biyearly measurements and 13-year follow-up
- Life Habits questionnaire, assessing difficulty and assistance in participation
- Participation domains: housing, education & employment, interpersonal relationships, recreation, community life, and responsibilities
- Domain scores (6-8 items) range 0-10:
  - Scores >8.88: no difficulty (dashed line)
  - Scores >5.55: no human assistance (dotted line)
- Multilevel linear regression analyses on domains scores by age and level of Gross Motor Function Classification System (GMFCS)

16-18

19-22

23-26

Age group



Housing

27-34



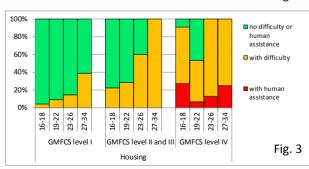
Fig. 2

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Fig. 1



Figures of examplary housing domain: Fig. 1 Mean domain scores over ages 16-18, 19-22, 23-26 and 27-34 by GMFCS levels. Fig. 2 Pictures of items in housing domain. Fig. 3 Proportions of individuals with difficulty and human assistance

#### Results

- On average, young adults with CP participated independently
- 41 to 95% experienced difficulty in any of the domains
- Difficulty in participation increased over age 23 in housing, education & employment, interpersonal relationships, recreation and community life
- For those in GMFCS III-IV, participation in recreation/community life increased before age 23

## **Clinical implications**

 Clinicians should systematically screen for difficulties in participation and offer timely support to improve development of optimal participation











