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### Background

Neighborhood environmental attributes are associated with physical frailty.

Most of them have examined only the direct association between environmental factors and physical frailty.

- Are there indirect impacts of environmental characteristics on physical frailty through individual factors?
- Are there differences in

### **Objectives**

This study aims to determine whether differences in neighborhood environmental characteristics affect the association between



previous studies

Some studies have compared differences in environmental factors on physical frailty between urban and rural areas **at the national level**. environmental factors
 on physical frailty at a smaller level?

individual factors and physical frailty in a Japanese local city.

### Methods

#### Data



**1,478** residents in a local city in Japan (age  $\geq$  45 year)



Original questionnaires and geographic open data were used.

#### **Physical Frailty**

Assessed using a modified version of Fried's Frailty phenotype criteria; **Frailty** : three or more of the five criteria **Non-frailty** : two or less of them

### Multilevel Logistic Regression analysis

Objective variable : physical Frailty Explanatory Variables :

Focusing on cross-level interactions



Interactions were included in the models for all combinations.

### Simple slope analysis

To identify patterns of their interactions, simple slope tests were analyzed when the interactions were statistically significant (p<0.05).

#### **Individual factors**

- socioeconomic characteristics (age, gender, etc.)
- lifestyle (alcohol consumption, smoking)
- social activities (employment, social activity\*)
  \*like volunteer work or sports activities

#### **Environmental factors**

Building density, bus stop density, intersection density, park area, and social cohesion

### Results

### Consideration

#### summary statistics

Participants' mean age was 70.9 years (SD=8.24), and female rate was 50.3%. The prevalence of physical frailty was 20.4%.

### **Multilevel Logistic Regression analysis**

Multilevel analysis showed statistically significant negative associations for two main effects about social participation and five interactions below:

Variables showing significant	Odds
associations (p<0.05)	Ratio
employment	0.78
social activity	0.78
employment x building density	0.83
employment x bus stop density	0.84
employment x intersection density	0.79
social activity x building density	0.84
social activity x intersection density	0.83

### HYPOTHESIS

The degree of **concentration of urban functions** influences the association between physical frailty and social participation.

Defined in two parts building density bus stop density are intersection density **intersection** density **intersection** density **intersection** density It is presumed that urban areas are more likely to be physically active because bases of social activities related to sports are nearby.

Frequency of social activity



## Conclusion

 This study showed the degree of concentration of urban functions can affect the way people

#### Simple slope analysis

#### Crosslevel Interaction Plot



social activity

Employment also showed same trend.

Employment and social activities reduced the risk of physical frailty, and these effects were **larger in urban areas**: with higher building density, bus stop density, and intersection density than in rural areas.

#### participate in society.

- The risk of physical frailty for those who participate in society differs between urban and rural areas within a municipality.
- It is important to promote social participation not only in urban areas but also in rural areas.

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