

Level of Participation Restriction in Occupational Activity among Prosthesis Users with Lower Limb Amputation

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Background

- Lower-limb amputation causes long-term physical and social challenges
- Although prosthetic devices improve physical functioning, many individuals continue to experience restrictions in meaningful occupational participation, particularly in low-resource settings such as Bangladesh.
- Evidence from low-resource settings is limited.

Justification

Literature shows that despite prosthetic rehabilitation, people with lower-limb amputation continue to experience restrictions in occupational participation. Persistent barriers related to mobility, environmental accessibility, social attitudes, economic factors, and prosthesis-related issues limit engagement in work, social life, and community participation.

Aim and Objectives

Aim: Identify participation restriction among lower-limb prosthesis users.

Objectives:

- Assess restriction in communication, mobility and self-care
- Assess restriction in getting along with people, life activities and social participation

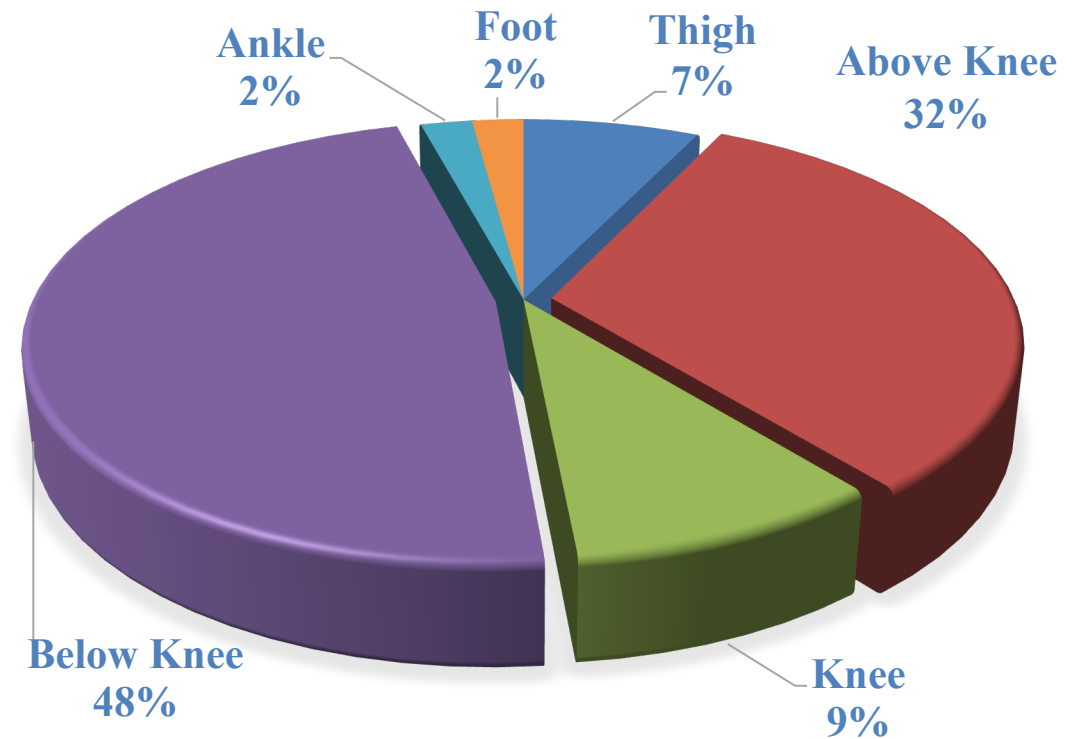
Methods

Study Design	A cross-sectional quantitative study conducted to assess participation restriction among lower-limb prosthesis users.
Participants	A total of 97 adults with lower-limb amputation who were regular users of prosthetic devices.
Sampling Method	Purposive sampling was used to recruit participants based on predefined inclusion criteria.
Assessment Tool	WHODAS 2.0 (Bangla validated version), used to measure functioning and participation across multiple life domains.
Data Analysis	Descriptive statistical analysis performed using SPSS software (Version 25).

Participant's Profile

- 87.6% male & 12.4% female (7:1); majority aged 18–43 years
- Road traffic accidents: 72.2%

LEVEL OF AMPUTATION



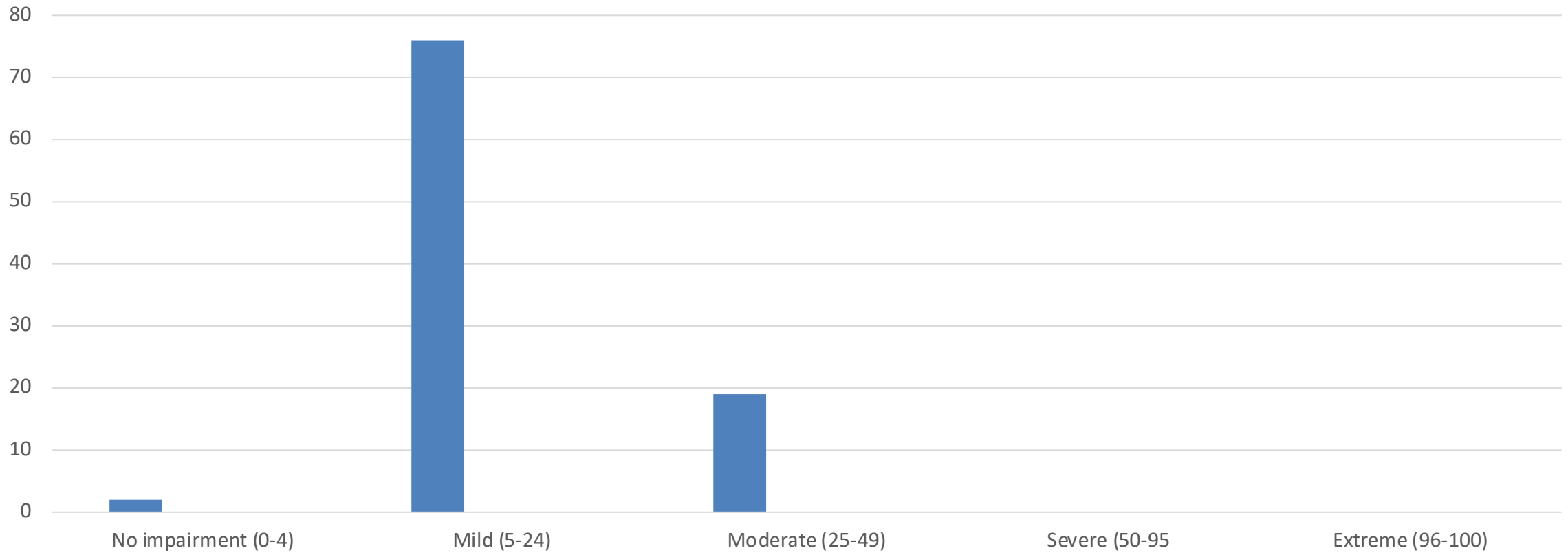
Statistical Outcomes

WHODAS Interpretation:

- **No impairment:** communication, getting-along with people.
- **Mild impairment:** getting around, life activities (household , professional/school activities)
- **Moderate impairment:** social participation
- Severe impairment
- Extreme impairment

Level of Impairment in ADL's

Level of Impairment



Key Finding: Social Participation

- Even after receiving a prosthetic limb, many participants struggled to take part in everyday social life.
- Joining community events, maintaining social roles, and participating in society remained difficult for most individuals, not because they lacked effort or ability, but due to environmental barriers, social attitudes, and limited opportunities for inclusion.

Practice Implication in Occupational Therapy

- Prosthetic rehabilitation worldwide remains largely function-focused
- Occupational therapists are often under-involved in participation and community reintegration
- Environmental barriers and social attitudes continue to limit participation
- This study supports expanding OT roles toward community-based, participation-centred practice

Conclusion

- This study shows that receiving a prosthesis does not automatically lead to full participation in daily life
- Participants could manage personal care, yet many remained restricted in work, social, and community roles
- Social participation emerged as the most challenging area, despite physical rehabilitation
- These findings reflect a gap between what rehabilitation provides and what people need to participate