



Healthy People with Disabilities



Healthy People is a national 10-year plan intended to encourage and guide federal, state, local, private, and community health promotion and wellness activities and policies to improve the health of Americans. The U.S. Department of Health and Human Services reformulates this plan every 10 years, in coordination with other public health agencies and partners. The plan for 2010 is available at www.health.gov/healthypeople. Two major *HP2010* goals are to increase quality and years of healthy life, and eliminate disparities. People with disabilities are included throughout *HP2010* as well as in Chapter 6 which contains 13 objectives:

- 6-1 Include in the core of *HP2010* surveillance tools a standard set of questions that identify people with disabilities.
- 6-2 Reduce the proportion of youth with disabilities who are reportedly sad, unhappy, or depressed.
- 6-3 Reduce the proportion of adults with disabilities who report feelings, such as sadness, unhappiness, or depression, that prevent them from being active.
- 6-4 Increase the proportion of adults with disabilities who participate in social activities.
- 6-5 Increase the proportion of adults with disabilities who report having sufficient emotional support.
- 6-6 Increase the proportion of adults with disabilities who report satisfaction with life.
- 6-7 Reduce the number of people with disabilities living in congregate care facilities, to achieve a permanent living arrangement that permits lifestyle choices e.g. caregiver.
- 6-8 Eliminate employment rate disparities between working-aged (18 to 62 years) adults with and without disabilities.
- 6-9 Increase the proportion of children and youth 6 to 21 years old with disabilities who spend at least 80% of their time in regular education programs.
- 6-10 Increase the proportion of people with disabilities who report having access to health, wellness, and treatment programs and facilities.
- 6-11 Reduce the proportion of people with disabilities who report not having the assistive devices and technology they need.
- 6-12 Reduce the proportion of people with disabilities who report encountering environmental barriers to participating in home, school, work, or community activities.
- 6-13 Increase the number of states and tribes that have public health surveillance and health promotion programs for people with disabilities and their caregivers.

People with Disabilities throughout HP2010

In addition to a new Chapter with 13 objectives, the importance of health promotion and disease prevention in the lives of people with disabilities are recognized throughout *Healthy People 2010*. Of the 467 *HP2010* objectives, **207 (sub)objectives include people with disabilities**. Of the 207 (sub)objectives:

- ✓ 58 provide first-time data on gaps or disparities,
- ✓ 30 provide data on health and well-being,
- ✓ 12 target state programs and data collection systems,
- ✓ 108 lack baseline data for people with disabilities, and
- ✓ 12 are among the tracking objectives for the national leading health indicators.

Gaps and disparities: Compared with people without disabilities, people with disabilities have:

- § Less health insurance coverage and use of the health-care system, e.g. Pap test, mammography, oral health exams
- § Higher rates of chronic conditions, e.g. diabetes, depression and sadness, elevated blood pressure and blood cholesterol, obesity, tooth loss, vision and hearing impairments
- § Lower rates of social participation, e.g. regular education classrooms, high school completion, employment, community-organized or employee-sponsored health events and social events
- § Lower rates of recommended health behaviors, e.g. cardiovascular, strengthening, and flexibility activities; no cigarette smoking

Health and well-being: People with disabilities are experiencing:

- Preventable secondary conditions, e.g. fractures, amputation, pressure sores in nursing homes
- High rates of emergency room visits and hospital stays for the primary disabling condition
- Early deaths from the primary disabling conditions, e.g. asthma
- Early deaths from co-morbidities, e.g. diabetes-related cardiovascular disease
- Low rates of formal patient education
- Low rates of treatment for mental illness

Health Gaps and Disparities: *Healthy People 2010 Data*

No	Objective	Reference Year	With Disability	Without Disability
1-1*	People w/disabilities under age 65 who have health insurance	1997	85%	86%
3-11b	Women w/disabilities ages 18+ who have received a Pap test in preceding 3 yrs.	1994	74%	78%
3-13	Women w/disabilities age 40+ who have received a mammogram in preceding 2 yrs.	1994	55%	61%
5-2	People w/disabilities who are newly diagnosed with diabetes (per 1,000)	1994-96	6.4	2.5
5-3	People w/disabilities who are new and previously diagnosed with diabetes	1997	87	28
5-4	Adults w/disabilities age >20 whose diabetes is diagnosed	1991-94	66%	69%
6-3	Adults w/disabilities who report sad feelings that interfere with activities	1997	28%	7%
6-4	Adults w/disabilities who participate in social activities	1997	95%	100%
6-5	Adults w/disabilities who report sufficient emotional support	1998	70%	79%
6-6	Adults w/disabilities who report satisfaction w/life	1998	87%	96%
6-8	Adults w/disabilities ages 21-64 who are employed	1994-95	52%	82%
6-9	Children w/disabilities who are included in regular education programs	1995-96	45%	100%
7-1	Youth w/disabilities who completed high school	1995	79%	86%
7-6	People w/disabilities who participate in employee-sponsored health promotion events	1994	56%	62%
7-12	People w/disabilities who participated last year in one organized health activity	1995	10%	12%
12-8	Adults w/disabilities who have high blood pressure	1991-94	32%	27%
12-13	Adults w/disabilities who have reduced mean total blood cholesterol	1991-94	208mg/dL	204mg/dL
12-14	Adults w/disabilities who have high total blood cholesterol	1991-94	24%	19%
19-1a	Women and men w/disabilities who are at a healthy weight	1991-94	32%	41%
19-1b	Women w/disabilities who are at a healthy weight	1991-94	35%	45%
19-1c	Men w/disabilities who are at a healthy weight	1991-94	30%	36%
19-2a*	Women and men w/disabilities who are obese	1991-94	30%	23%
19-2b	Women w/disabilities who are obese	1991-94	38%	25%
19-12	Women w/disabilities ages 12-49 who have iron deficiency	1991-94	4%	12%
21-4	Adults w/disabilities ages 65-74 who have all teeth extracted	1997	34%	22%
21-10	Children and adults who annually use the oral health care system	1996	40%	45%
22-1	Adults w/disability ages 18+ who engage in no leisure-time physical activity	1997	56%	36%
22-2a*	Adults w/disabilities ages 18+ who are physically activity 30 min 5 days/wk	1997	12%	16%
22-2b*	Adults w/disabilities age 18+ who are physically activity 20 min 3 days/wk	1997	23%	33%
22-3	Adults w/disabilities age 18+ who engage in vigorous activity 20+ min 3 days/wk	1997	13%	25%
22-4	Adults w/disabilities age 18+ who engage in strengthening exercises	1997	14%	20%
22-5	Adults w/disabilities age 18+ who are enhancing or maintain their flexibility	1995	29%	31%
27-1a*	Adult w/disabilities who smoke cigarettes	1997	33%	23%
28-4	Children and teens w/disabilities age ≤17 who also have blindness or vision loss	1997	92%	19%

Health and Well-Being of People with Disabilities: *Healthy People 2010 Data*

No.	Objective	Reference Year	Rates Among People with Disabilities
1-16	Adults w/disabilities in nursing homes who are diagnosed with pressure sores	1997	16 per 1,000
2-2	Adults w/chronic <i>joint symptoms</i> ages 18+ who have a limitation in activity	1997	27%
2-3	Adults w/chronic <i>joint symptoms</i> who have difficulty w/personal care	1997	2%
2-5	Working-aged adults w/ <i>arthritis</i> who are employed	1997	67%
2-10	Adults w/ <i>osteoporosis</i> ages 65+ who are hospitalized for vertebral fracture	1998	17.5 per 10,000
2-11	Adults w/ <i>chronic back conditions</i> ages 18+ who have an activity limitation	1997	32 per 1,000
4-2	People w/ <i>chronic kidney failure</i> who die from cardiovascular disease	1997	70 per 1,000
4-7	People w/ <i>diabetes</i> who experience kidney failure	1996	113 per million
5-10	People w/ <i>diabetes</i> who experience lower-extremity amputation	1990	11 per 1,000
6-7a	Adults w/disabilities who live in congregate care facilities	1997	93,362 adults
6-7b	Children w/disabilities who live in congregate care facilities	1997	24,300 children
18-4	People w/serious <i>mental illness</i> who are employed	1994	43%
18-9a	Adults w/serious <i>mental illness</i> ages 18-54 who are receiving treatment	1997	47%
18-9b*	Adults w/recognized <i>depression</i> ages 18+ who are receiving treatment	1997	23%
18-9c	Adults w/ <i>schizophrenia</i> ages 18+ who are receiving treatment	1984	60%
18-9d	Adults w/ <i>anxiety</i> disorder ages 18+ who are receiving treatment	1997	38%
24-1a	Children w/ <i>asthma</i> under age 5 whose death is due to asthma	1998	2.1 per million
24-1b	Children w/ <i>asthma</i> ages 5-14 whose death is due to asthma	1998	3.3 per million
24-1c	Youth and adults w/ <i>asthma</i> ages 15-34 whose death is due to asthma	1998	5.0 per million
24-1d	Adults w/ <i>asthma</i> ages 35-64 whose death is due to asthma	1998	17.8 per million
24-1e	Adults w/ <i>asthma</i> ages 65+ whose death is due to asthma	1998	86.3 per million
24-2a	Children w/ <i>asthma</i> under age 5 who are hospitalized due to asthma	1998	45.6 per 10,000
24-2b	Children and adults w/ <i>asthma</i> ages 5-64 who are hospitalized due to asthma	1998	12.5 per 10,000
24-2c	Adults w/ <i>asthma</i> ages 65+ who are hospitalized due to asthma	1998	17.7 per 10,000
24-3a	Children w/ <i>asthma</i> under age 5 who have ER visits	1995-97	150 per 10,000
24-3b	Children and adults w/ <i>asthma</i> ages 5-65 who have ER visits	1995-97	71 per 10,000
24-3c	Adults w/ <i>asthma</i> ages 65+ who have ER visits	1995-97	29.5 per 10,000
24-4	People w/ <i>asthma</i> whose activity is limited due to their condition	1994-96	20%
24-6	People w/ <i>asthma</i> who receive formal patient education	1998	8.4%
24-9	Adults w/ <i>breathing problems</i> whose activity is limited due to their condition	1997	2.2%

Healthy People with Disabilities in State Health Plans



The Centers for Disease Control and Prevention (CDC) works closely with state agencies to ensure the health and safety of the U.S. population. *State health plans help provide this assurance.* State health plans can be viewed at <http://www.healthypeople.gov/implementation/stateplans.htm>

State planning requires information about the health status of state residents. As of 2001, all 50 states can identify and assess the health status of people with disabilities in the core of their state's Behavioral Risk Factor Surveillance System (BRFSS). Information on people with disabilities will help states measure the impact of their programs or objectives. Below are examples of states whose plans contain objectives for people with disabilities. These seven states were identified during a July 2001 review of 14 state health plans that were available at the time.

Alaska	http://www.hss.state.ak.us/dph/deu/projects/healthy/healthy.html
District of Columbia	http://phf.org/HPtools/state/DC/DC-HP2010-Plan.pdf
Iowa	http://www.idph.state.ia.us/sa/h_ia2010/contents.htm
Kentucky	http://publichealth.state.ky.us/healthy_ky_2010.htm
North Carolina	http://www.healthycarolinians.org/healthobj2010.htm
Virginia	http://www.vdh.state.va.us/hp2010/index.html
West Virginia	http://www.wvdhhr.org/bph/hp2010/objective/contents.html

This state information was compiled by staff at the Centers for Disease Control and Prevention (CDC) with assistance from the Public Health Foundation.

- ❖ **For *Healthy People 2010 Chapter 6* information, please contact Lisa Sinclair, CDC, National Center on Birth Defects and Developmental Disabilities, 404/498-3019 or lsinclair@cdc.gov.**
- ❖ For state health plan information, please contact Stacy Baker at the Public Health Foundation, 202/898-5600 or sbaker@phf.org.
- ❖ For Healthy People 2010 initiative information, please contact the Department of Health and Human Services, Office on Disease Prevention and Health Promotion, 240/453-8258.

The Centers for Disease Control and Prevention (CDC) protects people's health and safety by preventing and controlling diseases and injuries; enhances health decisions by providing credible information on critical health issues; and promotes healthy living through strong partnerships with local, national, and international organizations