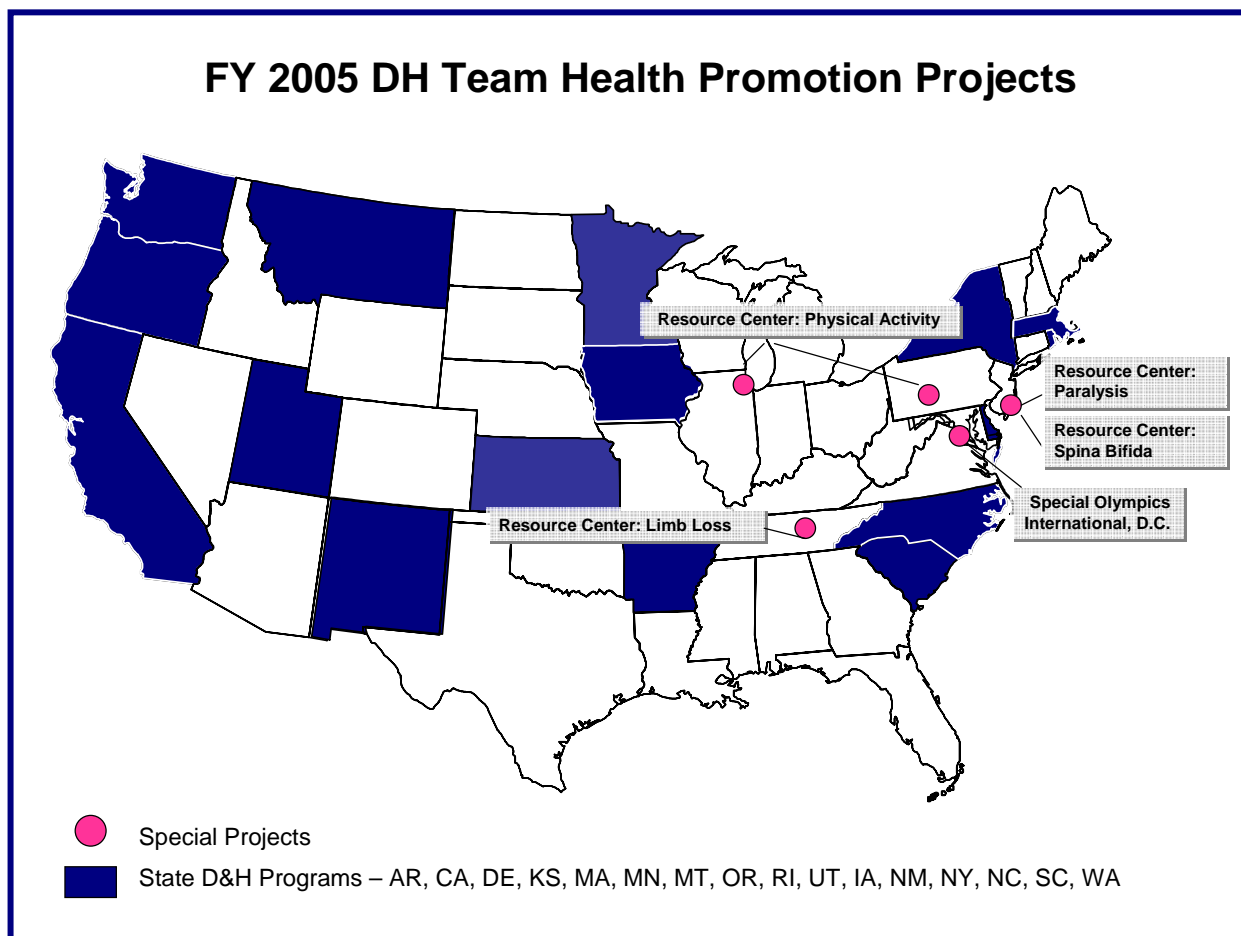


Disability and Health in 2005:

Promoting the Health and Well-Being of People with Disabilities



"The reality is that for too long we provided lesser care to people with disabilities. Today, we must redouble our efforts so that people with disabilities achieve full access to disease prevention and health promotion services."¹

*Richard H. Carmona
 United States Surgeon General, 2005*

Disabilities and Health

People with Disabilities in Public Health - According to the U.S. Census Bureau, there are nearly 50 million Americans who have some type of disability.²

Regardless of the disabling condition or the level of functioning, the Centers for Disease Control and Prevention (CDC) recognizes the importance of promoting the health and well-being of people with disabilities. CDC has identified several factors that influence health outcomes among people with disabilities, including the environment, behavioral practices, and access to routine preventive care services. The following data highlighting these factors are derived from the Healthy People 2010 (HP2010) initiative.³

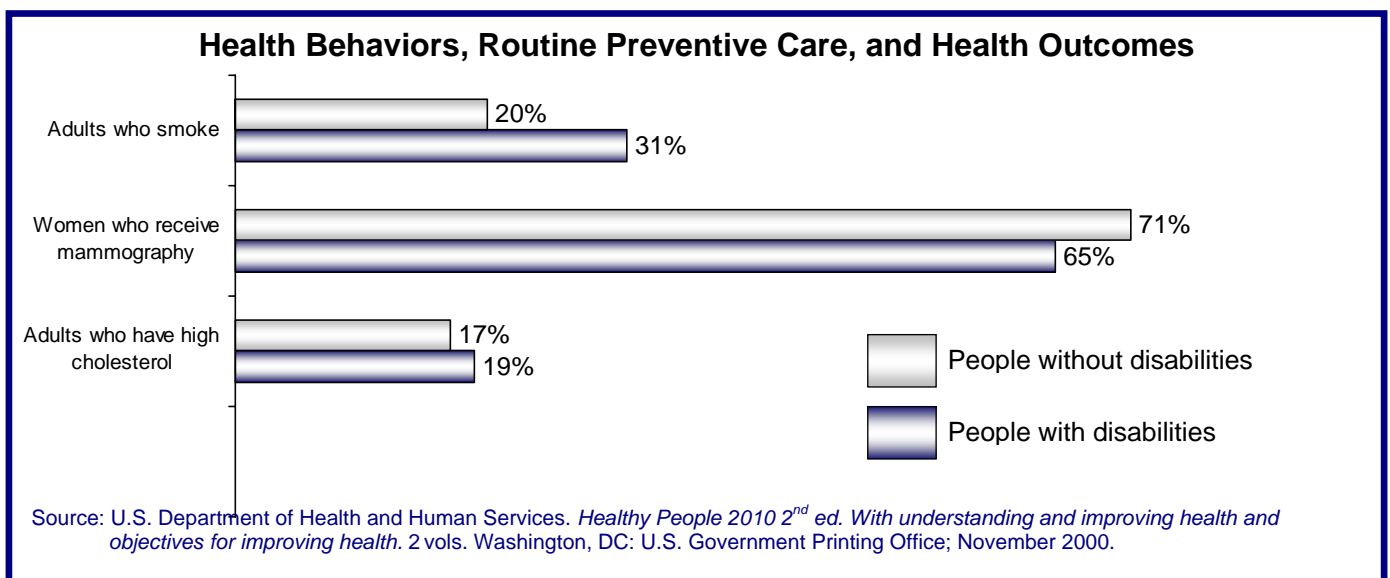
Environment - Participation in everyday living is an important aspect of health and well-being and environmental features can affect a person's ability to participate. In 2002, the percentage of adults with disabilities who reported existing barriers to participation in various environments is as follows -- **community** programs community (e.g., build places of **worship** (11%), **home** (10%), **work** (7.7%), and **school** (6.1%, reported by the parents of children with disabilities). In addition, 48% reported having access to local **health facilities** and wellness programs. Public health efforts are needed across the United States to create accessible environments in every aspect of life.

Health Behaviors - Health behaviors among people with disabilities have gone relatively undocumented

until recently. In 2003, the **smoking** rate among people with disabilities was 31% compared with 20% among people without disabilities. In 2003, the lack of **leisure physical activity** or sedentary behavior among adults with disabilities was 53% compared with 34% among people without disabilities. Public health efforts are needed to encourage healthy behaviors by people with disabilities.

Routine Preventive Care - Data also indicate that people with disabilities are not receiving enough routine preventive care. In 2003, among women 40 years of age and over, **mammography** services (in two prior years when the question was asked) were received by 65% among women with disabilities compared with 71% among women without disabilities. In 2002, **annual dental visits** were received by 37% among children and adults with disabilities compared with 46% among children and adults without disabilities. A Healthy People 2010 goal is to increase routine care.

Health Outcomes - Health behaviors and health services contribute to health status. In 2002, **high cholesterol** affected 19% of adults with disabilities compared with 17% of adults without disabilities; **high blood pressure** affected 37% of adults with disabilities compared with 29% of adults without disabilities; and **obesity** affected 42% of adults with disabilities compared with 28% of adults without disabilities.



CDC's Leadership in Disability and Health

How Are CDC And Its Partners Addressing Health Issues Among People With Disabilities?

The National Center on Birth Defects and Developmental Disabilities (NCBDDD) at CDC houses the Disability and Health Team that specifically focuses on promoting health and well-being among people with disabilities. In fiscal year 2005, the Disability and Health Teams' program budget was \$28.5 million. Several projects are highlighted below and others are described at www.cdc.gov/ncbddd/dh.

1. Improving Healthy Behaviors and Lifestyles

- **Health Surveillance:** The Disability and Health program allocates funds for national and state surveys to identify key health issues for people with disabilities e.g, the Behavioral Risk Factor Surveillance System (BRFSS). As result of this funding, all 50 states, the District of Columbia, Guam, Puerto Rico, and the Virgin Islands have available data that describe health behaviors and risk factors among state residents with disabilities. These data once analyzed can help better inform public health activities.
- **Healthy Lifestyles:** By August 2005, eight funded states (California, Delaware, Montana, New Jersey, New Mexico, New York, and North Carolina) adopted a tailored version of the *Living Well With a Disability* intervention. This intervention was originally developed by CDC grantees at the University of Montana to increase exercising, eating healthier, and managing one's own health care among people with disabilities. The goals are to improve health, have more productive doctor's visits, and fewer trips to the emergency room. To date, the cost benefits and savings are calculated from \$81,000 to \$240,000.
- **Healthy Lifestyles:** Grantees at the University of Kansas, Lawrence are testing an intervention, *Health Club*, designed to improve health and manage frequently occurring health conditions among adults with developmental disabilities who reside in supported living arrangements. Intervention

results are expected to be available at the end of calendar year 2005.

- **Healthy Habits:** Grantees at Family Voices, New Mexico, are promoting healthy habits among children with disabilities by exploring the use of health activity messages and practice guidelines among families who have children with disabilities. Grantees plan to share learned information at a future workshop.

Spotlights

With directed funds from Congress, the Disability and Health team supports the following special emphasis areas:

Intellectual Disability. The *Healthy Athletes* program enables Special Olympics to provide onsite health screenings at the games for athletes with intellectual disabilities to improve the use of preventive health care services. Screening data: <http://www.specialolympics.org/Special+Olympics+Public+Website/English/Search.htm>.

Spina Bifida: Several projects to improve the lives of people with spina bifida are under way through the Spina Bifida Association of America www.sbaa.org, and the Association of University Centers on Disability www.aucd.org.

Limb Loss. CDC-funded projects to improve the lives of people with limb loss are underway at John's Hopkins University and the Amputee Coalition of America, National Limb Loss Center. www.amputee-coalition.org/nllic_about.html

Paralysis. CDC-funded projects to specifically improve the lives of people with paralysis are underway through the Christopher and Dana Reeve Paralysis Resource Center www.paralysis.org, as well as at the National Center on Physical Activity www.ncpad.org and funded states whose outreach includes people with paralysis.

***Details are available on the websites ***

- **Weight Control Ways:** Grantees at Park Nicollet Institute, Minnesota, have implemented a physical activity and weight loss intervention tailored for people with arthritis. In 2005, the grantees demonstrated that 10% more people with arthritis were physically active and had healthy weight if they participated in the intervention compared with a group who didn't receive the intervention.
- **Physical Activity:** The National Center on Physical Activity and Disability (NCPAD) at the University of Illinois at Chicago currently focuses on promoting fitness among people with disabilities. The center provides practical suggestions to people who wish to pursue adapted recreational games, sports, and everyday activities. NCPAD also provides guidance for communities and programs who wish to make fitness and exercise facilities more accessible to all people. For more information about NCPAD, visit <http://www.ncpad.org>.
- **Physical Activity:** Slippery Rock University of Pennsylvania is currently funded to establish an information center on physical activity and healthy lifestyles for state residents with disabilities and their families. This university currently hosts a unique equestrian-facilitated therapy program for rehabilitation, as well as an undergraduate curriculum in adapted physical activity.

2. Improving Use of Routine Preventive Health Care Services.

- **Cancer Screening:** Disability and Health staff have teamed up with the CDC Office on Women's Health to increase the number of mammography centers around the United States that have accessible, adjustable equipment. The health objective is to increase health screening among women with disabilities.
www.cdc.gov/ncbddd/women/default.htm
- **Transition From Pediatric Care To Adult Health Care Services:** Boston University Medical Center staff are conducting a 12-week intervention, *Making Healthy Connections*, at sites in Massachusetts, Kansas, and Illinois to connect youth and

their parents with both individual mentors and group supports. The goal is to improve the transition from pediatric care to adult health care services for youth with disabilities.

- **Preventive Service Resource Kit:** The National Rehabilitation Hospital Center for Health and Disability Research in Washington, D.C. is developing a Preventive Service Resource Kit that will identify rates and schedules for recommended clinical preventive services for adults with physical disabilities.

Future Directions

The CDC will continue to advance efforts to improve health among people with disabilities across the lifespan and to reduce health disparities between people with disabilities and people without disabilities by supporting the development and implementation of health promotion projects and providing technical assistance to organizations that undertake efforts to:

- Conduct epidemiologic research to identify the top health issues affecting people with disabilities and remediable risk factors associated with those health issues.
- Tailor existing health interventions and strategies so that they are accessible to specific groups of people with disabilities (e.g., limitation in cognition, mobility, vision and hearing).

Full References:

1. U.S. Department of Health and Human Services. *The Surgeon General's Call To Action, To Improve the Health and Wellness of Persons With Disabilities*. U.S. Department of Health and Human Services, Office of the Surgeon General, 2005
2. U.S. Census Bureau. *Disability Status: 2000*. Census 2000 Brief, March 2003.
<http://www.census.gov/prod/2003pub/c2kbr-17.pdf>
3. CDC, National Center on Health Statistics. *Healthy People DATA2010*. Fall 2005 Updates.
<http://wonder.cdc.gov/DATA2010>

For more information about funded projects contact the Disabilities and Health Team at
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