



Ohio

Disability & Health Program

Ohio Disability and Health Program
2016 – 2021 Highlighted Projects

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THE OHIO STATE UNIVERSITY

NISONGER CENTER



**Department
of Health**



OHIO COLLEGES OF MEDICINE
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Ohio Impact: Evaluating Technical Assistance at the Local Level

Theme	# Categories	# Codes	# Counties	Representative Quotes
1. Disability is only mentioned in the context of community data and/or disability inclusion efforts that already exist	9	32	13	"The most frequent cause of physical disability is arthritis—a comorbidity of diabetes, heart disease, high cholesterol, high blood pressure and obesity."
Theme	# Categories	# Codes	# Counties	Representative Quotes
1. Utilizing tools, resources, experts, and community partners for inclusive community planning and interventions	7	164	20	"Individuals living with disability are not only invited to serve as coalition members, but are an integral part of our community-wide solution."
2. Creating accessible opportunities for active participation in the community	5	91	19	"The active living strategy in [community name] will be solely focused on contributing to the construction of an inclusive playground open to the entire community."
3. Prioritizing disability and inclusion in county work plan	1	35	15	"Disability inclusion will continue to be prioritized with the coalition and all physical activity strategies."
4. Inclusive access to fresh foods	5	24	9	"Working with the farmer's market to change Market Operating Procedures to improve access and relevance of the farmer's market for people with disabilities."
5. Inclusive and accessible communication	2	16	8	"Being mindful of accessibility and inclusivity extends to coalition engagement to ensure meetings are held in universally accessible spaces."
Total	20	330		

Ohio – Living Independent From Tobacco – *Train the Trainer*

Implementation	Outcomes	Lessons Learned/Reflection
Staff and professionals from disability and/or tobacco cessation organizations interested in implementing LIFT classes.	A total of 65 participants attending the Train the Trainer workshops over 5 years.	Need for additional content related to behavior change. The reasons people attend LIFT vary. Most people are not in the same stage of the quit/behavior change process.
Participants attended a 3 (virtual) or 5 (in-person) hour workshop – offered annually.	Significant improvement in participant knowledge on all four training components.	Adding the Stages of Change session helped the workshop participants to gain an understanding of how to approach the individuals who would be in their classes.

Ohio – Living Independent From Tobacco (LIFT) - *Intervention*

Implementation	Outcomes	Lessons Learned/Reflection
Adults who identified as having a disability; current tobacco users who wanted to quit.	30 PWD were recruited and retained through pre-test, intervention, and post-test. A significant amount of participants were lost between the post-test and 6-month follow up for reasons not related to the study.	Readiness to quit tobacco among participants was not measured. This information would help prepare the instructor on how to approach the class participants.
Participants completed pre, post, 4-week and 6 month evaluations.	After the intervention, mean CO (carbon monoxide) levels significantly decreased by nearly 50%.	Perhaps this could be incorporated in future LIFT classes. This ties in with the Stages of Change content that was added to the original LIFT Train the Trainer workshop.
During each class session, CO breath tests were conducted to verify self-reported tobacco use and abstinence.	All participants indicated that they had either reduced or had quit smoking after the LIFT program ended.	Some workshop participants have discussed the idea of a “Class Zero” to determine where each participant is in the quit process to know how and when to best engage with them.

Core Competencies on Disability for Healthcare Education

- *What do healthcare providers need to learn to provide quality healthcare to patients with disabilities?*
- Havercamp, S. M., Barnhart, W. R., Robinson, A. C., & Whalen Smith, C. N. (2021). What should we teach about disability? National consensus on disability competencies for health care education. *Disability and health journal*, 14(2), [100989](https://doi.org/10.1016/j.dh.2021.100989).
- <https://go.osu.edu/disabilitycompetencies>

Learning objectives for health education to establish **baseline disability competence** among interprofessional healthcare providers

