



Program Appendix





Summary of Objectives Featured

The programs highlighted in this presentation relate to 18 HP2020 objectives.

DH-2.1 State Disability and Health Promotion Programs

DH-4 Barriers to Primary Care

DH-8 Barriers to local health and wellness programs

DH-13 Participation in community activities

DH-17 Sufficient social and emotional support

DH-18 Psychological distress

HRQOL/WB -1.1 Physical Health

HRQOL/WB-1.2 Mental Health

PREP-11, 12, 13 Emergency Preparedness



Summary of Objectives Featured (Continued)

PA-1 No leisure-time physical activity

PA-2 Adults who meet current Federal guidelines for aerobic physical activity and for muscle-strengthening activity

PA-3 Adolescents who meet current Federal guidelines for aerobic physical activity and for muscle-strengthening activity

NWS-14 Fruits in the diet

NWS-15 Vegetables in the diet

NWS-16 Whole grains in the diet

NWS-17 Calories from solid fats and added sugars



Health Surveillance People with Disabilities

DH-1. In 2015, there were several federally-funded data sources that contained the six standard disability identifiers.

U.S. Department of Health and Human Services

- Health Information National Trends Survey
- Medical Expenditure Panel Survey
- National Health and Aging Trends Study
- National Health and Nutrition Examination Survey
- National Health Interview Survey
- National HIV Behavioral Surveillance Survey
- National Survey of Children's Health
- National Survey of Family Growth



Health Surveillance People with Disabilities (Continued)

U.S. Census Bureau

- American Community Survey
- Survey of Income and Program Participation

U.S. Department of Labor

- Current Population Survey

U.S. Department of Housing and Urban Development

- American Housing Survey

U.S. Department of Justice

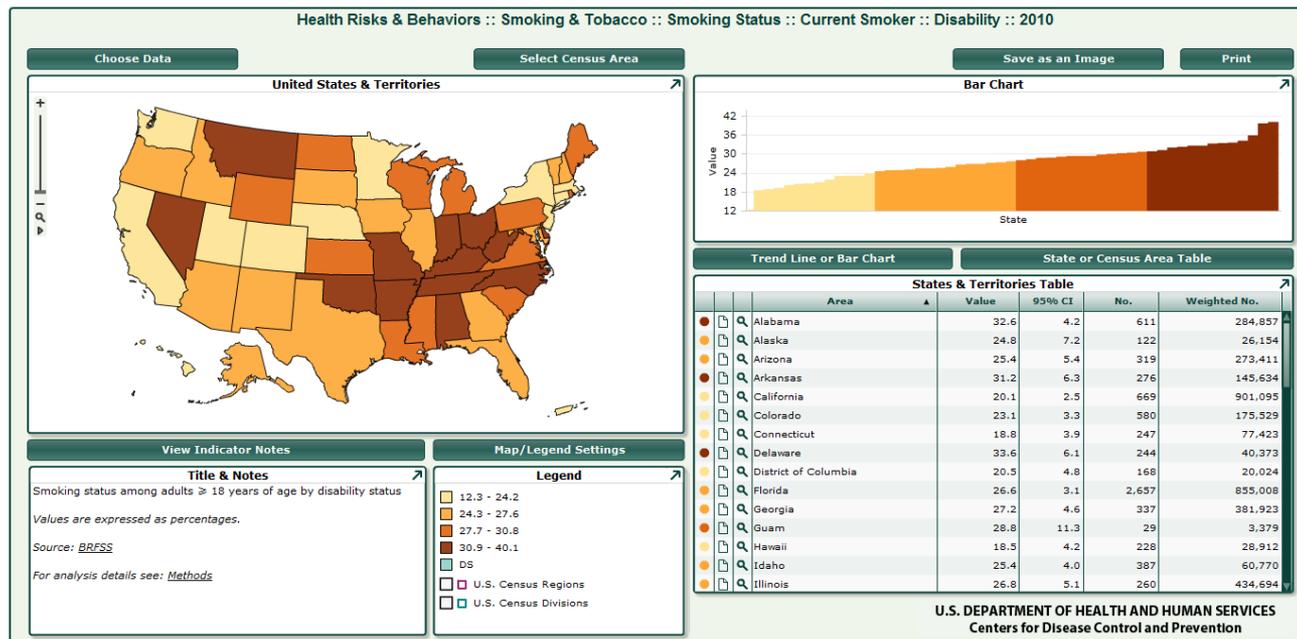
- National Crime Victimization Survey

DH-1 Population-based data systems used to monitor Healthy People 2020 objectives that include, in their core, a standardized set of questions that identify people with disabilities.

State-Level Health Surveillance



<http://dhds.cdc.gov>





Disability Inclusion

CDC Grand Rounds: Public Health Practices to Include Persons with Disabilities

Weekly

August 30, 2013 / 62(34);697-701



This is another in a series of occasional MMWR reports titled CDC Grand Rounds. These reports are based on grand rounds presentations at CDC on high-profile issues in public health science, practice, and policy. Information about CDC Grand Rounds is available at <http://www.cdc.gov/about/grand-rounds>.

"Persons with disabilities" is a vague designation that might not always be understood (1,2). Persons with disabilities are persons with limitations in hearing, vision, mobility, or cognition, or with emotional or behavioral disorders. What they have in common is that they all experience a significant limitation in function that can make it harder to engage in some activity of daily living without accommodations or supports (3-5).

According to the World Health Organization, disability has three dimensions: 1) impairment in body function or structure, such as loss of a limb or loss of vision; 2) limitation in activity, such as difficulty seeing, hearing, walking, or problem solving; and 3) restriction in participating in normal daily activities, such as preparing a meal or driving a car. Any of these impairments, limitations, or restrictions is a disability if it is a result of a health condition in interaction with one's environment (6).

These limitations all relate to health conditions experienced within the environment in which persons live, as well as to other personal factors. Environmental barriers can be physical barriers, such as stairs; communication barriers, such as websites that can't be read by screen readers; discriminatory policies, such as restrictions on participation in physical activity programs; or societal attitudes, such as presumptions that persons with disabilities cannot be productive employees. Consequently, disability is not a health condition itself, but is the limitation viewed in the context of the community and society in which the person lives. Societal and environmental accommodations are therefore critical if persons with disabilities are to participate in public health programs that prevent disease and promote health (7).



Women with Disabilities



TOOLBOX: Improving the Receipt of Clinical Preventive Services among Women with Disabilities

DH-4 Barriers to primary care

Matern Child Health J
DOI 10.1007/s10995-014-1627-4

NOTES FROM THE FIELD

Tools for Improving Clinical Preventive Services Receipt Among Women with Disabilities of Childbearing Ages and Beyond

Lisa B. Sinclair · Kate E. Taft · Michelle L. Sloan ·
Allisa C. Stevens · Gloria L. Krahn

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Abstract Efforts to improve clinical preventive services (CPS) receipt among women with disabilities are poorly understood and not widely disseminated. The reported results represent a 2-year, Centers for Disease Control and Prevention and Association of Maternal and Child Health Programs partnership to develop a central resource for existing tools that are of potential use to maternal and child health practitioners who work with women with disabilities. Steps included contacting experts in the fields of disability and women's health, searching the Internet to locate examples of existing tools that may facilitate CPS receipt, convening key stakeholders from state and community-based programs to determine their potential use of the tools, and developing an online Toolbox. Nine examples of existing tools were located. The tools focused on facilitating use of the CPS guidelines, monitoring CPS receipt among women with disabilities, improving the

accessibility of communities and local transportation, and training clinicians and women with disabilities. Stakeholders affirmed the relevance of these tools to their work and encouraged developing a Toolbox. The Toolbox, launched in May 2013, provides information and links to existing tools and accepts feedback and proposals for additional tools. This Toolbox offers central access to existing tools. Maternal and child health stakeholders and other service providers can better locate, adopt and implement existing tools to facilitate CPS receipt among adolescent girls with disabilities who are transitioning into adult care as well as women with disabilities of childbearing ages and beyond.

Keywords Clinical preventive services · Healthcare tools · Women's health · Women with disabilities

Introduction

The U.S. Department of Health and Human Services, through various offices, works to address health disparities through a network of partners including maternal and child health programs [1]. At the same time, the maternal and child health field is expanding its focus on health disparities to include women with disabilities of childbearing ages [2–4]. According to the U.S. Census, women with disabilities represent 23.2 % (28.8 million) of women aged 15 years or older and 11.2 % (6.5 million) of women who are of childbearing years, aged 15–44 [5]. Women with disabilities represent an underserved vulnerable population [6] who experience significant health disparities such as cardiovascular disease, diabetes, partner violence, mental distress, and certain types of cancer [7, 8]. An important pathway to reducing health disparities is improving the

L.B. Sinclair (✉) · M.L. Sloan · A.C. Stevens · G.L. Krahn
Disability and Health Branch, Division of Human Development and Disability, National Center on Birth Defects and Developmental Disabilities, Centers for Disease Control and Prevention, U.S. Department of Health and Human Services, 1600 Clifton Rd, E-88, Atlanta, GA 30333, USA
e-mail: lsinclair@cdc.gov

M.L. Sloan
e-mail: mjpl@cdc.gov

A.C. Stevens
e-mail: stax7@cdc.gov

G.L. Krahn
e-mail: glkrahn@live.com

K.E. Taft
Children and Youth with Special Health Care Needs,
Association of Maternal and Child Health Programs, 2080 M
Street NW, Washington 20036, DC, USA
e-mail: ktaft@amchp.org

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Toolbox: Toolbox for Improving Clinical Preventive Services Among Women with Disabilities





Coming Soon! A CDC Disability and Health online catalog of emergency Preparedness materials – Inclusion of People with Disabilities

- Purpose: to support emergency preparedness and response activities for people with disabilities.
- Includes: materials for surveillance, communication and training, and assessment of emergency plans, shelters, and policies.
- For: people with disabilities, public health professionals, emergency managers, community organizations.



Launching fall 2016!!!



Applied and Population Science Living Well with a Disability

Living Well with a Disability

A Health Promotion and Wellness Program for Adults with Disabilities



Curriculum Objectives

- Identify and set meaningful quality of life goals
- Teach skills in problem identification and solving
- Teach cognitive-behavioral skills and peer support
- Provides preventive strategies to help manage depression
- Teaches importance of clear communication
- Provides resources for identifying and using health information
- Provides guidelines for increasing physical activity
- Provides information on improving nutrition and eating habits
- Offers resources for self and system advocacy
- Provides strategies for monitoring and evaluating progress

**DH-4 Barriers to Primary Care
HRQOL-1.1 and 1.2 Physical and Mental Health**