Including and Engaging People with Disabilities

A Guide for Local Health Departments

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What is the public health problem?

- People with disabilities make up at least 20% of the U.S. population\textsuperscript{1}
  - Expected to increase with advances in medicine, improving survival rates, and an aging population
  - Nearly everyone will experience disability at some point

- People with disabilities are a health inequity population\textsuperscript{2,3}
  - Disproportionately experience adverse health outcomes that are:
    1. Avoidable and preventable
    2. Unjust and unfair
    3. Based in a history of exclusion, discrimination, and disadvantage
Bar graph demonstrating that people with disabilities are more likely to be unemployed, become victims of violent crime, develop cardiovascular disease, become obese, smoke, and be physically inactive, and are less likely to receive medical care.
What is the public health problem?

- LHDs face major barriers to including people with disabilities
  - Low awareness of health inequities and disability inclusion strategies
  - Competing priorities
  - Funding, staff, and time constraints

Pie chart demonstrating that only 10.7% of LHDs consider people with disabilities to be a health inequity population.
Purpose

- Improve access to the information, tools, and strategies LHDs need to improve disability inclusion

- Encourage LHDs, public health professionals, and students to:
  1. Become aware of the needs of people with disabilities who live in the communities they serve
  2. Use the recommendations and strategies provided in this guide
  3. Include and engage people with disabilities in local public health efforts
Methods

- Literature search
  - Identified promising practices and recommendations for disability inclusion from non-profit organizations, government agencies, businesses, and educational institutions

- Experience as a 2015-2016 Health and Disability Fellow at the National Association of County & City Health Officials (NACCHO)

- Making recommendations from other sectors relevant to LHDs was a priority
  - Much of the work on disability inclusion has been conducted outside the field of public health
What is disability?

- Disabilities may involve difficulty hearing, seeing, moving, communicating, or thinking and learning\(^1\)

- Disability results from a mismatch between a person’s health condition and a person’s environment\(^6\)
  - Barriers in the environment can create more disability than the health condition would by itself\(^6\)
  - Physical barriers, inaccessible communication, negative attitudes, stigma, etc.
What is disability?

Some disabilities are:
- Readily apparent (e.g., a person who uses a wheelchair or a cane)
- Not immediately noticeable (e.g., mental illness, rheumatoid arthritis)

Disabilities can also be:
- Temporary (e.g., broken bone, chronic illness that goes into remission)
- Lifelong (e.g., Down syndrome, congenital blindness)

A woman does laps in a racing wheelchair

Photo credit: EJ Hersom, 2015
What is disability inclusion?

- To address health inequities, LHDs should include people with disabilities in all public health efforts$^{1,7}$

- Disability inclusion means working to ensure that people with disabilities can participate in and benefit from public health activities to the same extent as people who do not have disabilities$^7$

Photo credit: Mike Coonan Photography

A boy who uses crutches runs the bases during a baseball game
Disability inclusion can help LHDs...

- Improve the health of the general population
- Fulfill the ten essential public health services and meet professional competencies
- Work towards accreditation (meet PHAB Standards)
- Comply with local, state, and national laws
  - The Americans with Disabilities Act (ADA) requires LHDs to make their programs, services, and activities fully accessible to people with disabilities
- Design policies, programs, and services that are more effective for everyone
<table>
<thead>
<tr>
<th>Section B: Outreach</th>
<th>Not at all</th>
<th>To some extent</th>
<th>To a great extent</th>
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<tbody>
<tr>
<td>1. Are you aware of organizations that serve and represent people with disabilities in your community?</td>
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<tr>
<td>2. Are you aware of the services disability organizations provide in your community?</td>
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<td>3. Do you subscribe to disability organizations’ newsletters to stay up-to-date on the latest information, news, and tools?</td>
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<td>4. Have you identified which of your programs and activities could benefit from collaboration with disability organizations?</td>
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<td>5. Does your LHD actively partner and collaborate with disability organizations your community?</td>
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<td>6. Does your LHD participate in disability organizations’ community events, meetings, and projects?</td>
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<td>7. Are disability organizations consulted when you develop outreach, engagement, and marketing plans?</td>
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<td>8. Is information about accessibility, accommodations, and disability inclusion provided in your general marketing and outreach efforts?</td>
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<tr>
<td>9. Is information about your general services, activities, and programs shared using disability-specific media (e.g., disability organization newsletters, social media, etc.)?</td>
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<td>10. Is your LHD a disability ally? Do you promote disability inclusion and educate your community about the importance of full participation for people with disabilities in all aspects of society?</td>
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Self-assessment tool

- Self-assessment items are ordered so that:
  - Lowest numbered items (e.g., “1”) reflect initial steps
  - Highest numbered items (e.g., “6”) reflect the most inclusive practices

- LHDs can use this self-assessment tool to:
  - Assess current level of disability inclusion and engagement
  - Plan for improving disability inclusion over time
  - Raise awareness and advocate for accessibility improvements (e.g., some LHDs have websites or facilities that are controlled by the city or county government)

- To request a copy of this tool, see contact information (slide 34)
Recommendations

- Can be applied to diverse public health activities (e.g., emergency preparedness and response, communicable disease, health promotion)

- Designed to help LHDs make practical, sustainable, and low-cost improvements over time

- For the biggest impact, start with improving communication accessibility and reaching out to local disability organizations
Communication

- Consult people with disabilities and disability organizations
- Find out what resources are available in the community
- Practice using people-first language
- Practice multimodal communication
- If unsure what to do—ask
  - People with disabilities know their individual needs and preferences best

A young girl who is partially blind uses a Braille typewriter

Photo credit: Centers for Disease Control and Prevention (CDC) and Florida Office of Disability & Health (FODH)
People-First Language

- Most neutral and respectful choice for public health professionals
- Refer first to the person, then to the disability
  - Only refer to disability if relevant
- Examples:

<table>
<thead>
<tr>
<th>Use:</th>
<th>Avoid:</th>
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<tbody>
<tr>
<td>Person with a disability</td>
<td>Disabled person</td>
</tr>
<tr>
<td>Person who has schizophrenia</td>
<td>Schizophrenic</td>
</tr>
<tr>
<td>Person who uses a wheelchair</td>
<td>Wheelchair-bound person</td>
</tr>
<tr>
<td>Person without a disability</td>
<td>Normal or able-bodied person</td>
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Outreach and engagement

People with disabilities have valuable skills, perspectives, and experiences to contribute to public health efforts.

A woman and a man who both use wheelchairs collaborate during an office meeting.

Photo credit: CDC/Amanda Mills, 2011
Outreach and Engagement

- Practice accessible communication
- Get involved
  - Partner with community-based organizations that serve and represent people with disabilities
- Market the health department’s commitment to serving people with disabilities
- Think about the entire experience a person with a disability will have from the moment s/he decides to use health department services throughout use of those services
Outreach and Engagement

- Employ people with disabilities and provide them with adequate accommodations and support
- Consider designating a specific point person among LHD staff who can answer questions and handle concerns people with disabilities may have
- Become a disability ally
  - Advocate on behalf of people with disabilities
  - Promote disability inclusion throughout the community
  - Share lessons learned and strategies that work
Physical Accessibility

- Become familiar with physical accessibility guidelines and requirements
- Regularly assess physical accessibility of facilities, including emergency shelter and event spaces
- Create an action plan to improve physical accessibility and remove barriers when resources become available

Photo: A man who uses a wheelchair presses an automatic door button
Photo credit: CDC/Amanda Mills, 2011
Policies

- Create policies that reflect the health department’s commitment to serving people with disabilities
- Include disability in non-discrimination, diversity, and equal opportunity policies
- Share policies in accessible formats
Organizational Culture

“An inclusive service environment is one that proactively seeks to include persons with disabilities, ensures that everyone can make a valued contribution, and weaves access and accommodations into all aspects of the program.”

Photo credit: CDC/FODH

A woman’s hand moves over a Braille flowchart
Organizational Culture

- Identify a health and disability champion
- Demonstrate leadership commitment to disability inclusion
- Be sensitive to the personal nature of disability and disability accommodations
- Ensure that people with disabilities are treated respectfully as capable people, as peers, and as equals
- Make sure that people with disabilities are represented at all levels
- Celebrate success
“In an inclusive service environment, persons with disabilities are welcomed and are valued for their contributions as individuals. The presence of a disability is not seen as a detriment. Rather, disability is valued as part of the range of diversity that exists in the human condition.”
Employment

“One of the best ways to tap into the disability market is to ensure it is represented in your workforce. Employees with disabilities can help businesses understand and meet the needs of this important and expanding customer base...people with disabilities can provide your business with the flexible, innovative thinking required for a competitive edge in the 21st century.”

A woman in an office uses a refreshable Braille device to access a web page
Employment

- Create policies and procedures for providing employee accommodations
- Encourage people who have disabilities to apply for open staff positions
- Ask employees who have disabilities for feedback
- Consider making disability inclusion part of student internship and field placement opportunities
  - Ask students to take on specific tasks that will help the health department become more inclusive
Training

- Regularly offer disability inclusion training to staff
  - Disability awareness
  - Effective communication
  - Program accommodation, etc.

- Ask people with disabilities to lead or participate in staff training
Costs and Budgeting

- Consult with disability organizations and service providers to develop cost estimates
  - More than half of all accommodations cost nothing to provide

- Budget for the costs of providing accommodations and improving disability inclusion

- Keep track of costs for future planning
Program Access and Accommodations

- Plan programs with accessibility and accommodations in mind
- Create accommodation procedures
- Share the LHD’s commitment to providing accommodations
- Confidentially track the number and types of accommodations requested for future planning

A service dog checks in with a woman who is swimming in a pool
Assessment, Planning, Implementation, and Evaluation

- Use data to understand the demographics and health needs of people with disabilities
- Involve people with disabilities and disability organizations in planning
- Ask people who have disabilities and disability organizations for input on program implementation
Assessment, Planning, Implementation, and Evaluation

- Involve disability organizations and people with disabilities in evaluating:
  - General LHD programs and activities
  - Disability inclusion and accessibility efforts
- Incorporate disability inclusion into employee evaluations
- Celebrate success and plan for the future
Lessons Learned

Share successful strategies, innovative approaches, and lessons learned

A woman who uses a wheelchair laughs, sitting by a small waterfall

Photo credit: Colorado Medical Home Initiative/FODH
Lessons Learned

- Share successful strategies, innovative approaches, and lessons learned
- By sharing what they learn as they work to improve disability inclusion, LHDs can:
  - Help health departments of all sizes become more inclusive
  - Improve health outcomes for people with disabilities nationwide
  - Become leaders in disability and public health

The All-Marine wheelchair basketball team hugs, having won the gold medal

Photo credit: Achilles Tsantarliotis, 2010
Questions or comments?
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References


References


Additional resources

- NACCHO Health and Disability Toolkit
  - http://www.naccho.org/resources/toolbox#
  - http://archived.naccho.org/toolbox/

- ADA Best Practices Toolkit for State and Local Governments
  - http://www.ada.gov/pcatoolkit/toolkitmain.htm

- Public Health is for Everyone: An Inclusive Planning Toolkit for Public Health Professionals
  - http://www.phetoolkit.org
Images

- All images included in this presentation are in the public domain and can be accessed using the following websites:
  - FODH Inclusive Image Library
  - Defense Video & Imagery Distribution System
    - [https://www.dvidshub.net](https://www.dvidshub.net)
  - CDC Public Health Image Library
    - [http://phil.cdc.gov/phil/home.asp](http://phil.cdc.gov/phil/home.asp)