**Success Story:**

**Connecting with Service Providers to Reach Kansans with IDD**

**Summary**

In addition to experiencing health disparities, people with disabilities experience barriers to health promotion programs that deter them from participating. At a well-attended statewide conference of service providers for people with intellectual and developmental disabilities (IDD), Kansas Disability and Health Program staff gave three presentations that:

- Educated about our program and its goals;
- Built relationships with attendees;
- Gave us a firsthand view of the challenges and opportunities in promoting health for persons with IDD from a service provider perspective.

**Challenge**

Approximately 20.5% of Kansas adults live with a disability, according to data from the Kansas Behavioral Risk Factor Surveillance System (BRFSS). These data also find that members of this group consume fewer fruits and vegetables on a daily basis, and are more likely to be obese and less likely to engage in physical activity.

However, typical health promotion programs often present physical, communication, social and/or attitudinal barriers that deter people with disabilities from participating. As programs are adapted and developed to meet their needs, efforts must be made to do outreach to people with disabilities.

We must assure them that they can manage and improve their own health and that programs are available to support this goal.

**Solution**

To facilitate outreach to Kansans with intellectual/developmental disabilities (IDD), Kansas Disability and Health Program staff delivered three presentations at the annual statewide InterHab conference in October 2016. InterHab is the state association for providers of community services to Kansans.
with IDD, and its conference is attended by service providers for persons with IDD, managers and direct service staff.

We conducted three sessions: (a) an introduction and overview of the State of Kansas Disability and Health Program; (b) a session on polypharmacy for people with IDD, focused on how to prevent over-medication and its side effects; and (c) a roundtable session on health promotion for people with IDD. The last two sessions were presented at the request of Interhab conference organizers, and for the polypharmacy session, we recruited two co-presenters: a local pharmacist and a KU doctoral student with an MSW and experience in working with people with IDD.

Results

All three sessions were well attended by a variety of personnel – managers of service organizations, direct service staff, and nurses employed by community DD organizations. There was much interest in learning how to promote the health of this population. All the sessions involved good discussions with the attendees.

We learned in detail about the barriers to promoting health as perceived by staff members. For example, people with IDD drinking large amounts of soft drinks was articulated as a major problem by staff in several organizations. Staff at one center described successful efforts to remove unhealthy drinks from the vending machine at a day program, but then observed participants going to the nearby convenience store to buy the drinks. This raised a discussion of regulations regarding a participant’s right to self-determination, which staff feel sometimes obstruct their efforts to promote health.

Another center described several recent suicide attempts by participants dually diagnosed with IDD and psychiatric disabilities. The one-on-one vigilance required after these incidents has prevented them from pursuing health promotion programs for other participants.

On the other hand, we also heard of some successes, as staff from another center described regular “window shopping trips” to get participants out walking, and another where participants regularly visit a local gym. Additionally, a center director expressed a need for information about explaining the importance of mammography to women with IDD; we followed up with the director after the conference.

Sustaining Success

The knowledge that was shared and relationship building that took place at the conference will facilitate our efforts to promote the health of Kansans with IDD. This experience is also augmenting knowledge gained from members of our Consumer Advisory Board.