



The Kansas Disability and Health Program: Addressing Health Promotion and Physical Activity for Kansans with Disabilities

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Background

Kansans with disabilities experience significant barriers to health promotion and physical activity programs and, not surprisingly, also experience substantial health disparities. In 2015, only 12.8 percent met physical activity guidelines, though most reported wanting to be more physically active.

Similarly, 73% of Kansans with a disability are overweight or obese. Overall, Kansans with disabilities are three times more likely to have diabetes and five times more likely to have heart disease than are Kansans without disabilities.

These figures underscore the strong need to improve accessibility to health promotion and physical activity programs for people with disabilities in Kansas. In addition, health care professionals must understand that people with disabilities can and should participate in physical activity as much as people without disabilities. Yet, research has shown that physicians are less likely to ask patients with disabilities about their exercise and smoking habits. In addition, many physician offices do not have accessible scales for wheelchair users to assess their weight.

The Kansas Disability and Health Program (DHP) is a five-year CDC-funded initiative that will work to improve physical activity access, opportunities, and supports for Kansans with disabilities, especially those with mobility impairments and/or intellectual or developmental disabilities (IDD). In addition, the DHP will provide outreach to medical professionals about working with patients who have disabilities and making their services and equipment more accessible.

Project Purpose

- Improve physical activity access, opportunities, and supports
- Improve knowledge of oral health and oral health system capacity
- Improve knowledge of and access to good nutrition

Target Populations

- The Kansas program defines people with mobility limitations very broadly to include **individuals of any age who have any physical characteristic or condition that limits their mobility**.
- Likewise, for the purposes of this program, intellectual disabilities include **all cognitive, developmental and intellectual conditions** that affect an individual's ability to process information.

Kansas at Baseline: Nutrition

- **More than 80% of Kansans with disabilities** do not consume the recommended five servings of fruits and vegetables per day.*
- In a statewide survey we conducted, **76% of people with IDD** and **74% of people with physical disabilities** in Kansas reported being overweight or obese, compared to 63% of the general population.**
- **More than one-third of Kansans with disabilities** were worried or stressed about having enough money to buy nutritious meals.*

*Kansas BRFSS

**Hall, J.P., Kurth, N.K. & Hunt, S. (2013). Employment as a health determinant for working-age, dually-eligible people with disabilities. *Disability and Health Journal*, 6(2), 100-106. PMID:23507160

Kansas at Baseline: Physical Activity*

- Kansans with disabilities are **7 times more likely** to perceive their health status as fair or poor compared to those not having disabilities.
- Kansans with disabilities are **significantly less likely** to participate in recommended levels of physical activity compared to Kansans without disabilities. At the same time, however, Kansans with disabilities report wanting to be more physically active.
- **Barriers** to increased physical activity include:
 - lack of accessible exercise facilities
 - lack of provider knowledge of how to support physical activity for people with disabilities
 - lack of availability of physical activity programs designed specifically for people with mobility limitations or intellectual/developmental disabilities (IDD)

*Kansas BRFSS

Kansans with disabilities CAN be healthy!

Web: ihdps.ku.edu/dandhkansas

Facebook: [Kansas Disability & Health Program](#)

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Kansas at Baseline: Oral Health

Only 54.3% of Kansans with disabilities visited the dentist in the past year. In addition, based on our own survey of Medicaid beneficiaries*:

Oral Health Status	Kansans with Physical Disabilities	Kansans with IDD	All Kansans/ Americans
Missing at least one permanent tooth due to decay or gum disease	59%	44%	34%
Painful aching	65%	40%	20%
Uncomfortable to eat	63%	36%	17%

*Hall, J.P., Kurth, N.K. & Chapman, S.C. (2013). Poor oral health as an obstacle to employment for Medicaid beneficiaries with disabilities. *Journal of Public Health Dentistry*, 73(1), 79-82. PMID:22881988

Working with Health Care Providers

One of our strategies for implementing the DHP involves working with health care providers. We will provide continuing education and professional development opportunities for health care professionals, including oral health care professionals, on how to make their services fully accessible to people with disabilities.

These activities will include providing information and resources on making facilities and materials accessible to people with disabilities and understanding how to best support and encourage a variety of health promotion activities for this population.

The DHP is also exploring the possibility of adding or supplementing content on disability cultural competence to medical and health professional curricula throughout the state.



Photo courtesy Florida Office on Disability and Health

Adults with Disabilities are more likely to

 **be inactive**

Adults with disabilities

in the U.S.
43.0%

in Kansas
42.3%

Adults without disabilities

in the U.S.
24.3%

in Kansas
24.3%

 **have high blood pressure**

Adults with disabilities

in the U.S.
42.9%

in Kansas
40.8%

Adults without disabilities

in the U.S.
26.8%

in Kansas
26.1%

 **smoke**

Adults with disabilities

in the U.S.
30.6%

in Kansas
32.2%

Adults without disabilities

in the U.S.
14.6%

in Kansas
15.4%

 **be obese**

Adults with disabilities

in the U.S.
39.6%

in Kansas
42.8%

Adults without disabilities

in the U.S.
25.3%

in Kansas
27.5%

Graphic provided by the CDC.

