

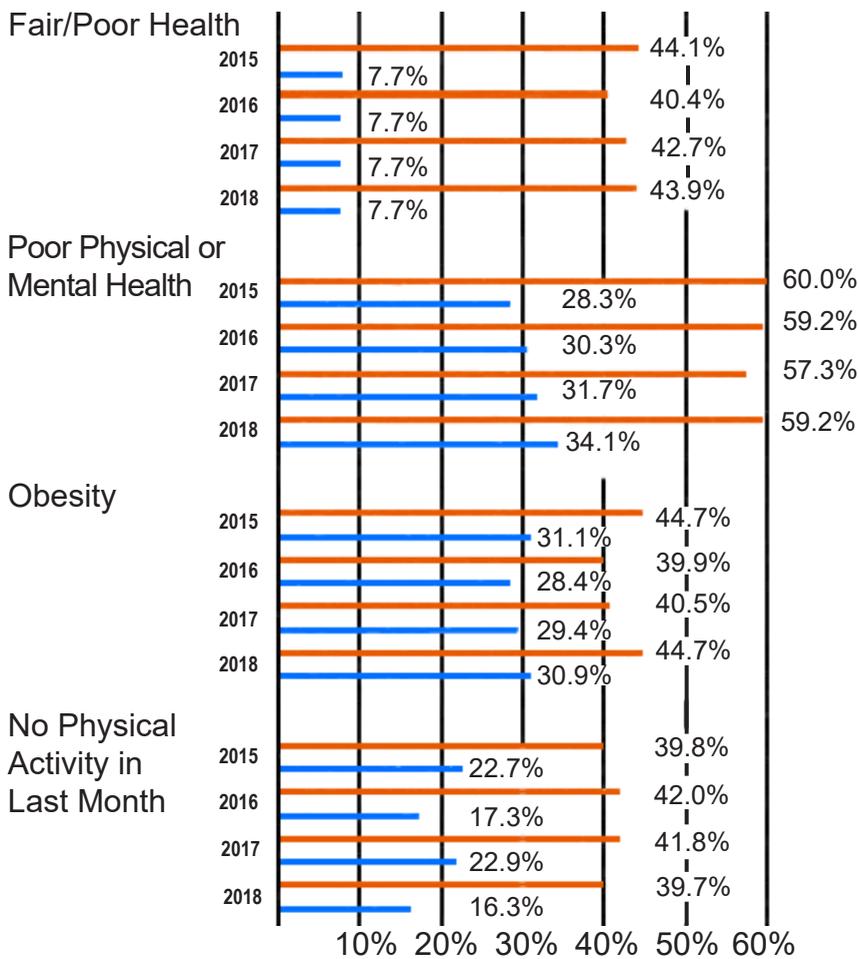
Health Disparities Experienced by Kansans with Disabilities



Disability and Health Program
 kansans with disabilities can be healthy

Twenty-six percent of Kansans have disabilities. People with disabilities use health services for the same reasons everyone else does--to be healthy, active, and participate in their communities. Despite this fact, health disparities between Kansans with and without disabilities are significant. Through targeted interventions in the areas of physical activity, nutrition and oral health, the Kansas Disability and Health Program (DHP), funded by the Centers for Disease Control and Prevention (CDC), is working to improve health and quality of life among Kansans with mobility limitations and/or intellectual disabilities (ID) to reduce these disparities.

Physical Health and Activity Disparities

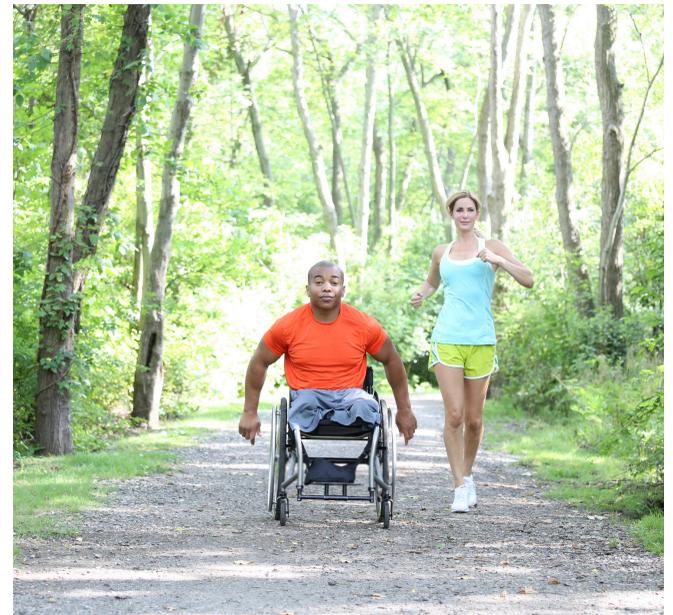


People with disabilities

People without disabilities

Physical Health and Activity

Kansans with disabilities are more likely to report poor and fair health and poor physical or mental health that keeps them from doing their usual activities. Kansans with disabilities also have higher rates of obesity (Body Mass Index ≥ 30) and lower rates of participation in physical activity.



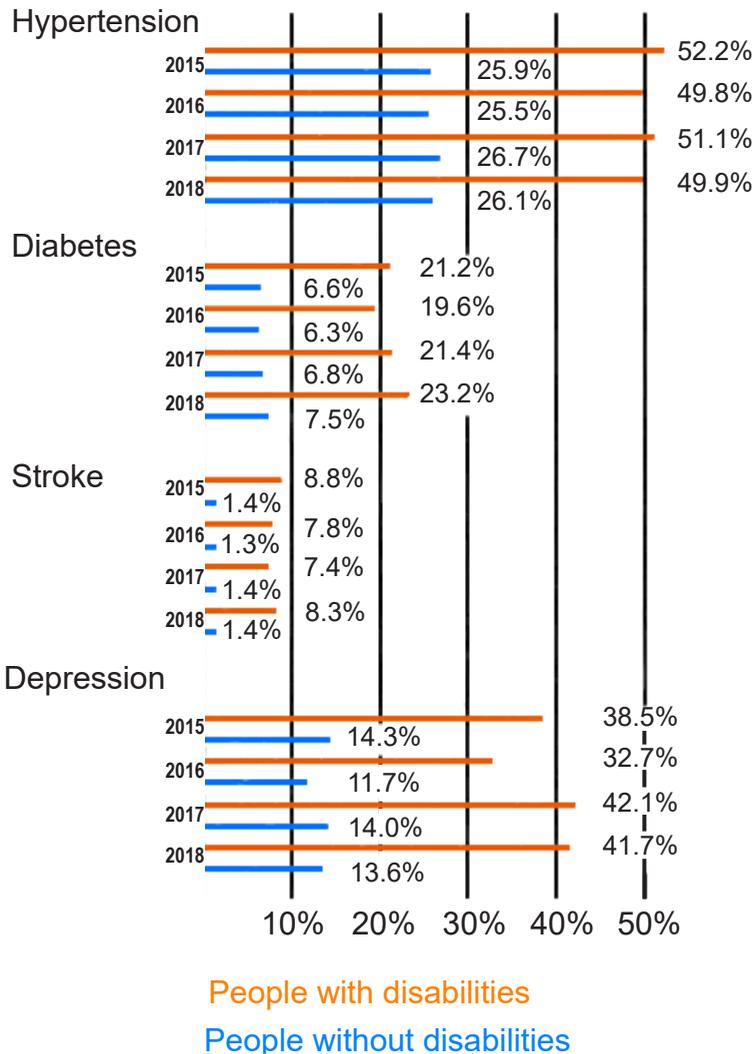
What are health disparities?

Health disparities are preventable differences in health that certain groups of people experience. These differences are related to disadvantages such as poverty, disability, and lack of education. Health disparities occur when opportunities like employment or health care services are not equally available to everyone.

Co-Existing Health Conditions

In addition to their disabilities, Kansans with disabilities experience conditions such as hypertension, stroke, diabetes, and depression at rates up to six times those of Kansans without disabilities.

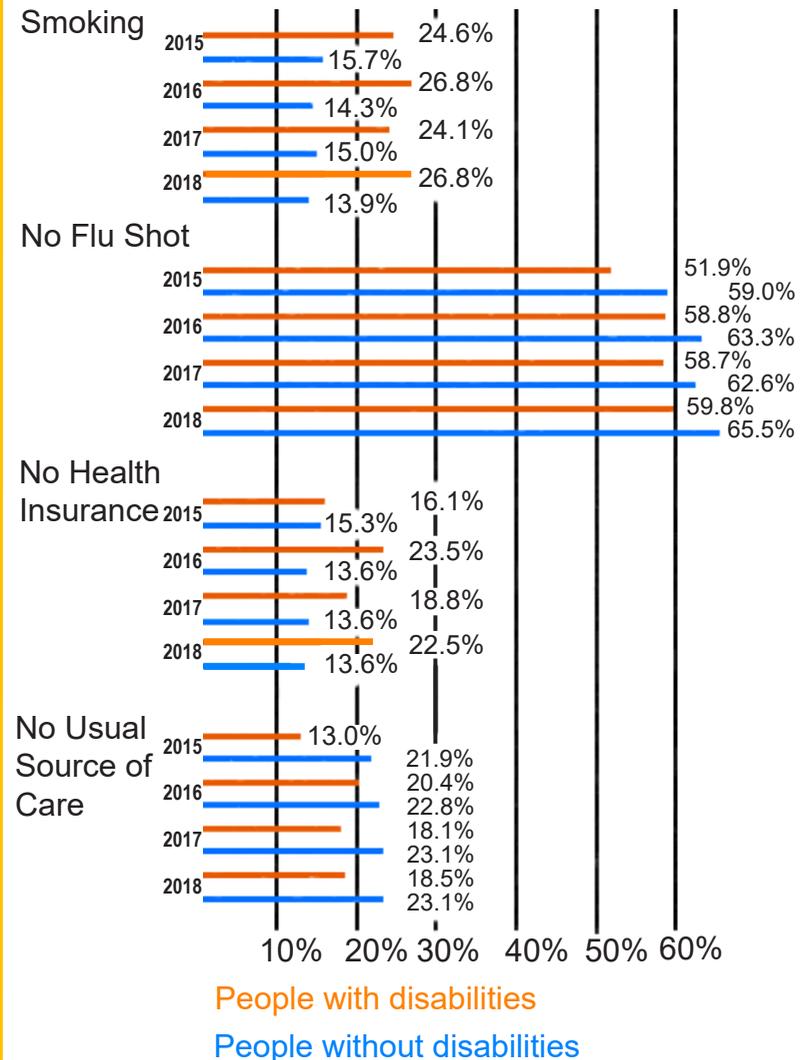
Co-Existing Health Condition Disparities



Other Health Risk Factors

Kansans with disabilities are more likely to get a flu shot and have a usual source of health care than Kansans without disabilities. However, Kansans with disabilities are more likely to smoke or use tobacco, and they are less likely to have health insurance coverage.

Other Health Risk Disparities



All data presented here are estimates from the Kansas Department of Health and Environment (KDHE), Behavioral Risk Factor Surveillance System (BRFSS). Available at <http://www.kdheks.gov/brfss>



For More Information:

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Development of this fact sheet was supported by Grant/Cooperative Agreement Number DD000006 from the CDC, National Center on Birth Defects and Developmental Disabilities, Disability and Health Branch. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of CDC, NCBDDD, Disability and Health Branch.