



Center for Disability Health and Wellness

Caring for People with Disabilities from Diverse Communities

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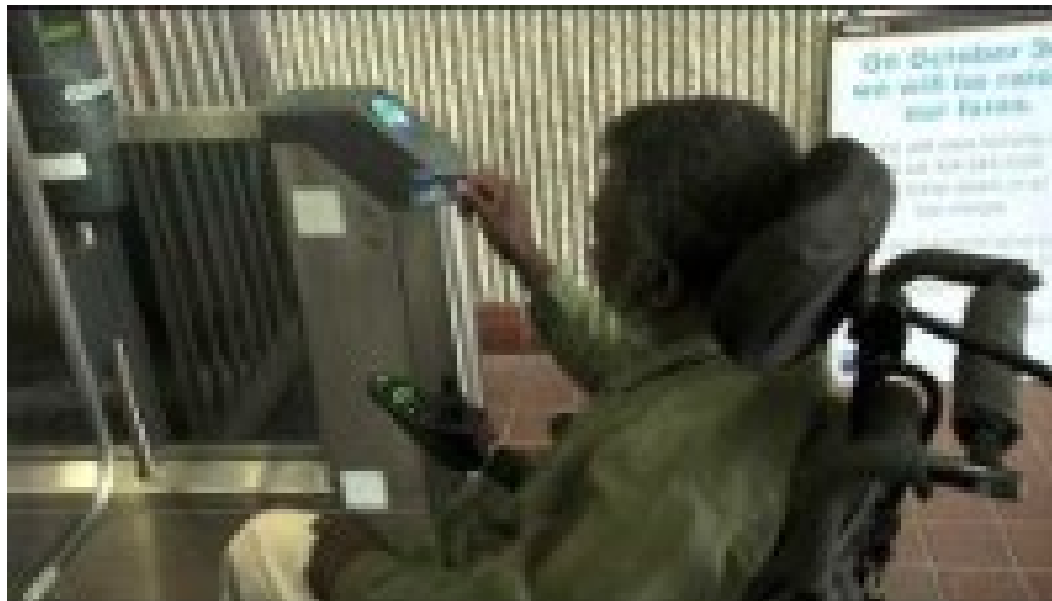
Advancing Health Equity among Adults with Disabilities from Diverse Communities

REHABILITATION RESEARCH AND TRAINING CENTER

Supported by a grant from the National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR #90RTHF0005)



Living with Disability: Bernard's Perspective



Something to think About..

What is *Disability*
to you as a
healthcare provider
or *organization*?

OBJECTIVES

- To discuss the responsibilities of healthcare systems in their environments and processes
- To highlight the importance of listening to people with disabilities and working in partnership with them
- Importance of ensuring accessible environments and tailoring care
- Increase awareness and allow discussion and problem-solving around these issues in a supportive, non-judgmental environment

Flow

- **Key Terms**
- **Health and Healthcare Disparities Disability**
- **Research Findings**
- **Creating Accessible Environments and Tailoring Care to Optimize Outcomes**
- **Summary**
- **Questions**
- **Microgrant Program**

KEY TERMS

- Disability
- Intersectionality
- Ableism

Disability

Disability by the Numbers

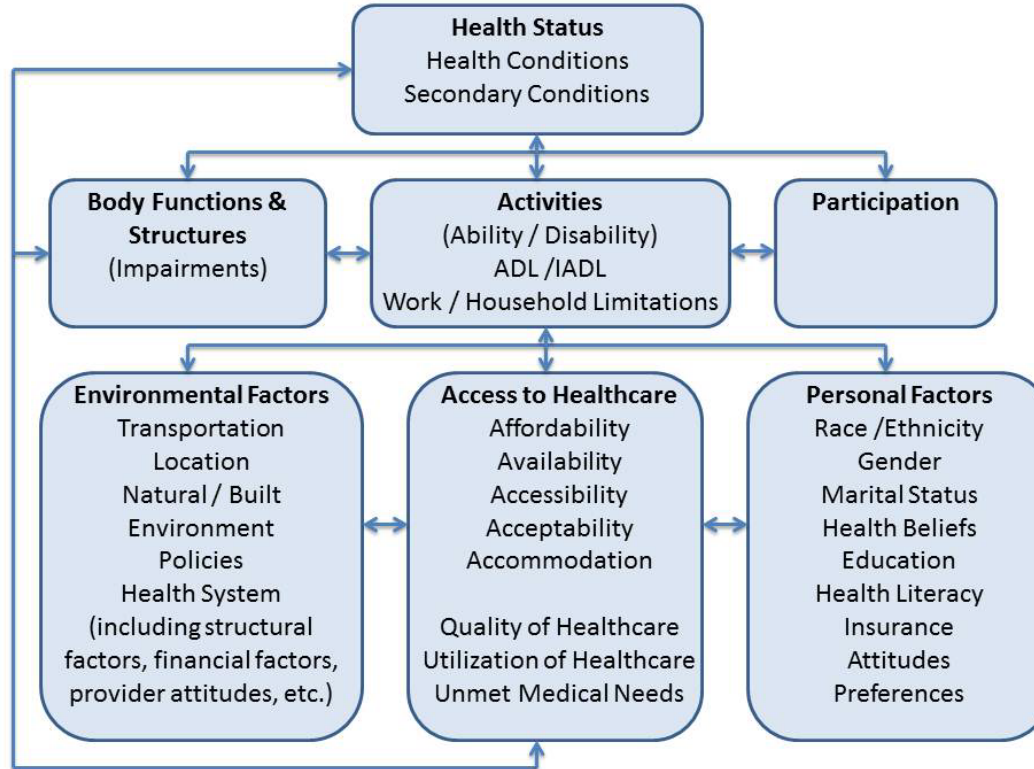
- 70.1 million – or more than 1 in 4 - adults in the United States
- 1 in 3 adults in Michigan
- Poorer Health Outcomes
- Less Access to Care
- Lower Quality of Care
- Compounded Disparities based on Social Determinants of Health

Models of Disability

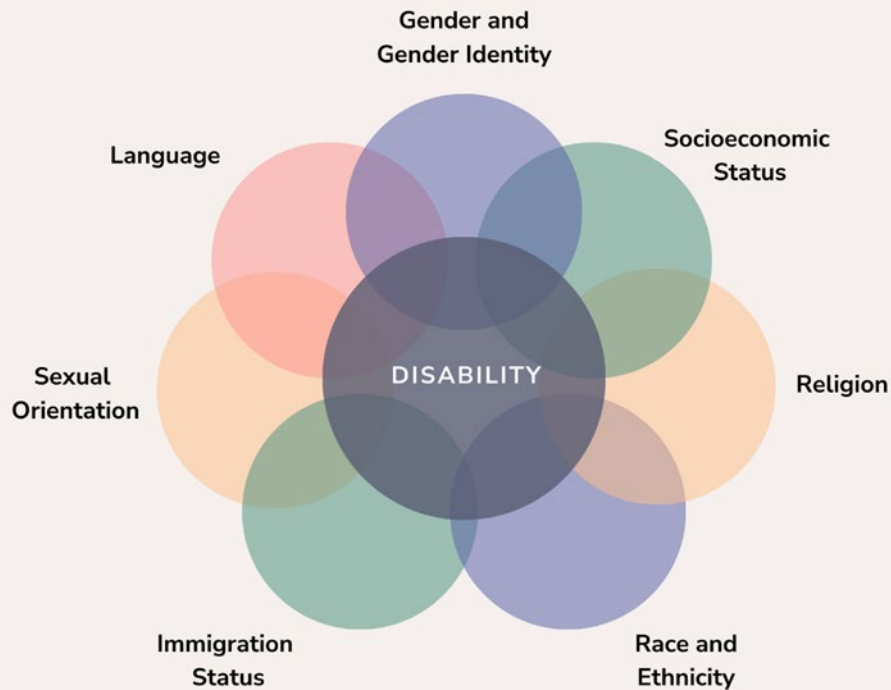
- Medical Model
- Independent Living / Social Model
- ICF Model

Model of Healthcare Disparities and Disability

(Meade, Mahmoudi & Lee, 2015)



Intersectionality Framework



Ableism



➤ <https://youtu.be/UMSj7Jx5Qmo>

Questions

- **Raise your hand or just answer silently to yourself**

- **Had you previously heard of ableism?**

- **How surprised are you about the long-term and pervasive impact of ableism?**

Disability and Invisibility

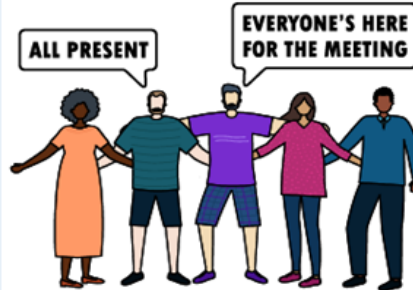


How people with disabilities experience society's attitudes through their interactions with people, places, and programs

Inaccessible environments



Society's lack of awareness

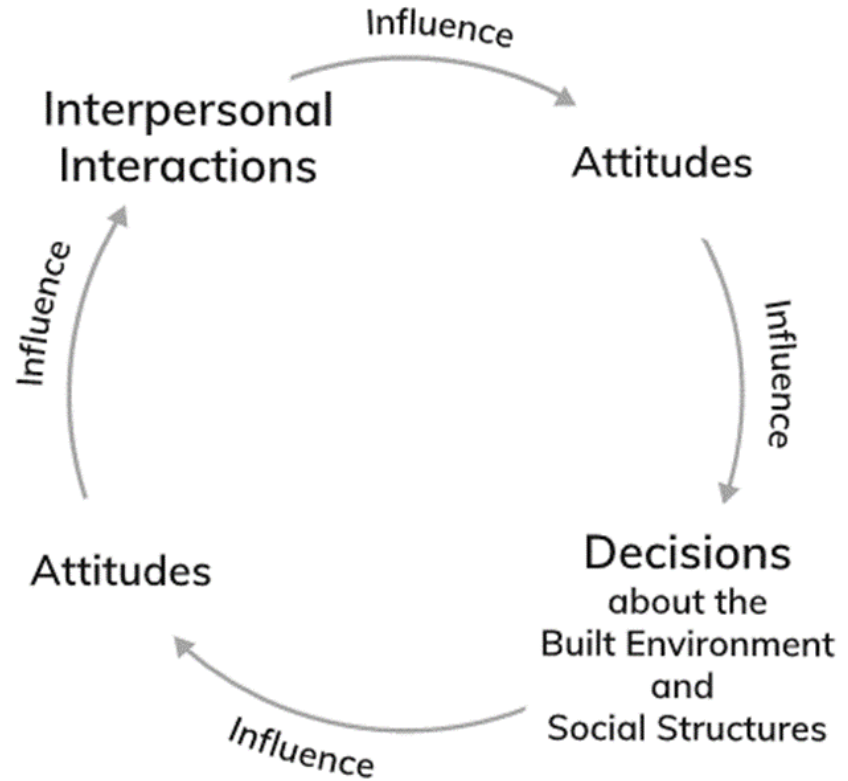


Policies not requiring accessibility



Learn more: Reber, L., Kreschmer, J. M., James, T. G., Junior, J. D., DeShong, G. L., Parker, S., & Meade, M. A. (2022). Ableism and Contours of the Attitudinal Environment as Identified by Adults with Long-Term Physical Disabilities: A Qualitative Study. *International Journal of Environmental Research and Public Health*, 19(12), 7469 <https://doi.org/10.3390/ijerph19127469>. This research was supported by a grant from the National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR #90RTHF0001-01-00).

INFLUENCE OF ATTITUDES ON ENVIRONMENT



THE COVID-19 PANDEMIC AND PEOPLE WITH DISABILITIES



**SOMETHING TO
CONSIDER**

How does implicit bias and ableism contribute to this situation?

RESEARCH AND REPORTS

■ Research

- Rates of death among individuals with down syndrome 10 x's higher with adjustment (Clift et al, 2020)
- 82.4% of physicians thought that people with disabilities have a worse quality of life (Iezzoni et al, 2021)

➤ US Office of Civil Rights Statement (3/2020)

➤ In the Community (Detroit)

- Health
- Transportation
- Jobs
- Access to Care
- Personal care attendants
- COVID Treatment
- Vaccination

Listening to & Partnering with People with Disabilities

Listening to People with Disabilities & Their Families



- **Creating Accessible
Environments &
Tailoring Care to
Optimize Outcomes**

Increase Awareness

About what disability is and what it means (or does not mean)

Acknowledge that disparities do exist

Identify our own strengths, biases, limitations, and priorities

As individuals

As a system

Increase awareness of how social determinants impact the health and behaviors of our patients

Identify information about existing programs and resources as well as best practices

Consciously Create Environments

That optimize functioning and outcomes for patients and staff

Ensure office / clinical space and equipment is physically accessible

Ensure accessibility of space and services for individuals with cognitive and sensory impairments

Expand access to services by programmatic components

Including hours and cost of services (including acceptance of insurance)

Train faculty and staff to provide needed services

Optimize Attitudes of All Stakeholders

- Promote positive attitudes about disability
- Disconnect disability from poor health and quality of life
- Promote expectations of participation
- Promote self-determination and reduce paternalism
- Recognize, support, and enhance strengths
- Eliminate judgment / Focus on problem-solving to advance mutually agreed-upon goals
- Form partnerships and encourage self-management
- Provide positive role models

Educate Providers

- Enhance recruitment, admission, and retention of individuals with disabilities into healthcare fields
- Include courses on disability into curriculum
- Provide continuing education and ongoing training about disability and working with individuals with different types of disabilities
- Facilitate skill development and hands-on training
 - Communication
 - Facilitating self-management
- Make information digestible and immediately relevant

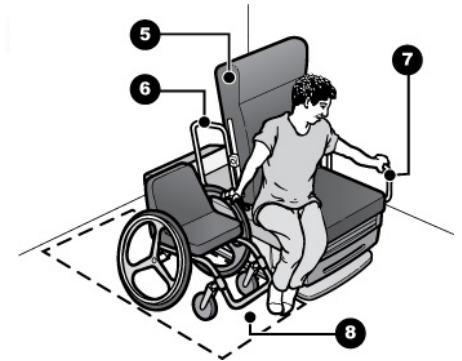
Gather Data Correctly

- Use proper and evidence-based procedures and processes to collect information about race, ethnicity and other personal information
- Use or develop standardized measures appropriate for individuals with disabilities
- Document information and conduct assessments to identify
 - Who you are working with
 - What their strengths, abilities, and vulnerabilities are
 - What interventions or services they receive
 - Outcomes from receiving services

Facilitate the Inclusion of Healthcare Providers with Disabilities

- Particularly providers with disabilities who are BIPOC
- Create a pipelines and role models
- *Work of Docs with Disabilities Initiative*
 - Ensure that entrance exams and requirements are accessible to individuals with disabilities
 - Provide needed supports

ASK
*Do you have a
disability for which
you need an
accommodation?*



Screen *for functional deficits*

- Hearing (serious difficulty hearing);
- Vision (serious difficulty seeing);
- Cognition (serious difficulty concentrating, remembering, or making decisions);
- Mobility (serious difficulty walking or climbing stairs);
- Self-care (difficulty dressing or bathing); or
- Independent living (difficulty doing errands alone).

**Adapt and Tailor
Care**
*to make sure it is
understood by
and relevant to
patients*

- Consider how the person learns
- How well they are able to plan and problem solve
- What resources they have
- What their priorities are



Support Families & Social Networks



- Recognize the importance of family, friends, and community in supporting health, functioning, and participation.
- Assess and seek to Understand Social Networks including their conceptualizations around health and wellness
- Provide those individuals with information, training, and resources.
- Create / advocate for policies and programs that recognize and accommodate competing demands on families / friends / support networks.

Develop & Evaluate Interventions & Programs

- That provide standardized interventions and / or supports to patients and families
- That address identified needs
- That are relevant, feasible, and effective
- That consider
 - Cost
 - Scalability
 - Problems with travel or transportation
 - Difficulty coordinating schedules

Engage / Partner with Communities

- Use Community Participatory Research Strategies
- Facilitate Opportunities for Health and Wellness
- Include individuals with disabilities in quest for solutions / partner with existing programs and organizations.
- Develop Patient / Community Advisory Networks.
- Integrate UM programs and events in communities.
- Leverage UM expertise and resources to improve access and population health.
- Develop programs and interventions that recognize, support, and enhance strengths.

Knowledge Translation: Implementation and Integration

- Create and / or adapt clinical services and programs based on research evidence.
- Consult / include relevant stakeholders in research to promote knowledge translation.
- Promote integration of technology into healthcare system to improve results.
- Tailor services, programs, and resources to individual or patient groups to leverage strengths and optimize functioning.

Review and Update Policies

- Regularly review departmental and institutional policies and their impact on both staff and patients.
 - Continuously work to improve them.
- Increase awareness of state and federal policies that impact patients and health care.
 - Advocate for policies that better protect and serve patients.

In Summary

- More than 70 million adults in the United States are Living with Disability
- People with disabilities experience significantly worse health outcomes and healthcare disparities, with women, those living in poverty and black, indigenous and persons of color (BIPOC) most likely to experience negative outcomes
- People with disabilities are an underserved and often overlooked component of the population who experience many negative social determinants of health and are at enhanced risk for poor health outcomes
- Implicit Bias and Structural Ableism enhance the likelihood that people with disabilities will be forgotten
- Healthcare and Public Health Programs and Organizations must work in partnership with people with disability and disability organizations to ensure that they are engaged, counted and able to access programs and resources

**Healthcare disparities result from
modifiable factors in healthcare systems**

**THEY ARE OUR RESPONSIBILITY
TO ADDRESS AND CHANGE**

Questions?

THINGS TO CONSIDER

What does Disability mean?

What are the implications to
healthcare providers and systems?

What Accommodations, supports and
resources / assistance are important
to enhance functioning, health,
participation and quality of life?

Microgrant Program to Advance Disability Healthcare Equity At Safety Net Organizations

- Up to \$5,000 to support the one-time purchase of equipment, the development of material or educational programming, or support of training activities associated with improving accessibility and quality of healthcare to individuals with disabilities.
- All projects will demonstrate involvement of local disability representatives and show how the project will have a broad impact on people with disabilities in the identified community.
- The project must be realistic and achievable within a six-month time frame.
- Expected Proposal Deadline: January 15, 2025
- Expected Project Start Date: March 1, 2025

Recognition & Award Program to Advance Disability Healthcare Equity

- Designed to recognize the people and organizations creating and implementing best practices to advance healthcare equity for individuals with disabilities
- Public to nominate providers, clinics and organizations that demonstrate excellence and model programs to reduce healthcare disparities and improve access to quality care for individuals with disabilities and especially those from marginalized, low-income and traditionally underserved communities
- CDHW will recognize one nominee a month on its website and quarterly through its newsletter.
- Awards will be provided annually at our Annual Disability Health Research Symposium (in October of each year).
- Stay tune for more information about nomination, recognition and award processes and timelines

**For more
information
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