Position Paper – Improving Health Equity for People with Disabilities in Washington, DC

What is the issue?

The Center for Disease Control (CDC) says health disparities are avoidable differences in health outcomes or access to healthcare between different groups of people. Not everyone has the same opportunities to be healthy or receive good medical care, which can lead to unequal health outcomes among different populations. In the US, people with disabilities have faced big differences in health outcomes, making them the largest group facing health disparities (Krahn et al. 2015). The COVID-19 pandemic made these existing problems worse, especially for people with disabilities. In September 2023, the National Institute of Health (NIH) officially named people with disabilities as a group facing health disparities. This shows that urgent changes are needed in public health and the US healthcare system to better care for people with disabilities.

In Washington, DC, people with disabilities face differences in health outcomes. Recent data show that people with disabilities in DC are less likely to get important health checks like mammograms and cervical cancer screenings than non-disabled people. They also visit dentists and get flu shots less often than non-disabled people. These differences show that the healthcare and public health systems in DC need to do better.

Why is this issue important to the DC DD Council?

The DC Developmental Disabilities Council (DD Council) works to change systems and create communities where people with disabilities and their families can live the lives they want. When health problems affect people with disabilities and their families, it becomes harder for them to enjoy life fully. After the COVID-19 pandemic, the DD Council added a focus on health equity (fairness) in their plans and came up with activities in the FY22-26 State Plan to fix these problems.

Two of these activities are:

1. Support at least one collaborative initiative that increases access to information and support about self-care, health, and wellbeing of the people with DD and their families to prevent COVID-19 and increase equitable access to vaccines and health services in their communities (DD Council State Plan 2022-2026)
2. Develop one cross-sectional awareness campaign that centers the voices of people with disabilities and their families to promote diversity, equity, and inclusion as it relates to healthcare, employment, housing, and their overall well-being (DD Council State Plan 2022-2026)

These activities are in-line with Healthy People 2030, which sets national goals to get rid of health disparities over 10 years. One big goal of Healthy People 2030 is:

1) Increase the proportion of state and DC health departments with programs aimed at improving health in people with disabilities (Healthy People 2030)

The most important part of these activities is to always include and listen to people with disabilities in anything related to promoting their health.

What is the DD Council's position and what is the change we would like to see?

The DD Council believes that to improve health equity, the voices and experiences of people with disabilities must be heard and listened to. For disability self-advocates it is important that there is "Nothing about us, without us" and healthcare is part of that. Including people with disabilities in decision-making about healthcare is an important step. This means understanding their unique perspectives, challenges, and needs and actively involving them in designing, carrying out, and evaluating (checking) healthcare policies and services.

To reduce health disparities in the disability community in DC, the DD Council recommends these important changes to make sure the voices of people with disabilities are at the front of healthcare efforts:

1. **Work Together in Decisions:**
    - Include people with disabilities in decisions about healthcare at all levels, from creating policies to making programs and services.
    - Make advisory boards or councils that have representatives from the disability community. They can give advice and suggestions about healthcare.
2. **Teach About Different Cultures:**
    - Encourage healthcare providers to ask people with disabilities for feedback about their experiences in the healthcare system.
    - Invite people with disabilities to share information about their culture and experiences with healthcare workers.
3. **Make Communication Accessible:**
    - Make sure communication methods work for people with disabilities. This means providing information in plain language and different formats, like braille and accessible digital forms.
    - Teach healthcare providers how to communicate well with people who have different communication styles or use alternative communication methods.
4. **Accessible Healthcare Facilities:**

- Make sure healthcare facilities are easy to get into and move around in, considering the various mobility and sensory needs of people with disabilities.

- Train healthcare staff to create inclusive and welcoming environments for everyone.

References:

1. Krahn, G. L., D. K. Walker, and R. Correa-De-Araujo. 2015. Persons with disabilities as an unrecognized health disparity population. *American Journal of Public Health* 105 (Suppl 2): S198–S206.

2. Pérez-Stable, E. J. (2023, September 28). *People with disabilities designated as HD population*. National Institute of Minority Health and Health Disparities. https://nimhd.nih.gov/about/directors-corner/messages/health-disparities-population-designation.html

3. U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion. Healthy People 2030. https://health.gov/healthypeople/priority-areas/health-literacy-healthy-people-2030