

 **1 in 4** adults in the United States has a disability

What is a disability?

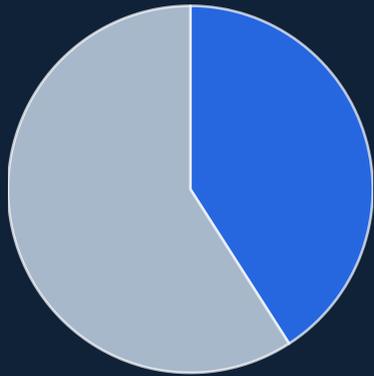
A disability occurs when a person's body, mind and/or emotional functions intersect with a physical or social environment that results in a limitation in activities or restrictions in full participation for the person

Of U.S. adults:



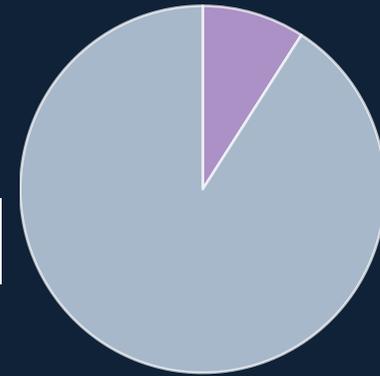
People with disabilities are a diverse group of individuals with a wide-range of health care and support needs

People with disabilities are more likely to report poorer health:

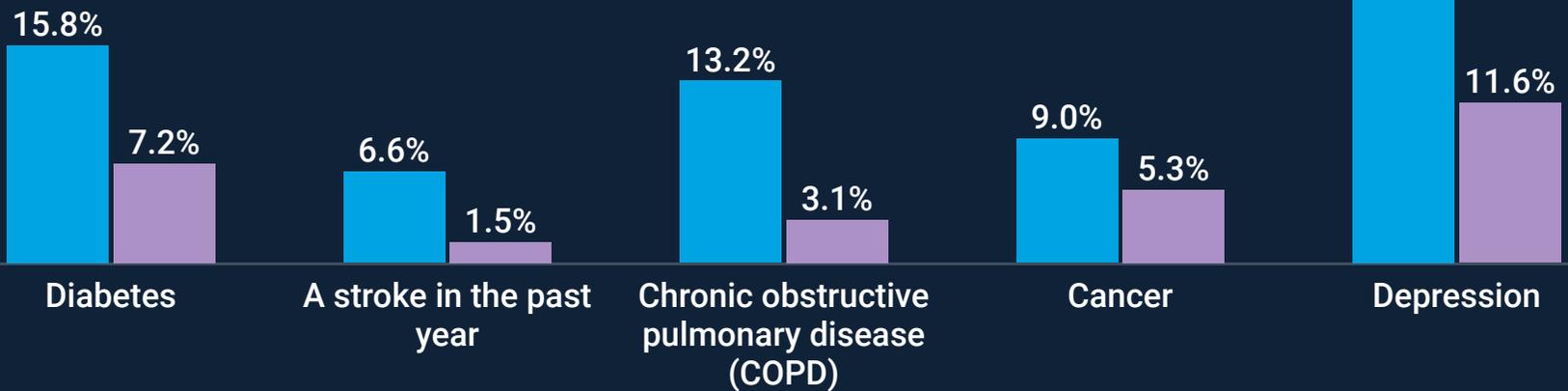


40.9% of people with a disability report fair or poor self-rated health

compared to **9.1%** of people without a disability



Individuals with disabilities have experienced poorer health when compared to those without disabilities:



● People with a disability ● People without a disability



New guidance from the Biden Administration says that long COVID can be considered a disability under civil rights law, if it substantially limits one or more major life activities

Common Barriers to Disability Inclusion and Participation

The World Health Organization (WHO) describes barriers as factors in a person's environment that, through their absence or presence, limit functioning and create disability

Common barriers to the inclusion and integration of people with disabilities:

Attitudinal

Ableism, stereotyping, stigma, prejudice, and discrimination



Communication

Experienced by people who have disabilities that affect hearing, speaking, reading, writing, and or understanding



Physical

Obstacles that prevent access or block mobility, such as curbs and steps



Policy

Lack of enforcement or awareness of existing laws and regulations, e.g. the Americans with Disabilities Act (ADA)



Programmatic

Factors that limit the effective delivery of a public health or healthcare programs, such as inconvenient scheduling and poor communication with patients



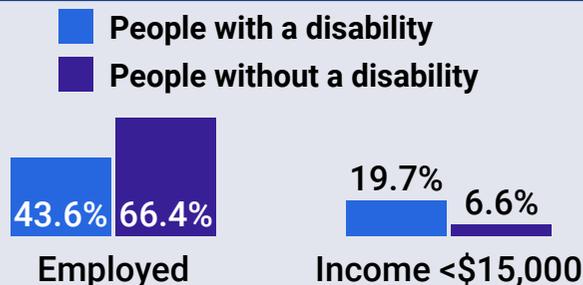
Transportation

Lack of adequate and accessible transportation, which can interfere with a person's independence and participation



Social Drivers of Health

Social determinants of health, including lack of affordable and accessible housing and lower rates of employment, education & income



People with disabilities have less access to adequate health care due to factors such as:

Costs

26.7% of people with a disability could not see a doctor due to cost in the past 12 months compared to **10.1%** of people without a disability

Health care provider stereotypes about disabilities

82.4%

of U.S. physicians reported that people with significant disability have worse quality of life than nondisabled people

Only **56.5%**

strongly agreed that they welcomed patients with disability into their practices

Lack of appropriate provider training



Only **40.7%** of physicians were very confident about their ability to provide the same quality of care to patients with a disability

Lack of accessible medical facilities and equipment



Exam tables and chairs may not be adjustable



Scales may fail to accommodate wheelchairs or require a step up



People with visual disabilities or intellectual/developmental disabilities may not be able to access patient portals

Communication barriers



Care after a medical visit may be hindered by materials that are not available in plain language or braille

Lack of accommodations, such as sign language interpreters



COVID-19 Disproportionately Impacted People with Disabilities

Risk of poor outcomes from COVID-19:

Individuals with intellectual and developmental disabilities are at a higher risk of dying from COVID-19 than those without such disabilities

6x

Those with intellectual disabilities were 6x more likely to die from COVID-19 than other members of the population

Psychological Distress

Activity restrictions can induce mental health stress - especially among those on the autism spectrum

Reduced access to routine health care and rehabilitation:

Telehealth

For some, telehealth provided opportunities to access care, for others, it posed additional challenges:



Blind/low vision: screen reader tools were not necessarily compatible



Cognitive disabilities: tools may be difficult to navigate



Deaf/hard of hearing: ASL interpreters or closed captioning unavailable

Caregivers



Individuals have experienced disrupted access to caregivers

Lack of resources available to support family caregivers

Interventions

Many interventions, including mental health & school-based, were not implemented due to reduced in-person work

Adverse social impacts:

Unemployment

*During the first months of the pandemic, nearly **one million** U.S. workers with disabilities had lost their jobs, impacting:*

1 in 5 workers with a disability



compared to

1 in 7 workers in the general population



Unmet Needs

For some, the pandemic impacted transportation options and reduced access to medications, food and other basic necessities



Home & community-based service providers did not receive the level of federal pandemic assistance made available to other providers, and at least half of states saw permanent closure of HCBS providers

Disparities in the COVID-19 Response Experienced by People with Disabilities



Lack of data

Who counts depends on who is counted



Estimates of COVID-19 cases and deaths primarily come from nursing homes, reflecting just a fraction of the population with disabilities



Data collection is a fundamental pillar of public health and lack of information perpetuates social injustice



Inaccurate data on COVID-19 and vaccine rates can misguide public health approaches

Inaccessible testing and vaccination



For some people who cannot drive due to a disability, drive-through testing created accessibility challenges



Vaccine registration websites violated disability rights laws, creating inequity for people with disabilities



States and territories varied in vaccine prioritization for the disability community



Vaccination sites lacked accessibility and accommodations

Obstacles to accessing information on pandemic

Lack of captions or alternative text

Difficult to find information relevant to variety of conditions

Overwhelming and confusing information

Return to pre-pandemic life

The pandemic altered accessibility

Such as through work from home accommodations and grocery delivery



There is concern that returning to pre-pandemic norms will exclude people with disabilities

Strategies to Support the Health and Well-being of People with Disabilities



Partner

with the disability community

- Disability research should engage and include people with disabilities in the planning and decision-making process, ensuring focus on the most pressing issues

Collect

disability data

- Data should include race, gender, language, and other cultural factors
- Also collect qualitative data

Prioritize

accessibility

- Health professionals need to ensure all people receive equal access to accurate information and quality services

Include

disability in all health equity efforts

- Health equity research and policy must be holistic, intersectional, and include disability

Improve

representation and leadership

- Support the disability rights movement's call for 'Nothing About Us Without Us'

Address

stigma through medical training

- Include disability cultural competency curricula in all health care professional schools

Promote

disability employment

- Connect job seekers with disabilities to employment opportunities
- Create inclusive and accessible workplaces

Support

social participation

- Include people with disabilities in everyday activities
- Identify and remove barriers for meaningful participation based on individuals' interests