Disability and Health

Number	Objective Short Title
Systems and Policies	
DH–1	Identification of “people with disabilities” in data systems
DH–2	Surveillance and health promotion programs
DH–3	Graduate-level courses in disability and health
Barriers to Health Care	
DH–4	Barriers to primary care
DH–5	Transition planning
DH–6	Medical care for epilepsy and uncontrolled seizures
DH–7	Use of inappropriate medications
Environment	
DH–8	Barriers to health and wellness programs
DH–9	Barriers to participation
DH–10	Barriers to obtaining assistive devices, service animals, and technology
DH–11	Visitable features
DH–12	Congregate care
Activities and Participation	
DH–13	Participation in social, spiritual, recreational, community, and civic activities
DH–14	Inclusion of children and youth with disabilities in regular education programs
DH–15	Unemployment
DH–16	Employment
DH–17	Social and emotional support
DH–18	Serious psychological distress
DH–19	Nonfatal unintentional injuries requiring medical care

DH–20 Early intervention services.

Topic Area: Disability and Health

Systems and Policies

DH–1: Include in the core of Healthy People 2020 population data systems a standardized set of questions that identify “people with disabilities.”

Target: 4 data systems.

Baseline: 2 of 26 Healthy People 2020 data systems contained a standardized set of questions that identify “people with disabilities” in 2010.

Target setting method: Projection/trend analysis.

Data source: Periodic Assessment of Healthy People Population Data Systems, CDC.

DH–2: Increase the number of Tribes, States, and the District of Columbia that have public health surveillance and health promotion programs for people with disabilities and caregivers.

States and District of Columbia

DH–2.1 Increase the number of State and the District of Columbia health departments that have at least one health promotion program aimed at improving the health and well-being of people with disabilities.

Target: 18 States and the District of Columbia.

Baseline: 16 of the States and the District of Columbia had health promotion programs for people with disabilities in 2010.

Target setting method: 10 percent improvement.

Data source: Periodic Assessment of State Health Promotion Programs, CDC, NCBDDD.

DH–2.2 Increase the number of State and the District of Columbia health departments that conduct health surveillance of caregivers for people with disabilities.

Target: 51 States and the District of Columbia.

Baseline: 2 States and the District of Columbia conducted health surveillance of caregivers for people with disabilities in 2010.

Target setting method: Retention of HP2010 target.

Data source: Behavioral Risk Factor Surveillance System (BRFSS), CDC, PHSPO.

DH–2.3 Increase the number of State and the District of Columbia health departments that have at least one health promotion program aimed at improving the health and well-being of caregivers of people with disabilities.

Target: 16 States and the District of Columbia.

Baseline: 0 States and the District of Columbia had health promotion programs for caregivers in 2010.

Target setting method: Maintain consistency with national programs, regulations, policies, and laws.

Data source: Periodic Assessment of State Health Promotion Programs, CDC, NCBDDD.

Tribes

DH–2.4 (Developmental) Increase the number of Tribes that conduct health surveillance for people with disabilities.

Potential data sources: Tribal, State, and District of Columbia reports; CDC, Disability and Health Branch.

DH–2.5 (Developmental) Increase the number of Tribes that have at least one health promotion program aimed at improving the health and well-being of people with disabilities.

Potential data sources: Tribal, State, and District of Columbia reports; CDC, Disability and Health Branch.

DH–2.6 (Developmental) Increase the number of Tribes that conduct health surveillance of caregivers of people with disabilities.

Potential data sources: Tribal, State, and District of Columbia reports; CDC, Disability and Health Branch.

DH–2.7 (Developmental) Increase the number of Tribes that have at least one health promotion program aimed at improving the health and well-being of caregivers of people with disabilities.

Potential data sources: Tribal, State, and District of Columbia reports; CDC, Disability and Health Branch.

DH–3: (Developmental) Increase the proportion of U.S. master of public health (M.P.H.) programs that offer graduate-level courses in disability and health.

Potential data source: Periodic Assessment of Schools of Public Health Courses, CDC, NCBDDD.

Barriers to Health Care

DH–4: (Developmental) Reduce the proportion of people with disabilities who report delays in receiving primary and periodic preventive care due to specific barriers.

Potential data source: National Health Interview Survey (NHIS), CDC, NCHS.

DH–5: Increase the proportion of youth with special health care needs whose health care provider has discussed transition planning from pediatric to adult health care.

Target: 45.3 percent.

Baseline: 41.2 percent of youth with special health care needs had health care provider who discussed transition planning from pediatric to adult health care in 2005–06.

Target setting method: 10 percent improvement.

Data source: National Survey of Children with Special Health Care Needs (NS–CSHN), HRSA, MCHB.

DH–6: (Developmental) Increase the proportion of people with epilepsy and uncontrolled seizures who receive appropriate medical care.

Potential data source: National Health Interview Survey (NHIS), CDC, NCHS.

DH–7: (Developmental) Reduce the proportion of older adults with disabilities who use inappropriate medications.

Potential data source: Medical Expenditure Panel Survey (MEPS), AHRQ.

Environment

DH–8: (Developmental) Reduce the proportion of people with disabilities who report physical or program barriers to local health and wellness programs.

Potential data source: National Health Interview Survey (NHIS) Supplement, CDC, NCHS.

DH–9: (Developmental) Reduce the proportion of people with disabilities who encounter barriers to participating in home, school, work, or community activities.

Potential data source: National Health Interview Survey (NHIS) Supplement, CDC, NCHS.

DH–10: (Developmental) Reduce the proportion of people with disabilities who report barriers to obtaining the assistive devices, service animals, technology services, and accessible technologies that they need.

Potential data source: National Health Interview Survey (NHIS) Supplement, CDC, NCHS.

DH–11: Increase the proportion of newly constructed and retrofitted U.S. homes and residential buildings that have visitable features.

Target: 46.3 percent.

Baseline: 42.1 percent of newly constructed and retrofitted U.S. homes and residential buildings had visitable features in 2007.

Target setting method: 10 percent improvement.

Data sources: American Housing Survey (AHS), HUD.

DH–12: Reduce the number of people with disabilities living in congregate care residences.

DH–12.1 Reduce the number of adults with disabilities aged 22 years and older living in congregate care residences that serve 16 or more persons.

Target: 31,604 adults.

Baseline: 57,462 adults aged 22 years and older with disabilities lived in congregate care residences that served 16 or more persons in 2008.

Target setting method: Projection/trend analysis.

Data source: Survey of State Developmental Disabilities Directors, University of Minnesota.

DH–12.2 Reduce the number of children and youth with disabilities aged 21 years and under living in congregate care facilities.

Target: 26,001 children and youth with disabilities.

Baseline: 28,890 children and youth aged 21 years and under with disabilities lived in congregate care facilities in 2009.

Target setting method: 10 percent improvement.

Data source: Survey of State Developmental Disabilities Directors, University of Minnesota.

Activities and Participation

DH–13: (Developmental) Increase the proportion of people with disabilities who participate in social, spiritual, recreational, community, and civic activities to the degree that they wish.

Potential data source: National Health Interview Survey (NHIS) Supplement, CDC, NCHS.

DH–14: Increase the proportion of children and youth with disabilities who spend at least 80 percent of their time in regular education programs.

Target: 73.8 percent.

Baseline: 56.8 percent of children and youth with disabilities spent at least 80 percent of their time in regular education classrooms in 2007–08.

Target setting method: Projection/trend analysis.

Data source: Individuals with Disabilities Education Act (IDEA) database, ED, Office of Special Education Programs.

DH–15: Reduce unemployment among people with disabilities.

Target: 13.1 percent.

Baseline: 14.5 percent of people with disabilities were unemployed in 2009.

Target setting method: 10 percent improvement.

Data source: Current Population Survey (CPS), DOL, BLS.

DH–16: Increase employment among people with disabilities.

Target: 21.1 percent.

Baseline: 19.2 percent of people with disabilities were employed in 2009.

Target setting method: 10 percent improvement.

Data source: Current Population Survey (CPS), DOL, BLS.

DH–17: Increase the proportion of adults with disabilities who report sufficient social and emotional support.

Target: 76.5 percent.

Baseline: 69.5 percent of adults with disabilities reported sufficient social and emotional support in 2008.

Target setting method: 10 percent improvement.

Data source: Behavioral Risk Factor Surveillance system (BRFSS), CDC, PHSPO.

DH-18: (Developmental) Reduce the proportion of people with disabilities who report serious psychological distress.

Potential data source: National Health Interview Survey (NHIS), CDC, NCHS.

DH–19: (Developmental) Reduce the proportion of people with disabilities who experience nonfatal unintentional injuries that require medical care.

Potential data source: National Health Interview Survey (NHIS), CDC, NCHS.

DH–20: Increase the proportion of children with disabilities, birth through age 2 years, who receive early intervention services in home or community-based settings.

Target: 95 percent.

Baseline: 91 percent of children with disabilities, birth through age 2 years, received early intervention services in home or community-based settings in 2007.

Target setting method: Projection/trend analysis.

Data source: Individuals with Disabilities Education Act (IDEA) database, ED, Office of Special Education Programs.