

AAHD

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A Need For More Health Screening for People With Disabilities

According to the US Census Bureau, there are nearly 50 million Americans who have some type of disability (U.S. Census Bureau, 2000). Within this population “persons with disabilities do not receive enough preventive care” and receive little or no health screening for such things as breast cancer, or preventive dental care (U.S. Department of Health and Human Services, 2005). 2003 Centers for Disease Control data indicated that among women over the age of 40, only 65% said that they receive mammography services as compared to the 71% of women without disabilities. 2002 data shows that among adults and children with disabilities only 37% reported that they have annual dental visits compared with 46% of children and adults without disabilities (U.S. Department of Health and Human Services, 2005).

In addition, people with disabilities (P.W.D.’s) have higher cholesterol and blood pressure rates, along with higher rates of obesity. 2002 data showed that 19% of adults with disabilities had high cholesterol in comparison to the 17% of adults without disability that had high cholesterol the same year (U.S. Department of Health and Human Services, 2005). 37% of adults with disabilities were reported to have high blood pressure in 2002 compared with 29% of adults without a disability (U.S. Department of Health and Human Services, 2005). People with disabilities also have a much higher rate of obesity compared with people without; 42% of people with disabilities were reported as being obese in 2002 compared to 28% of adults without disabilities (U.S. Department of Health and Human Services, 2005).

Healthy behaviors among people with disabilities are also something of concern. 2003 data indicated that the smoking rate among people with disabilities was 31% compared to 20% of people without a disability (U.S. Department of Health and Human Services, 2005). This same study found that sedentary behavior was also higher among people with disabilities. People with disabilities are 53% more likely to lack leisure physical activity compared to people without a disability at 34 % (U.S. Department of Health and Human Services, 2005).

Geographically, people with disabilities who report that they are in fair to poor health among adults with disabilities in the United States seem to be predominately in the southern states from Texas to Georgia and the Carolinas (Centers for Disease Prevention

and Control, 2006). In addition to this the reported data from the same data indicate that there is a prevalence of inactivity among adults 18 and older with a disability in the southern U.S. from Louisiana to Florida up to West Virginia and Oklahoma (Centers for Disease Prevention and Control, 2006). The prevalence of people with disabilities from the BRFSS in 2001 and 2003 seems to be high in the Pacific Northwest state of Oregon, Idaho, and Washington, the Northern states of Michigan, Minnesota, and Maine, the southern states of Arkansas, Alabama, and Mississippi, and the states of Oklahoma, New Mexico, Kentucky, and West Virginia (Centers for Disease Prevention and Control, 2006).

Other health disparities for people with disabilities include the need for P.W.D.'s to make greater use of health care services. There is a trend of women with disabilities to be denied reproductive and other types of health care (Baylor College of Medicine, 2005). There is very little or limited opportunities for people with disabilities in the health care profession (Baylor College of Medicine, 2005). Current data indicate a trend of a lack of health insurance for women with disabilities (Baylor College of Medicine, 2005). Significant health disparities for women with a physical disability include osteoporosis, diabetes, depression, obesity, and hypertension (Baylor College of Medicine, 2005).

It is clear from this information that there is a strong need for more preventive health screening in the United States for people with disabilities. Even though there has been a call for this from Healthy People 2010, it is evident that the progress in implementing and addressing this objective is going too slow.

The goal for the disability section of Healthy People 2010 was to "Improve access to comprehensive, high quality health care services (U.S Department of Health and Human Services, 2005)." This is a result of data showing that a substantially lower percent of people with disabilities report that their health is excellent or very good in comparison to people without disabilities (28.4% VS 61.4%) (U.S. Department of Health and Human Services, 2005).

People with disabilities should make a point to have their personal physician aware of the need for Preventive Health Screening (Rehabilitation Research and Training Center on Aging with a Disability, 2008). This is recommended instead of just getting the regular "pit-stop" exam from their physician, which usually consists of a cholesterol screening, and blood pressure check.

A comprehensive preventive health screening that should include the following areas; tests and screenings; immunization update; and health risk assessment and healthy lifestyle counseling which covers the importance of regular exercise, diet and eating habits, risks of smoking and other tobacco product use, drug and alcohol use, and birth control and sexually transmitted diseases counseling (Rehabilitation Research and Training Center on Aging with a Disability, 2008). This should be done by the patient's primary care physician during a physical exam, but most of the time it is ignored. As such, all patients should make a point to ask about these concerns during regular visits.

People with disabilities have to make it a point to be concerned about the same health risks as everyone else in the general population. In addition, they need to be aware and concerned about specific risks that may be associated with their disability. The following health care screening recommendations should be reviewed and followed by everyone whether they have a disability or not.

Frequency	Recommendation
Daily	<ul style="list-style-type: none"> • Self-Skin Checks (if sensation impaired)
Monthly	<ul style="list-style-type: none"> • Women: Breast Self-Examination • Men: Testicular Self-Examination
Yearly	<ul style="list-style-type: none"> • Check-up with Primary Care Provider (PCP) • Weight • Blood Pressure • Clinical breast examination after age 40 (sooner if self-exam if difficult) • Mammography beginning at age 40-50 (in addition to baseline mammogram done between 30-40 or 40-50). • Digital rectal exam after age 40 • Check for blood in your stool / feces after age 50 (To detect colon polyps that may become cancerous or colon cancers) • Digital prostate exam and PSA after age 50 • Flu shot (if pulmonary impairment)
Every 2-3 years	<ul style="list-style-type: none"> • Complete blood count with biochemistry study • Cardiac risk assessment after age 40 • Urologic assessment (if impairment) • Assess equipment and posture • Functional assessment—transfers, bed mobility and locomotion (via wheelchair or walking). • Full skin evaluation
Every 5 years	<ul style="list-style-type: none"> • Lung capacity (if pulmonary impairment) • Lipid panel—test for levels of cholesterol in your blood • Eye evaluation after age 40 • Screening sigmoidoscopy/colonoscopy after age 50 -- to visually detect colon polyps that may become cancerous or colon cancers • Motor and sensory testing • Review changes in life situation, including coping, adjustment, life satisfaction
Every 10 years	<ul style="list-style-type: none"> • Tetanus booster • Pneumonia vaccination (if pulmonary impairment)

From the Rehabilitation Research and Training Center on Aging with a Disability, 2008.

References

Baylor College of Medicine (2005). Health Disparities; Health Disparities between Women with Physical Disabilities and Women in the General Population, prepared by the Center for Research on Women with Disabilities, May 2005

Retrieved; 1/21/2008 from <http://www.bcm.edu/crowd/?pmid=1331>

Centers for Disease Control and Prevention. Disability and Health State Chartbook, 2006: Profiles of Health for Adults with Disabilities. Atlanta (GA): Centers for Disease Control and Prevention; 2006.

Rehabilitation Research and Training Center on Aging with a Disability (2008). Fact Sheet; Preventive Health Screening. Retrieved 1/21/2008 from http://agingwithdisability.org/factsheets/routine_screening.htm

U.S. Census Bureau (2000). Disability Status: 2000. Census 2000 Brief, March 2003. <http://www.census.gov/prod/2003pub/c2kbr-17.pdf>

U.S. Department of Health and Human Services (2005). The Surgeon General's Call To Action, To Improve the Health and Wellness of Persons with Disabilities. U.S. Department of Health and Human Services, Office of the Surgeon General.