

Welcome to the Webinar!

We will begin promptly at 2:00pm. If you have any technical issues, please use the Q&A box to send a message. You will not hear any sound until we begin at 2:00pm ET.





Including People with Disabilities in the MAPP Process

June 11th, 2019





Agenda

NACCHO Health and Disability Program & NCHPAD

Disability Background Information

Integrating Disability Inclusion into MAPP Phases

Additional Resources to Support Disability Inclusion

Q&A





Webinar Objectives

After completing this webinar, participants will be able to:

- 1. Define three major types of disability.
- 2. Describe how people with disabilities can be included in the six MAPP phases.
- Describe three NACCHO and NCHPAD resources that can support local public health disability inclusion efforts.





NACCHO's Health and Disability Program

- Supported by the National Center on Birth Defects and Developmental Disabilities at the Centers for Disease Control and Prevention
- Promotes the inclusion and engagement of people with disabilities in all local health department activities including:
 - Planning;
 - Implementation; and
 - Evaluation of public health programs, products, and services.





Health and Disability Program Activities

- Fellowship Program
- Technical Assistance
- Health and Disability Workgroup
- Communication Activities









- As a *National Center on Health Promotion for People with Disabilities* funded through CDC-NCBDDD, NCHPAD works to improve the **health**, **wellness**, and **quality of life of people with disability**.
- NCHPAD.org features a variety of resources and services which can benefit all ages and populations
- NCHPAD supports the **accessibility** and **inclusion** of people with disability in existing and future public health promotion programs geared toward improving their **physical activity**, **nutrition and healthy weight management**.









What is Inclusion?

Inclusion means to transform communities based on social justice principles in which ALL community members:

- Are presumed **competent**;
- Are recruited and welcome as valued members of their community;
- Fully participate and learn with their peers; and



Experience reciprocal social relationships.

Community Health Inclusion Sustainability Planning Guide. Retrieved from: http://www.nchpad.org/CHISP.pdf.



World Health Organization's (WHO) Definition of Disability

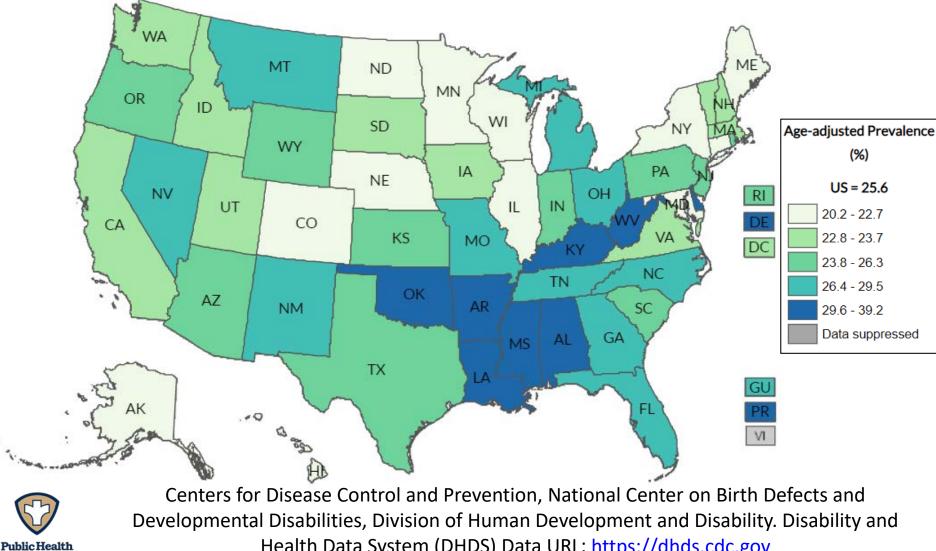
- A "disability" has the following three dimensions:
 1) Impairment in a person's body structure or function, or mental functioning, (e.g., loss of a limb, loss of vision or memory loss).
 - **2)** Activity limitation, such as difficulty seeing, hearing, walking, or problem solving.
 - **3) Participation restrictions**, such as working, engaging in social and recreational activities, and obtaining health care services.



World Health Organization (WHO). World report on disability, 2011. Geneva, Switzerland: World Health Organization; 2013.



Disability among adults 18 years of age or older (2017)



Health Data System (DHDS) Data URL: https://dhds.cdc.gov



Public Health

Measure of Disability Status and Types

- Hearing: Are you deaf or do you have serious difficulty hearing?
- Vision: Are you blind or do you have serious difficulty seeing, even when wearing glasses?
- **Cognitive**: Because of a physical, mental, or emotional condition, do you have serious difficulty concentrating, remembering, or making decisions?
- **Mobility:** Do you have serious difficulty walking or climbing stairs?
- Self-care: Do you have difficulty dressing or bathing?
- Independent living: Because of a physical, mental, or emotional condition, do you have difficulty doing errands alone such as visiting a doctor's office or shopping?

2017 Behavioral Risk Factor Surveillance System (BRFSS)



Health Risks and Behaviors by Disability Status

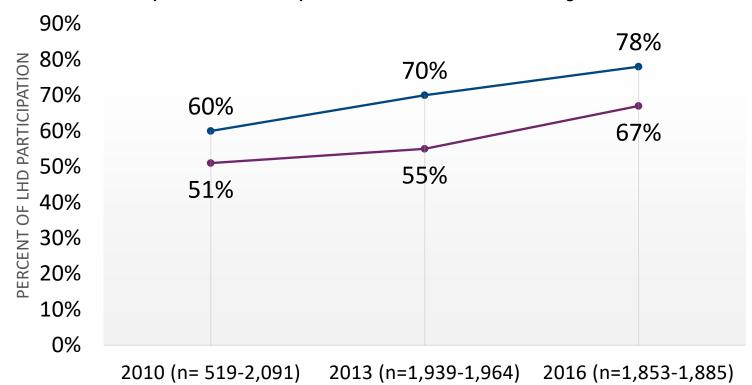
Health Risk/Behavior	People with Disabilities	People without Disabilities
Obesity	39.5%	26.3%
High Blood Pressure	41.9%	25.9%
Smoke	27.8%	13.4%
Physically inactive	42.2%	24.3%



Source: 2017 Behavioral Risk Factor Surveillance System; CDC's Disability and Health Data System URL: <u>https://dhds.cdc.gov</u>



Participation over time in a community health assessment (CHA) and community health improvement plan (CHIP) within 5 years



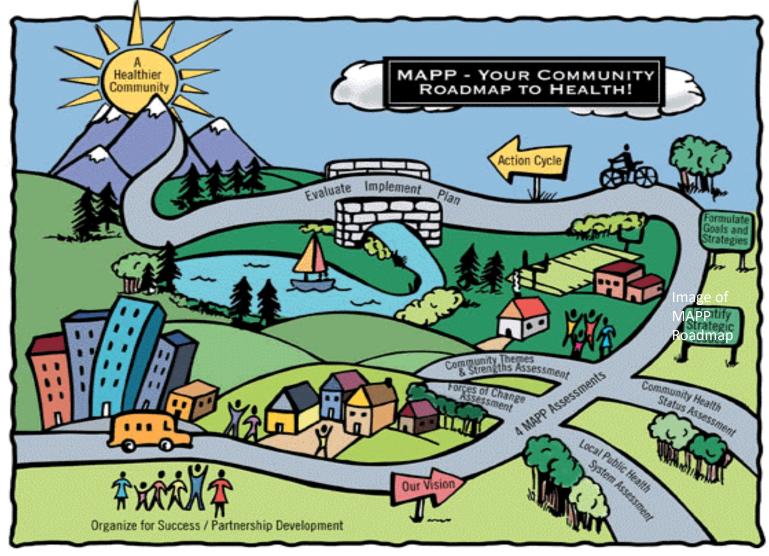
←CHA ←CHIP

Source: NACCHO 2016 National Profile of Local Health Departments





Mobilizing for Action through Planning and Partnerships (MAPP)



Public Health



MAPP Resource Guide for Disability Inclusion

Mobilizing for Action through Planning and Partnerships (MAPP) Resource Guide for Disability Inclusion

"Inclusion is not a strategy to help people fit into the systems and structures which exist in our societies; it is about transforming those systems and structures to make it better for everyone. Inclusion is about creating a better world for everyone."

-Diane Richler, Past President, Inclusion International

The purpose of this resource guide is to provide guidance on how the MAPP process can be inclusive of people with disabilities. The goal is for health departments to have the tools and resources to actively engage people with disabilities and the agencies that serve them in the MAPP process, particularly for inclusion efforts to support community health assessments (CHAs) and development of community health improvement plans (CHIPs).

This guide was adapted using the GRAIDS (Guidelines, Recommendations, and Adaptation Including Disability) systematic approach. GRAIDs helps identify where adaptation is needed and provides recommendations for how best to adapt to make each area inclusive for people with disabilities. To learn more about the GRAIDS process, visit <u>https://bit.ly/2SbYkDD</u> and <u>https://bit.ly/2EzpXST</u>.



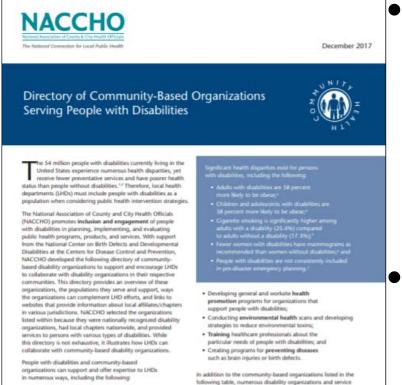


Disability Inclusion





MAPP Phase One: Partnership Development



- Improving accessibility to buildings and other space for people with disabilities;
- Developing methods to screen for chronic diseases among people with disabilities;
- Increasing health literacy and accessibility of health information for people with disabilities;
- Including people with disabilities in the development of emergency preparedness plans and exercises;



CBO Directory Fact Sheet

housing);

· Advocacy Groups;

· Activity Clubs.

· Support Groups; and

providers exist in local jurisdictions, including the following:

· Day Training and Habilitation Centers (e.g., vocational

training centers, job coaching);

· Residential Habilitation Homes (e.g., group homes, supported

- Ensure representation of people with disabilities in MAPP process:
 - Community-based organizations that serve people with disabilities
 - People with disabilities and their caregivers/family members
- Convene meetings and public
 forums in facilities and areas that
 are accessible for people with
 disabilities.
 - Use accessible communication for all meetings and events.



Inclusive Health Coalitions

• Inclusive Health Coalitions (IHCs) are diverse groups of community leaders and organizations focused on promoting disability inclusion in programs and services related to physical activity, nutrition, obesity prevention and health promotion.

For more information:

<u>https://www.nchpad.org/1149/5665/Inclusive~</u> <u>Health~Coalition~Initiative</u>





MAPP Phase Two: Visioning

 Vision statement should include people with disabilities and comply with laws related to disability and civil rights

-ADA National Network: https://adata.org/

• Ensure visioning process is effectively communicated to people with disabilities.





MAPP Phase Three: MAPP Assessments

- Community Health Status Assessment
 - People with disabilities should be considered a distinct demographic group within communities.
 - Disability Counts: http://rtc.ruralinstitute.umt.edu/geography/
- Community Themes and Strengths Assessment
 - People with disabilities should be invited to express their views on the themes and strengths of their community.
 - Community meetings/focus groups
 - Key informant interviews



Surveys



Community Surveys

- Include partner organizations and people with disabilities to develop and provide feedback on the survey.
- Use plain language and an accessible reading level when developing survey questions.
- Community based organizations that serve people with disabilities can help pilot and distribute surveys among their clients.





Community Surveys

- Have alternate formats for the survey
 - Large print
 - Electronic version on an accessible website
 - in-person

Public Health

– Over the phone

Accessible Print Materials Resource: <u>https://www.mass.gov/files/documents/2016/0</u> <u>7/qi/accessible-print-materials.pdf</u>



Community Survey Example

Community Health Assessment Clinton County, New York
15. Do any of the following apply to you? (Select all that apply.)
I am deaf or have serious difficulty hearing.
O I am blind or have serious difficulty seeing, even when wearing glasses.
 Because of a physical, mental, or emotional condition, I have serious difficulty concentrating, remembering, or making decisions.
O I have serious difficulty walking or climbing stairs.
O I have difficulty dressing or bathing.
O Because of a physical, mental, or emotional condition, I have difficulty doing errands alone, such as visiting a doctor's office or shopping.

Public Health

Image of the standard disability questions in a community health assessment Source: Clinton County Health Department, NY



Community Meetings

- Use accessible communication for all community meetings
 - Providing alternative formats of printed materials, such as large print or an electronic version
 - Sign language interpreting or live transcription services;
 - Alternative text descriptions for images.
 - Resource

https://www.naccho.org/uploads/d ownloadable-

resources/HDfactsheet accessiblec Public HealthOmms-Oct2016.pdf

[FACT SHEET] The National Connection for Local Public Health Five Steps for Inclusive Communication: **Engaging People with Disabilities**



October 2016

Background

The National Association of County and City Health Officials (NACCHO) works to promote the highest level of inclusion and engagement of people with disabilities within all local health department (LHD) programs, products, and services. The establishment of accessible communication practices across all LHD activities is critical in supporting this aim. Title II of the Americans with Disabilities Act (ADA) requires state and local government agencies to practice "effective communication," stating "whatever is written or spoken must be as clear and understandable to people with disabilities as it is for people who do not have disabilities."1

This fact sheet provides five action steps for LHDs to ensure that accessibility and inclusion are agency-wide priorities when developing and delivering all forms of communication.



Community-based organizations and individual advocates representing the local disability community are critical partners in fostering accessible communication. They can inform LHDs on the needs and barriers faced by people with disabilities in the context of public health-related communications.

Representatives of this group should be actively involved in improving the accessibility of health department communication over the long-term. LHDs can also use training tools that feature people with disabilities, emphasizing their voice and ask disability organizations to participate in or lead staff trainings.²

RESOURCES

- Directory of Centers for Independent Living and Associations http://bit.ly/11CJWsE
- ADA Hospitality & Disability: At Your Service Video http://bit.ly/1LmifPe



LHDs can communicate effectively by identifying organizations that provide interpretation, transcription, and other communication services in their communities.¹²

RESOURCES:

- National Court Reporters Association Online Sourcebook http://www.ncrasourcebook.com
- Registry of Interpreters for the Deaf, Inc. http://blt.lv/10891n6



What is People-First Language?

People-first language is the most neutral, respectful, and widely recommended choice for professionals.²⁴ Using people-first language involves referring first to the person and then to the disability if, and only if, the disability is relevant to the conversation²³

People with disabilities have valuable skills, experiences, and perspectives to contribute to public health efforts. It is important to use normal adult vocal tone, language, and mannerisms when interacting with all adults, regardless of disability.

LHD staff should assume that everyone can hear and understand what is being said to them and around them, unless told otherwise by the individual or the individual's assistant.

Inclusive Communication Fact Sheet



Community Meetings

- Use people first language if, and only if, the disability is relevant to the conversation. For example, "person with Down syndrome" or "person with brain injury."
- Convene meetings in locations that, at a minimum, comply with the ADA Accessibility Guidelines.

Resource: A Guide to Planning Accessible Meetings <u>https://www.adahospitality.org/accessible-meetings-</u> <u>events-conferences-guide/book</u>





Focus Groups

- Use a trained leader or facilitator.
- Include the agencies that serve people with disabilities **and** people with disabilities.
- Convene focus groups in locations that, at a minimum, comply with the Americans with Disability Act (ADA) Accessibility Guidelines.

Resource: Conducting Focus Groups: <u>https://ctb.ku.edu/en/table-of-</u>

<u>contents/assessment/assessing-community-needs-and-</u> <u>resources/conduct-focus-groups/main</u>





Public Health

Key Informant Interviews

- Let interviewees know there is no right or wrong answer.
- Find out if an interpreter is needed beforehand.
- Make sure to explain hard-to-understand concepts or less familiar terms.
- Take the time to listen. Some people may need additional time to process information and questions or may take a while to respond due to
 p speech disabilities.



Key Informant Interviews

- Including a family member or caregiver in the interview can be helpful for clarification, but speak directly to the person with a disability, allowing them to to talk first.
- Consider if there are any visuals needed to help describe or get a question or concept across
- Plan ahead for interpreters or other needed communication accommodations





MAPP Phase Four: Identify Strategic Issues

- What challenges do people with disabilities experience in your community?
- How can the local public health system improve these challenges?
- What policies related to the health of people with disabilities need to be addressed?





MAPP Phase Five: Formulate Goals & Strategies

Sample Strategic Issue, Goal and Strategy Highlighting Inclusion:

- Strategic Issue: How can the public health community support health promotion program participation for people with disabilities?
- Goal: Increase the number of inclusive physical activity programs in the community.
- Strategy: With the participation of people with disabilities and the agencies that serve them, identify existing physical activity programs in the community and how they
 can be adapted to be inclusive.



CENTER ON HEALTH, PHYSICAL ACTIVITY &

How I Walk Campaign Image







MAPP Phase Six: Action Cycle

- Identify common barriers to participation experienced by people with disabilities
- Barriers can come in many forms such as architectural, programmatic, attitudinal, communication, transportation
- Resource From the Centers for Disease Control and Prevention:

https://www.cdc.gov/ncbddd/disabilityandhealth/disabilitybarriers.html









Commit to Inclusion's 9 Guidelines for Disability Inclusion

- Guidance for ensuring inclusion in programs and policies
- View the Guidelines and make your commitment at <u>www.committoinclusion.org</u>
- Implementation manual at: <u>http://committoinclusion.org/wp-</u> <u>content/uploads/2014/10/Guidelines-</u> <u>Implementations-Manual_final_8MB.pdf</u>



Guidelines for Disability Inclusion in Physical Activity, Nutrition, & Obesity Programs and Policies

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9 Guidelines Implementation Manual





NCHPAD Resources

Communication Planning, Sustainability and Assessment NATIONAL CENTER ON HEALTH, PHYSICAL ACTIVITY & DISABILITY **Community Health Push For Your** Inclusion Sustainability **Planning Guide** nchpad.org COMMUNITY HEALTH **Inclusive Health** INCLUSION **INDEX (CHII)** Communication ON-SITE ASSESSMEN Guidelines HOWIWALK A Campaign to Rebrand Walkina





10 Evidence-Based (Adapted) Programs

Go4Life.















Vids





NCHPAD offers a free information service on a wide variety of topics related to physical activity, health promotion, recreation, sports, leisure, nutrition, disability and chronic health conditions.

Voice & TTY 800.900.8086 Online Live Chat <u>email@nchpad.org</u> <u>www.nchpad.org</u>







Additional Resources to Support Disability Inclusion

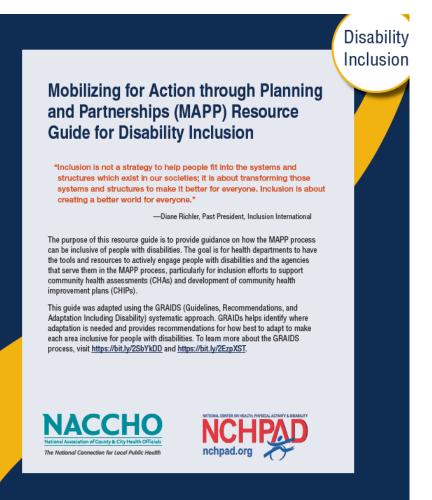




MAPP Resource Guide for Disability Inclusion

Resource Guide is available for download through NACCHO's Publication webpage.

https://www.naccho.org /programs/communityhealth/disability to access guide.





MAPP Resource Guide for Disability Inclusion



Health and Disability 101: Training for Health Department Employees

- NACCHO University Course
- Create free MyNACCHO account to access
- CE credits available in August



Accessibility Button on Computer Keyboard



https://www.pathlms.com/naccho/courses/5037



Health and Disability Toolkit and NACCHO Fact Sheets

 Health and Disability Toolkit <u>http://toolbox.naccho.org/pages/index.html</u>

 NACCHO Health and Disability Fact Sheets https://www.naccho.org/programs/community-health/disability







Disability in Public Health Practice Competencies

- Developed by the Association of University Centers of Excellence in Developmental Disabilities (AUCD) the Centers for Disease Control and Prevention & other partners
- Outlines recent advances in knowledge and practice skills that public health professionals need to include people with disabilities in the core public health functions.



www.disabilityinpublichealth.org



Questions?

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