Embedding Disability Inclusion in Public Health: Strategies to Strengthen Systems and Workforce Capacity

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Funding Acknowledgment

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Interact and Engage

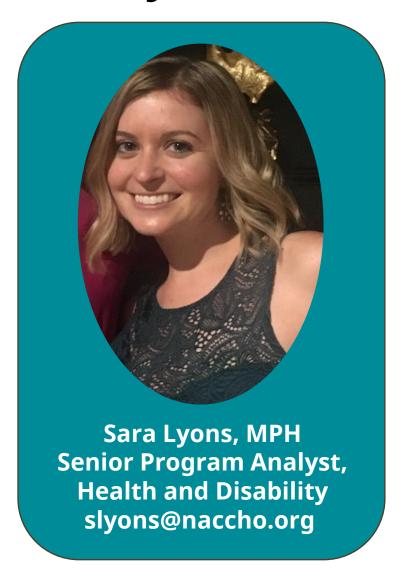| Ask Questions	View Closed Captions (CC)	Share Feedback	Recording & Slides
• Submit your questions at any time using the Q&A box.	• Live captions are available—click the "CC" or "Show Captions" button to turn them on.	• A short feedback survey will pop up when you exit the webinar.	• A link to the webinar recording and a copy of the slides will be emailed to all registrants.

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NACCHO Health & Disability Team

Uyen Tran, MPH
Program Analyst,
Health and Disability
utran@naccho.org

Sara Lyons, MPH
Senior Program Analyst,
Health and Disability
slyons@naccho.org

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Learning Objectives

- Describe policy, systems, and environmental strategies that support the inclusion of people with disabilities in public health programs and services.

- Identify ways local health departments can integrate disability expertise into their workforce and core public health functions.

- Apply recommendations to strengthen organizational capacity and advance disability inclusion within public health practices.
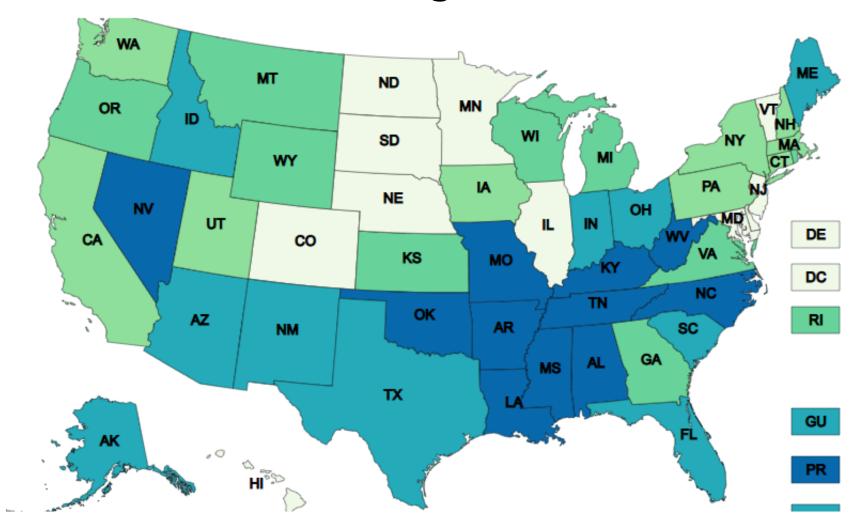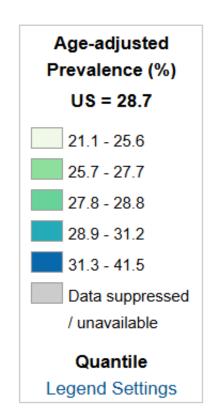
NACCHO's Health and Disability Program

- Supported by the National Center on Birth Defects and Developmental Disabilities (NCBDDD) at the Centers for Disease Control and Prevention

- Promotes the **inclusion** and **engagement** of **people with disabilities** in all local health department activities including:
  - o Planning;
  - o Implementation; and
  - o Evaluation of public health programs, products, and services.

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Disability Status Among Adults 18 Years Of Age Or Older (2022)

Project Overview

NACCHO conducted a landscape analysis to identify systems-level strategies that help local health departments (LHDs) build workforce capacity and embed disability expertise into core public health practices.

The project focused on advancing policy, systems, and environmental (PSE) changes to ensure public health services are inclusive of people with disabilities.

Key activities included:

- A desk review of relevant literature and frameworks
- Key informant interviews with public health and disability experts
- Development of a recommendations report to guide workforce and systems change

Methodology

Desk Review

Analyzed over 56 online resources (peer-reviewed articles, grey literature, national disability policies and disability competencies).

Key Findings

- **Public Health Education Challenges:** No clear guidance on how to integrate disability competencies into public health education (Sinclair, 2015).

- **Training Gaps:** Public health lacks standardized disability education and training, leading to inconsistent knowledge and practices across local health departments (Havercamp et al., 2021).

- **Representation & Partnerships Needed:** Limited integration of people with disabilities in program planning, decision-making, and implementation processes (Lee et al., 2023; Chandan, 2025).

- **Improving Disability Data:** Disability-related data remains limited and is often underutilized in public health planning tools (Swenor et al., 2024; Breslin & Yee, 2024).

Key Informant Interviews

Purpose: Explore policy, systems, and environmental changes to embed disability inclusion and build workforce capacity.

Method: 7 key informant interviews with state-level programs, academic institutions, disability nonprofits, and past NACCHO health and disability fellows.

Key Takeaways

- Public health continues to fall short in addressing the needs of one of the most underserved populations.
- Short-term funding limits sustainability.
- Small/rural LHDs struggle to qualify for grants.
- Disability inclusion training is inconsistent.
- Lack of disability representation in the field.

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Recommendations

Policies, Systems and Environmental Strategies

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Disability Inclusion in Public Health Education and Training

Why It Matters: Builds foundational knowledge for inclusive, accessible public health practice.

Key Actions:

- **Integrate existing disability frameworks** into core education and training.

- **Require Disability 101 training for all staff**, co-developed with disability organizations and people with lived experience.

- **Include disability inclusion in public health curricula, certification exams, and continuing education** through accrediting and credentialing bodies

Integrate Disability Inclusion into Accreditation & Planning

Why It Matters: Embedding inclusion in planning ensures services reflect all community needs and improves health system responsiveness.

Key Actions:

- Add disability indicators in **Community Health Assessment (CHAs) and Community Health Improvement Plan (CHIPs)**

- Partner with **disability organizations and people with lived experience**

- Set inclusive goals (e.g., accessible transit, disability etiquette training)

Support from Accreditation:

- **Accreditation bodies,** like PHAB, should include disability inclusion in standards and workforce development

- Make disability inclusion part of **reaccreditation criteria**

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Voices from the Field: Training & Strategic Planning

"It's not enough to have just continuing education for professionals that are already practicing—these trainings have to be embedded in education programs."
– Key Informant

"Talking more about disability and sharing concrete examples during CHA/CHIP training—like reducing transit wait times or training providers on disability etiquette—really makes a difference."
– Key Informant

Standardize & Use Disability Data in Public Health

Why It Matters: Standardized disability data helps identify disparities, improve services, and ensure full community representation.

Key Actions:

- Use standardized tools like the **American Community Survey (ACS) 6-question set**

- Integrate disability questions in surveys and intake forms (e.g., quit line survey)

- Train staff on **inclusive data collection**

- Partner with **disability-led organizations** to guide data priorities and ensure accessibility

"If you're not focusing on disability as a population, you're really missing a fourth of your population." – Key Informant

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Center People with Disabilities as Public Health Partners

Why It Matters: Collaborating with people with disabilities and disability organizations ensures public health efforts are grounded in lived experience and community trust.

Key Actions:

- **Leverage existing expertise** with organizations like:
  - University Centers for Excellence in Developmental Disabilities (UCEDDs)
  - Special Olympics chapters
  - Developmental Disability Councils
- **Create a local Disability Inclusion Task Force** with local health departments, community partners, and academia
- **Involve people with lived experience**—and compensate them for their contributions

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Voices from the Field: Building Community Partnerships

"Centers for Independent Living (CILs) know the community, they have deep relationships, and they'll link you to individuals, family members, direct support professionals—just start by showing up to a CIL event."
– Key Informant

Disability-Led Organizations

- Designed and operated by individuals with disabilities

- Offer peer support, advocacy, and systems change

- Example: Center for Independent Living

Disability Service Organizations

- Provide services for people with disabilities

- Examples:
  - Advocacy and education organizations
  - Rehabilitation services
  - Developmental disabilities programs

Develop An Inclusive Public Health Environment

Why It Matters: Inclusion requires intentional changes across communication, staffing, infrastructure, and leadership.

Key Actions:

- **Use plain language and universal design** in all communication

- **Hire dedicated disability inclusion staff** (preferably with lived experience)

- **Ensure leadership buy-in** to prioritize disability in funding and workforce development

- **Ensure accessibility in physical and program spaces**
  - **Example: Conduct an accessibility walk-through** with a community partner (e.g., CILs) to identify physical and programmatic barriers

"It's easy to forget that plain language applies to everything—not just one document, but emails, websites, and all communication."– Key Informant

Foster a Cultural Shift Toward Disability Inclusion

Why It Matters: Disability inclusion is a core public health responsibility—not a siloed initiative.

Key Actions:

- **Start small with scalable practices** to build internal momentum
  - o Updating emergency plans
  - o Using plain language
  - o Creating peer learning collaboratives or workgroups
- **Reframe internal policies** to include disability in data, funding, and planning
- Adopt the **social model of disability**—remove barriers instead "fixing" disability
- Recognize disability as a **core demographic**, like race or gender

Voices from the Field: Disability Culture Shift

"We keep trying to solve it at the programmatic level. But what the disability community is saying is, 'No, we need a societal change.'"
– Key Informant

Thank You & Q&A

Thank you for joining us today!

We now have time for questions.

Please submit your questions using the Q&A tool.

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Resources

Trainings

- [Health and Disability 101 Training](#)
- [Leveraging Partnerships with Disability Organizations](#)
- [Health Professional Training | NH Disability and Health Program](#)

Guides

- [Partnership Guide for Centers for Independent Living and State and Local Health Departments](#)
- [Mobilizing for Action through Planning and Partnerships (MAPP) Resource Guide for Disability Inclusion](#)
- [Core Competencies on Disability for Health Care Education](#)
- [Including People with Disabilities: Public Health Workforce Competencies](#)
- [Guidelines for Including People with Disabilities in Health Promotion Programs](#)

Partnerships

- [Centers for Independent Living](#)
- [Special Olympics](#)
- [University Centers for Excellence in Developmental Disabilities (UCEDD)](#)

Post-Webinar Survey

We appreciate your participation in today's webinar on Embedding Disability Inclusion in Public Health Workforce.

📣 We would love your feedback!
Please take a minute to complete our post-webinar survey.

📱 Scan the QR code or follow the link after the webinar ends.

💻 Visit NACCHO's Health and Disability webpage for more tools, resources and trainings: https://www.naccho.org/programs/community-health/disability

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