The findings and conclusions in this Chartbook are those of the authors and do not necessarily represent the views of the Centers for Disease Control and Prevention.
Credits

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**Alternative Formats or Additional Copies**

*The Disability and Health State Chartbook, 2006* is available in an electronic format and in a screen-readable format at [www.cdc.gov/ncbddd/dh](http://www.cdc.gov/ncbddd/dh).

This book was designed to be printed in either black and white or in color. Therefore, we encourage you to print as many pages as you need from the website or copy additional pages from the book. If you would like an additional bound copy, please contact:

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“Every life has value and every person has promise. The reality is that for too long we provided lesser care to people with disabilities. Today, we must redouble our efforts so that people with disabilities achieve full access to disease prevention and health promotion services.”

Richard H. Carmona, MD, MPH, FACS

U.S. Surgeon General
Surgeon General’s Call to Action to Improve the Health and Wellness of Persons with Disabilities
July 26, 2005
Message to Readers

I am pleased to present the Disability and Health State Chartbook, 2006: Profiles of Health for Adults With Disabilities. This book is the first in a series of chartbooks on the health of people with disabilities. This chartbook performs three important functions:

1. Presents the prevalence of disability among adults at the state level (please see Appendix B for a definition of prevalence.)
2. Shows how health behaviors and access to health services differ between people with and without disabilities in each state.
3. Identifies areas for reducing differences in health outcomes.

I hope readers will use this information to develop and refine state and community programs so they are more inclusive of people with disabilities. By including people with disabilities in health programs, we can begin to address health disparities that are identified in this book.

Since the Americans with Disabilities Act was passed 15 years ago, we have removed or reduced many social barriers. Buildings are more accessible. Employment opportunities are greater. This has enabled people with disabilities to become more independent and involved in their world. But are they healthier?

Often they are not. The findings in this chartbook show that people with disabilities generally report poorer health than people without disabilities. Also, people with disabilities often smoke more, are more often obese, and get less exercise than people without disabilities. Their health problems may require different solutions than people without disabilities. How can a man get enough exercise if he uses a wheelchair? Does a woman with a cognitive disability know where to get a flu shot? We can help people with disabilities become healthier by including them in smoking cessation programs, community fitness programs, and health messages.

I join the U.S. Surgeon General in his 2005 Call to Action to Improve the Health and Wellness of Persons with Disabilities. And I hope you will, too. Together we can help to ensure that people of all abilities enjoy healthier, richer, and more satisfying lives.

José F. Cordero, MD, MPH
Director, National Center on Birth Defects and Developmental Disabilities
Introduction

About 50 million American adults have a disability, such as hearing loss, mental disability, physical limitation, or vision loss. Improving the health of this large segment of the population is a central concern for public health. This Chartbook is the first in a series to present information about the health of people with disabilities by state and territory. It has three purposes: 1) to show that a large percentage of adults have a disability, 2) to show that the health of people with disabilities tends to be poorer than that of the people without disabilities, and 3) to highlight areas in which public health systems can better target people with disabilities in their programs.

The information in this book can be used by people with disabilities, their family members, policy makers, health professionals, disability service providers, and others interested in the health and well-being of people with disabilities.

What do we mean by “people with disabilities”?
We know that people have many types of disabilities. Some disabilities are easy to see, such as when a person uses a wheelchair or when someone has lost an arm. Other disabilities, like intellectual disability (mental retardation) or a chronic condition like arthritis, may not be as easy to see. Some people may live with a disability all their lives. Others may have a disability when they are young or as an older adult.

Good health is important for all people, including people with disabilities. Sometimes it can be more difficult for a person with a disability to live a healthy life. For example, people who use wheelchairs may not be able to get into a gym to exercise, or a person who is deaf may not be able to communicate directly with his or her doctor. Public health and people with disabilities must work together to remove barriers to health.

What does this Chartbook do?
This book does three important things:

1. It displays the number and percent of adults with a disability by state and territory. This book also breaks down the numbers by age, sex, and race/ethnicity.
2. This book presents information about the health of adults with a disability and those who do not have a disability. In many ways, people with a disability are less healthy than people without a disability.
3. Finally, this book shows some of the health issues that can be addressed by people with disabilities, their families, public health departments, and disability service
programs. By addressing these differences, people with disabilities can live healthier lives.

Where did the information in this book come from?
The information for this Chartbook came from the Behavioral Risk Factor Surveillance System survey (BRFSS survey). The BRFSS survey (http://www.cdc.gov/brfss/) is a state-based health survey in which people agree to answer questions about their health. The survey also collects information about behaviors that affect health (such as smoking and exercise), health care practices (such as getting a flu shot), and access to health care (such as having health insurance).

The BRFSS survey is a telephone survey done every year by each state or territory health department. The survey has three parts. The first part consists of questions that are used in every state. The second part has sets of developed questions that states may choose to ask. The third part consists of questions that states may develop on their own.

Any resident of the United States who has a phone might be called (but not people who only have cell phones). Some groups of people are not included in the BRFSS. Children under 18 years of age and people who are in an institution, such as a jail, nursing home, or hospital, are not included in the survey. People who do not have a telephone and those who do not speak either English or Spanish are not included. Some people who have a disability may not be included because they do not understand the questions (such as people with intellectual disability), cannot get to the phone before it stops ringing (such as people who do not walk), or people who use a special telephone that sounds to the caller like a fax machine (such as people who are deaf).

In the BRFSS survey, people are considered to have a disability if they answer “Yes” to one or both of the following questions:

1. Are you limited in any way in any activities because of physical, mental, or emotional problems?
2. Do you now have any health problem that requires you to use special equipment, such as a cane, a wheelchair, a special bed, or a special telephone?

The United States has a national plan to improve the nation’s health, called Healthy People 2010 (HP2010). HP2010 includes a list of the major health concerns for the United States, known as the leading health indicators. These indicators help people and their communities focus on actions that can improve health. The BRFSS survey collects information about some of these indicators every year. The yearly survey helps to track the progress of health programs and shows if the health programs are meeting the
HP2010 goals. The BRFSS survey collects information on a number of these health indicators for each state including obesity, smoking, physical activity, immunization (shots), and health care access. This Chartbook includes information on these indicators.

**What does this Chartbook tell you about each state?**
There are two pages for each state or territory. The first page has an outline of the state that shows the estimated (rounded to the nearest thousand) number and percentage of adults in the state who have a disability. The precise estimate and the confidence interval are included in the data tables in Appendix B. It also shows the number and percentage of men and women who have a disability. Figures 1 and 2 show the percentage of people with a disability by age and race/ethnicity.

The second page contains graphs about the health of adults with a disability (in black bars on the charts) and adults without a disability (in gray bars on the charts) so that the health of the two groups can be compared. Figure 3 shows the percentages of adults who report their health to be excellent or very good compared with fair or poor. Figures 4a, 4b, 4c, and 4d show how people with and without disabilities compare on percentages of obesity, smoking, exercise, immunizations (for flu or pneumonia), health insurance, and having a regular doctor.

**How can you use this information?**
The information in this Chartbook can be shared with leaders and decision makers in your community, state, or territory. It is important that everyone understands that a person with a disability can be as healthy as someone without a disability. But, if people with disabilities smoke too much, do not get enough exercise, or cannot get health care, then they may not be as healthy. Laws, policies, and programs that help people with healthy choices and behaviors or remove barriers to them will ensure that people with disabilities have the best chance of being healthy.

For example, a person who uses a wheelchair may want to take a class about how to stop smoking—the building where the class is located needs to have ramps and elevators so that a person can get to the class. A person with poor eyesight may need information in large print about how to exercise. These are two examples of how people with disabilities can have access to the health resources used by people who do not have a disability.

Where can you get more information about improving the health of people with disabilities?
Many resources about how people with disabilities can improve their health are available to them, their families, and service providers. The organizations in the following section
can provide information to people across the country about how to improve their health. In addition, your local or state health department is also a good resource for health programs available in your community.
Resource Pages

Disability and Health Program
Centers for Disease Control and Prevention (CDC)
www.cdc.gov/ncbddd/dh/
800-CDC-INFO (800-232-4636)

National Information Centers

Many national organizations support the health promotion of people with disabilities. The following is a select list of these organizations. All of these organizations are supported by funding from the Disability and Health Program at the CDC.

American Association for Health and Disability (AAHD)
www.aahd.us
301-545-6140

Amputee Coalition of America (ACA)
www.amputee-coalition.org
888-267-5669

Christopher & Dana Reeve Paralysis Resource Center (PRC)
www.paralysis.org
800-539-7309

National Center on Physical Activity and Disability (NCPAD)
www.ncpad.org
800-900-8086

Special Olympics
www.specialolympics.org
202-628-3630

Spina Bifida Association of America (SBA)
www.sbaa.org
800-621-3141
State and Territory Programs for Disability and Health and for Health Promotion and Education

There are state offices that may provide more information about how to be healthy with a disability. The Disability and Health Program at CDC supports 16 state-level programs to improve the health and quality of life for people with disabilities in those states. In the list that follows, the highlighted states have a CDC-funded Disability and Health program.

CDC also supports health promotion and education at the state and territory level. An office and phone number for the health promotion and education office are listed for each state.

Alabama
Bureau of Health Promotion and Chronic Disease
334-206-5300

Alaska
Section of Chronic Disease Prevention and Health Promotion
907-465-3140

Arizona
Office of Chronic Disease Prevention and Nutrition Services
602-542-1886

Arkansas
Partners for Inclusive Communities
www.uams.edu/partners
501-682-9900

Life Stages Branch
501-661-2334

California
Office on Disability and Health’s Take Action! Project
www.dhs.ca.gov/epic/odh/
916-552-9840

State and Local Injury Control Section
916-552-9859

Colorado
Prevention Services Division
303-692-2567

Connecticut
Office of Multicultural Health/Comprehensive Cancer Section
860-509-7804

Delaware
Healthy Delawareans with Disabilities: 2010 Project
www.hdwd2010.com
302-744-9600

Health Promotion and Disease Prevention Section
302-741-2901

District of Columbia
Primary Health Care
202-442-8984

Florida
Bureau of Chronic Disease Prevention and Health Promotion
850-245-4330

Georgia
Chronic Disease Prevention and Health Promotion
404-657-6611

Hawaii
Chronic Disease Management and Control Branch
808-586-4609

Idaho
Bureau of Community and Environmental Health
208-334-5927
Illinois
Office of Health Promotion
217-785-4093

Indiana
Office of Public Affairs
317-233-1325

Iowa
Bureau of Disability and Violence Prevention
www.idph.state.ia.us/bhpl/disability_health.asp
515-281-6646

Bureau of Nutrition and Health Promotion
515-281-4919

Kansas
Injury and Disability Prevention Programs
www.kdheks.gov/idp
785-296-8163

Office of Health Promotion
785-296-8916

Kentucky
Division of Adult and Child Health Improvement
502-564-7996 extension 3814

Louisiana
Center for Community Preparedness
225-763-3965

Maine
Division of Chronic Disease
207-287-4064

Maryland
Center for Health Promotion, Education, and Tobacco Prevention
410-767-1362
Massachusetts
Office on Health and Disability
www.mass.gov/dph/fch/ohd
617-624-5070

Division of Health Promotion
617-624-5449

Michigan
Cardiovascular Health, Nutrition and Physical Activity Section
517-335-9811

Minnesota
Disability Health Project
www.health.state.mn.us/injury/topic/topic.cfm?gcTopic=15
651-201-5448

Center for Health Promotion
651-201-5401

Mississippi
Office of Preventive Health
601-576-7781

Missouri
Division of Community and Public Health
866-726-9926

Montana
Disability and Health Program
http://mtdh.ruralinstitute.umt.edu/
406-243-2460

Cardiovascular Health Program
406-444-4105

Nebraska
Office of Disease Prevention and Health Promotion
402-471-9270

Nevada
Bureau of Community Health
775-684-5900

New Hampshire
Nutrition and Health Promotion Section
603-271-4551

New Jersey
Chronic Disease Prevention and Control Services
609-292-8540

New Mexico
Office of Disability and Health
www.health.state.nm.us/preview/odh
505-827-0884

Public Health Division
505-476-3082

New York
Disability and Health in New York State
www.health.state.ny.us/nysdoh/prevent/main.htm
518-474-2018

Bureau of Health Media and Marketing
518-474-5370

North Carolina
Office on Disability and Health
www.fpg.unc.edu/~ncodh
919-707-5672

Physical Activity and
Nutrition Branch
919-707-5216
North Dakota
Healthy North Dakota
701-328-2372

Ohio
Bureau of Health Promotion and Risk Reduction
614-466-2144

Oklahoma
Community Development Service
405-271-6127

Oregon
Office on Disability and Health
http://cdrc.ohsu.edu/oodh
503-494-3331

Health Promotion and Chronic Disease Prevention Section
971-673-0984

Pennsylvania
Bureau of Health Promotion and Risk Reduction
717-787-6214

Rhode Island
Disability and Health Program
www.health.ri.gov/family/disability/index.php
401-222-4616

Office of Health Promotion and Wellness
401-222-6054

South Carolina
Disability and Health Project
http://help.med.sc.edu
803-434-2445

Department of Health and Environmental Control/Office of Public Health Education
803-898-0811
South Dakota
Office of Health Promotion
605-773-3737

Tennessee
Health Promotion Division
615-741-0380

Texas
Health Promotion Unit
512-458-7534

Utah
Center for Persons with Disabilities
www.cpd.usu.edu
435-797-1981

Healthy Utah
801-538-6261

Vermont
Division of Health Improvement
802-863-7330

Virginia
Division of Chronic Disease Prevention and Control
804-864-7877

Washington
Disability and Health Program
www.doh.wa.gov/cfh/mch/Genetics/Disability_and_Health.htm
253-395-6744

Office of Health Promotion
360-236-3736

West Virginia
Division of Health Promotion and Chronic Disease Prevention
304-558-0644

Wisconsin
Bureau of Community
Health Promotion
608-266-9823

Wyoming
Preventive Health and Safety Division
307-777-7172

Guam
Health Education Section
671-735-0670

Puerto Rico
Secretaría Auxiliar para la Promoción de la Salud
787-274-5762

U.S. Virgin Islands
Bureau of Health Education
340-773-1311