

# A Report on the Health of People with Developmental Disabilities in Arkansas

Arkansas's Disability & Health Program  
*a program of Partners for Inclusive Communities—UAMS*

## What is a developmental disability?

Arkansas Statute Annotated §20-48-101 and Arkansas Act 729 of 1993 defines a developmental disability as a diagnosis of mental retardation, cerebral palsy, epilepsy, autism, or a disorder closely related to one of these conditions before the age of 21.

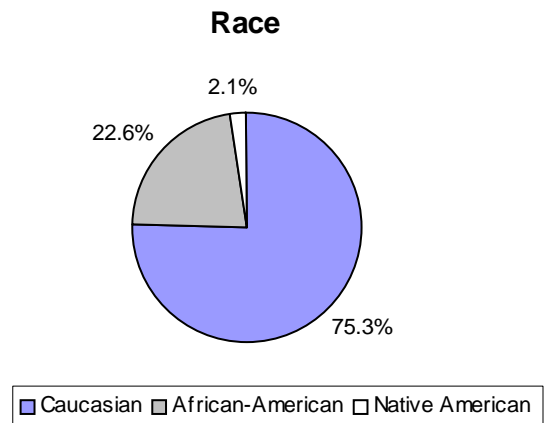
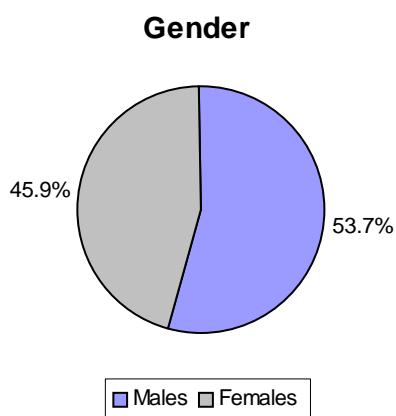
## Disability in Arkansas

Nationally, 19 percent of people surveyed reported they were limited in some way in some activities because of physical, mental, or emotional problems. (2005 Behavioral Risk Factor Surveillance System [BRFSS]) In Arkansas approximately one in five (21.5%) report disabilities. (2005 Chartbook on Disability in Arkansas) However, since people with ***developmental*** disabilities do not typically have the opportunity to participate in telephone surveys and most health surveys are not accessible, their health information is not captured.

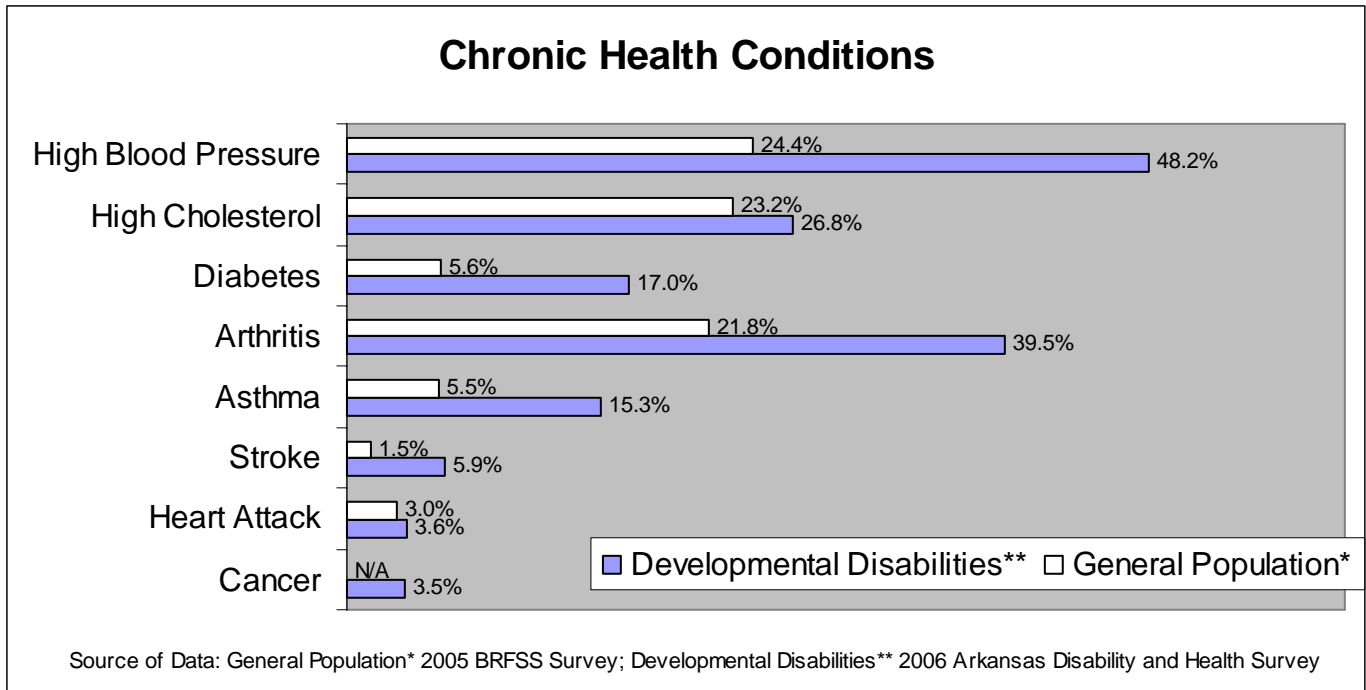
Much of the information available regarding the health of Arkansans comes from the Behavioral Risk Factor Surveillance Survey (BRFSS), a random telephone survey of adults that collects information about health status, health behaviors, and use of health services in Arkansas and the United States. The Arkansas Disability and Health Program staff adapted the BRFSS (including pictures, abbreviated response sets, and face to face interview) to capture health information from individuals with developmental disabilities.

## Who Completed the Survey?

The survey was completed with 95 participants ranging in age from 18-69 with an average age of 37.



## Chronic Health Conditions

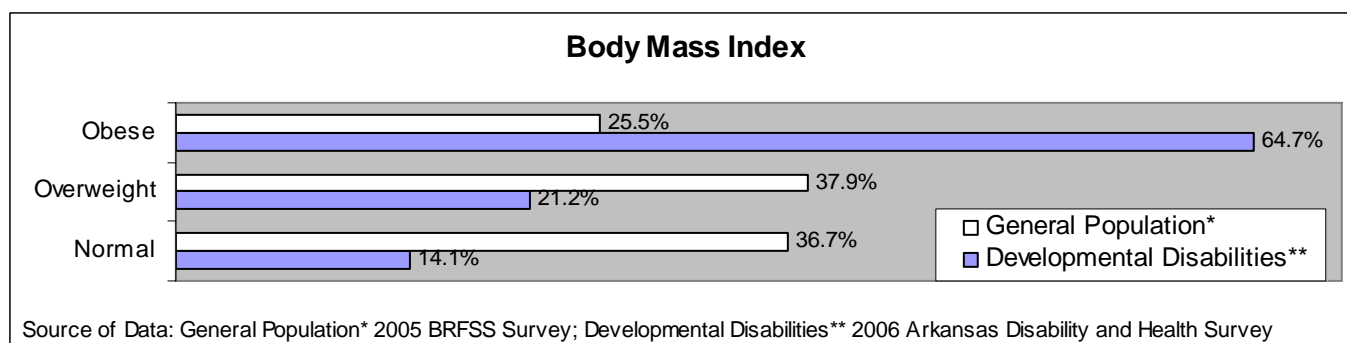


A major focus in public health is the high rate of chronic diseases. Chronic disease rates are even higher among people with developmental disabilities. When surveyed, 65.3 percent of people with developmental disabilities reported that they had one of the chronic conditions in the chart above, and 43.2 percent had more than one condition. In most cases, people with developmental disabilities report chronic disease rates two to three times that of the general population. For example, 24.4 percent of the general population report having high blood pressure while 48.2 percent of individuals with developmental disabilities reported being told that they had high blood pressure. While people with developmental disabilities reported only slightly higher rates of cholesterol issues, they had three times the rates of diabetes and asthma. Arthritis affects 39.5 percent of people with developmental disabilities, but only 21.8 percent of Arkansans without disabilities.

These data provide public health policy makers and public health programs in Arkansas with valuable information about the needs of their constituency. In fact, these data point to significant health disparities. Many barriers still exist for individuals with developmental disabilities who want to learn more about how to improve their health. Public health programs designed for cancer prevention, diabetes management, arthritis, and cardiovascular health, need to be made available to persons with all types of disabilities—including people with developmental disabilities. This means developing materials in alternative formats, and using inclusive messages and methods in public awareness campaigns. These public health programs promote healthy behaviors which can improve health outcomes. Behaviors such as weight control, tobacco cessation, regular physical activity and good nutrition impact chronic disease severity.

## Health Risk Factors

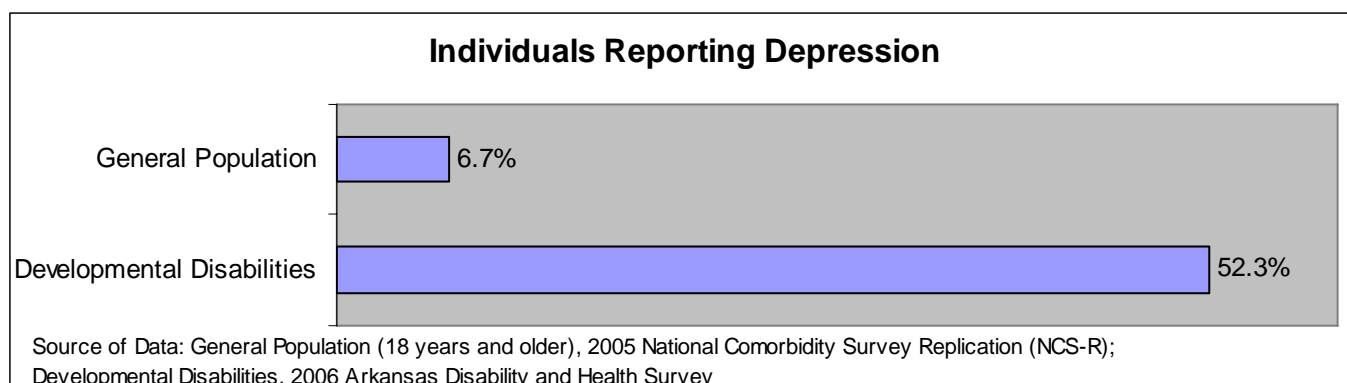
Changing lifestyle and behaviors can reduce the severity of major diseases and health conditions. According to the 2005 BRFSS, 21.9 percent of Arkansans were current smokers and 41.9 percent drank alcohol in the last 30 days. Individuals with developmental disabilities do not seem to share the same negative health habits; with only 17.4 percent being current smokers and 20 percent reporting any alcohol use in the past year. People with developmental disabilities reported good exercise habits with 73.8 percent exercising several days a week. Many disability service providers recognize the need to encourage positive health behaviors and have included exercise and health information programs as part of their services.



Obesity is a known risk factor for heart disease, stroke, hypertension, diabetes, and other chronic conditions. Arkansans with developmental disabilities have obesity rates of 64.7 percent compared with only 25.5 percent of the general population. According to Dr. James Rimmer from The National Center on Physical Activity and Disability, the fitness levels of individuals with developmental disabilities are much lower, they tend to carry more weight and higher amounts of body fat than individuals in the general population. (Rimmer, Braddock, & Fujiura 1988)

## Mental Health

Arkansans with developmental disabilities report extremely high rates of depression (52.3%) compared with the general population (6.7%). More assistance needs to be available for people with developmental disabilities who try to access mental health services. Mental health providers need adequate training to expand and provide effective services to people with developmental disabilities.



## Summary & Recommendations

This survey was the first attempt to capture health information from people with developmental disabilities. More adapted surveillance techniques are needed to provide ongoing surveillance information to policy makers and public health programs. This report of the health of people with developmental disabilities leads us to the following conclusions:

- **People with developmental disabilities have significant health disparities in the areas of chronic disease, obesity, and mental health.**
- **These data should inform policy makers to address the health needs of people with developmental disabilities.**
- **Public health awareness campaigns need to be available to people with disabilities through the development of materials in alternate formats and inclusive messages.**
- **Developmental disability service providers should support individuals by offering health information in alternative and adaptive formats (augmenting text with pictures and using fewer words).**
- **Because people with developmental disabilities rely on health professionals for most of their health information (48.4%), physicians need access to inclusive formats of health promotion materials.**
- **Access to mental health services are critical to addressing the high rates of depression among people with developmental disabilities.**
- **To improve this access, mental health providers need training to provide effective services and to increase knowledge of the needs.**
- **Implement recommendations from Arkansas's Strategic Plan for Promoting the Health and Wellness of People with Disabilities.**



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*Promoting the health of Arkansans with disabilities.*

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