



# Health Needs Assessment of People with Disabilities in Massachusetts, 2013 **Executive Summary**

**Prepared by:**

Monika Mitra, PhD  
Christine J. Clifford, MHP  
Lauren D. Smith, MPH

University of Massachusetts Medical School

Bridget Landers, BS  
Rachel Tanenhaus, MPH  
Georgia Simpson May, MS

Health and Disability Program  
Office of Health Equity  
Massachusetts Department of Public Health

Funded by a grant from the Centers for Disease Control and Prevention's Office of Disability and Health (Grant # U59DD000940-01; CDC-RFA-DD12-1204).

## Executive Summary

The Disability, Health and Employment Unit, at the Center for Health Policy and Research, University of Massachusetts Medical School (UMMS) conducted an assessment of the health needs of people with disabilities on behalf of the Health and Disability Program (HDP), Office of Health Equity, Massachusetts Department of Public Health. The assessment was conducted to meet the Centers for Disease Control and Prevention (CDC) funding requirements of the Health and Disability Program and provided an in-depth examination of the health needs of people with disabilities in Massachusetts. This assessment provides comprehensive information on the unmet public health needs and priorities of the disability community in Massachusetts to enable HDP to prioritize its programmatic goals and objectives and better understand and meet the needs of Massachusetts residents with disabilities.

A multi-prong approach was used to collect data for this needs assessment. The sources of data include: (1) an existing health survey of adults in Massachusetts, (2) an online community survey of the health needs of people with disabilities in Massachusetts, and (3) interviews with key informants from the Massachusetts disability community.

### **(1) Data from the MA BRFSS**

Section 1 of this report includes findings from the analysis of data from the 2011 Massachusetts Behavioral Risk Factor Surveillance System (MA BRFSS), a health survey of Massachusetts adults living in the community. The 2011 Massachusetts questionnaire can be found at <http://www.mass.gov/eohhs/docs/dph/behavioral-risk/survey-11.pdf>. The 2011 MA BRFSS data is the most recent data available as of the development of this report. However, certain health measures were not collected in the Massachusetts 2011 survey; for those measures the most recent data from 2010 was included and is noted accordingly. Most of the data in this

report were taken from *A Profile of Health Among Massachusetts Adults, 2011, Results from the Behavioral Risk Factor Surveillance System*.

## **Major Findings**

Analysis of the MA BRFSS depicts significant differences in health among people with disabilities compared to those without disabilities in Massachusetts. Adults with disabilities were more likely to report poor physical and mental health, chronic conditions like diabetes and asthma, being current and lifetime smokers, lifetime sexual violence and unintentional falls in the past three months.

## **(2) Findings from the Survey of Health Needs of People with Disabilities in Massachusetts**

The purpose of the online survey was to collect data on the health needs and priorities of the Massachusetts disability community and to seek data from sources other than traditional health surveys. 865 individuals representing the spectrum of the disability community in Massachusetts voluntarily completed the online survey. Respondents were more likely to be:

- Female (75%),
- Between the ages of 55-64 (32%),
- White (87%),
- Heterosexual (81%), and
- Identify their ethnicity as American (70%).

Thirty-nine percent of respondents identified themselves as being a person with a disability and 35% identified as family/guardian/caregiver of either an adult or child with a disability.

## **Major Findings**

Each respondent answered a series of questions aimed at prioritizing the health needs of the disability community in Massachusetts. Respondents were asked to identify if the topic was a

“Big Problem,” “Small Problem,” or “No Problem.” The top ten categories identified as a “Big Problem” were:

1. Affordable housing (77%);
2. Adequate dental care (64%);
3. Adequate mental health services (62%);
4. Finding a doctor who is sensitive to disability issues (55%);
5. Transportation to doctor’s appointments (54%);
6. Communication supports, such as large print, Braille, CART readers, etc. (52%);
7. Managing chronic conditions, such as diabetes (50%);
8. Paying for prescription medications (48%);
9. Finding a doctor who accepts public health insurance (48%); and
10. Accessible gyms (45%).

### **(3) Personal Interviews**

We collected in-depth qualitative data from six key informants of the Massachusetts disability community. The informants were selected by the UMMS evaluation team in collaboration with HDP staff. The selected individuals represented a spectrum of the disability community, including a parent advocate, leaders of independent living organizations and other disability advocacy groups, and a representative from a city commission for people with disabilities.

### **Major Findings**

The stakeholders were asked to identify the most significant health concerns facing people with disabilities in Massachusetts. The findings from interviews with the six stakeholders were categorized into four themes:

1. Communication barriers faced by people with disabilities,
2. Need for cultural competency to address differences through the lens of race and ethnicity as well as disability,

3. Inaccessible and fragmented health care system which included a range of issues from inaccessible medical equipment to the lack of coordination in the delivery of health care and other services for people with disabilities, and
4. Lack of in-depth health data on people with disabilities in MA.

## Acknowledgements

Funding for this project was provided through a grant from the Health and Disability Program (HDP), Office of Health Equity, Massachusetts Department of Public Health, funded through the Centers for Disease Control and Prevention's Office of Disability and Health (Grant # U59DD000940-01; CDC-RFA-DD12-1204).

We are deeply grateful to the respondents of the needs assessment without whose time and commitment this needs assessment would not have been possible. We thank the Health and Disability Partnership members for their help in designing the approach and methods of the needs assessment. In addition, we thank the six community stakeholders: Derrick Dominique, Jill Hatcher, Michael Muehe, Leo Sarkissian, Stacie Selfridge, and Florette Willis, who graciously agreed to be interviewed for this project. We would like to thank the respondents to the MA BRFSS survey for their participation.

We are also thankful to Bonnie Andrews Deputy Director of the Office of Statistics and Evaluation in the Bureau of Community Health and Prevention for her invaluable and timely assistance in developing the map of survey respondents and Dr. Shelley Goodgold for her work as initial needs assessment consultant to HDP.

For more information, please contact:

**Georgia Simpson May**  
Director, Office of Health Equity  
Massachusetts Department of Public Health  
[Georgia.Simpson.May@state.ma.us](mailto:Georgia.Simpson.May@state.ma.us)  
(617) 624-5590

or

**Monika Mitra, PhD**  
UMass Medical School  
Center for Health Policy and Research  
[Monika.Mitra@umassmed.edu](mailto:Monika.Mitra@umassmed.edu)  
(508) 856-8548



333 South Street, Shrewsbury, MA 01545  
[healthpolicy@umassmed.edu](mailto:healthpolicy@umassmed.edu)  
[www.umassmed.edu/chpr](http://www.umassmed.edu/chpr)