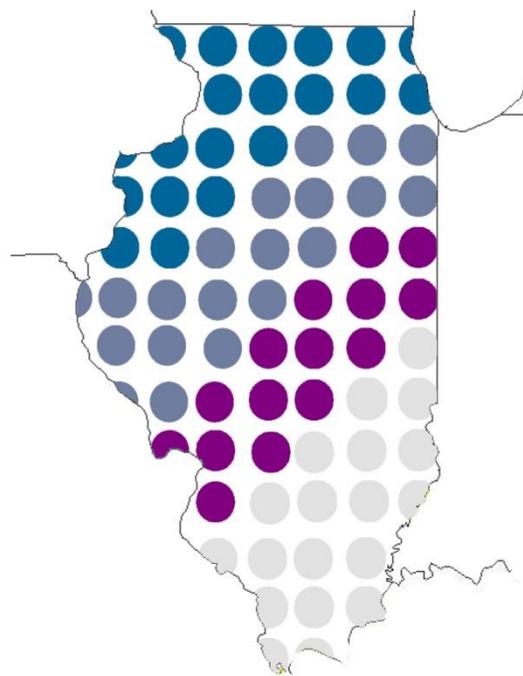




Illinois Disability and Health Data Report

Demographic and Health Profile of Illinoisans With Disabilities 2010

January 2012



Acknowledgements

The Illinois Department of Public Health (Department) extends its appreciation to those who contributed their time and expertise to this effort.

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To learn more about the Illinois Disability and Health Program, or to receive the report in accessible formats, contact the Illinois Department of Public Health, Disability and Health Program at 217-557-2939, TTY 800-547-0466.



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About This Report

Purpose of the Report

The *Illinois Disability and Health Data Report* provides empirical data on demography, health, and health service access of people with disabilities in Illinois. The report is intended to facilitate dialogue among key stakeholders in the state of Illinois who are interested in promoting the health and wellness of citizens with disabilities.

Understanding of the demography, the current health status, and health service utilization of people with disabilities is a critical initial step toward planning effective and targeted health promotion and chronic disease prevention.

Contents of the Report

Following the previous year's data report, this year's report continues to provide demographic profiles of Illinoisans with disability broken down by age, sex, race and ethnic origin, and geography. Prevalence data of selected chronic diseases and their risk factors are included in the second and the third sections of the report. The fourth and the fifth sections of the report show data pertaining to health-related quality of life and access to health care for Illinoisans with disability.

Data Source

The data used for this report were extracted from the 2010 Illinois Behavioral Risk Factor Surveillance System (ILBRFSS). The ILBRFSS, conducted annually by the Department, is a random telephone survey of community households in the state designed to monitor health-related behaviors associated with chronic diseases and mortality among Illinois adults. Data were collected through telephone interviews from a randomly selected adult, age 18 years or older, at each sampled household.

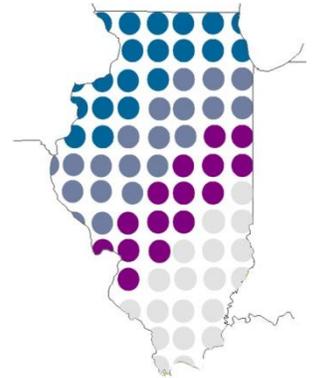
Disability Screening

The ILBRFSS questionnaire includes a pair of disability screening questions. One question inquired whether a respondent had an activity limitation due to physical, mental and/or emotional problems. Another asked if he or she used a mobility-device (e.g., cane, wheelchair) and/or other assistive devices (e.g., special bed or telephone). Survey participants who responded positively to either or both questions were labeled as “adults with disability.” The respondents who responded negatively to both questions were tallied as “adults without a disability” and served as representatives of the Illinois adult population without a disability.

Data Analysis

Data analyses were conducted using a statistical weight to produce state-level estimates. The statistical weight was primarily based on the probability of each respondent being selected in the survey on the basis of sex, age, race, and ethnic origin. The 95 percent confidence intervals (CI) were used to test statistical difference between the weighted estimates. In this report, expressions of “higher” and “lower” indicate a statistically significant difference between groups. Expressions such as “similar” or “no difference” indicate that the group difference was not statistically significant. The estimates for the two groups with and without disability also were compared to the *Healthy People 2020* target objectives when available.

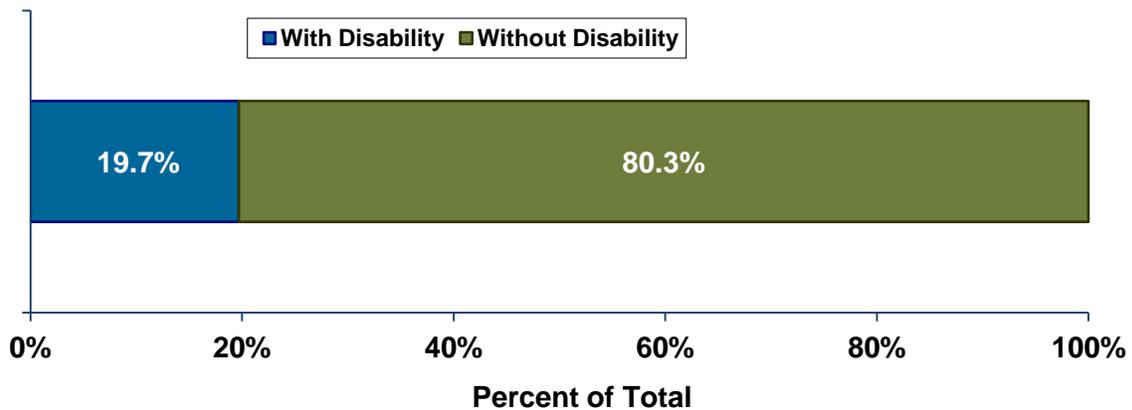
Section I: Prevalence of Disability in Illinois



Disability Among Illinois Adults

One in every five adults in Illinois has a disability. Figure 1 below graphically shows the proportion of Illinois adults who have a disability. According to the 2010 Illinois Behavioral Risk Factor Surveillance System (ILBRFSS) data, 19.7 percent of Illinois adults were estimated to have a disability (95 percent CI: 18.3 percent – 21.2 percent) in 2010.

Figure 1. Disability Prevalence Among Illinois Adults



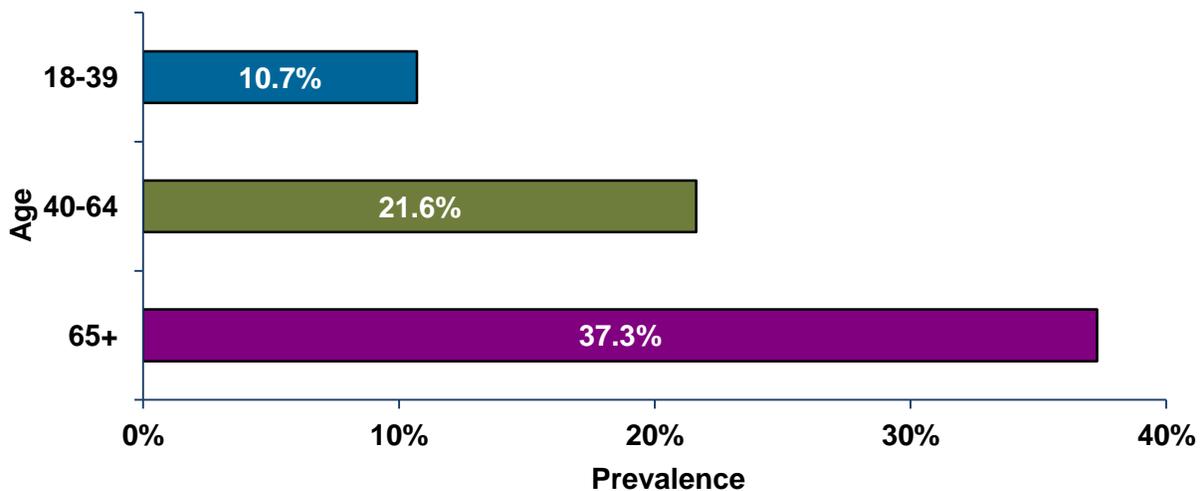
Source: 2010 ILBRFSS

Disability by Age

Older Illinoisans are more likely to have a disability than their younger counterparts.

Figure 2 below visually demonstrates how the prevalence of disability in Illinois varies across three age groups. Each of the three bars in the figure represents Illinois adults in three different age groups: from the top, ages 18 to 39, 40 to 64, and 65 or older. In Illinois, the prevalence of disability increases across the age groups from 10.7 percent (95 percent CI: 8.4 percent - 13.6 percent) among young adults ages 18 to 39, to 21.6 percent (95 percent CI: 19.7 percent - 23.7 percent) among middle age adults ages 40 to 64, and to 37.3 percent (95 percent CI: 34.5 percent - 40.1 percent) among those ages 65 and older.

Figure 2. Disability Prevalence Among Illinois Adults by Age

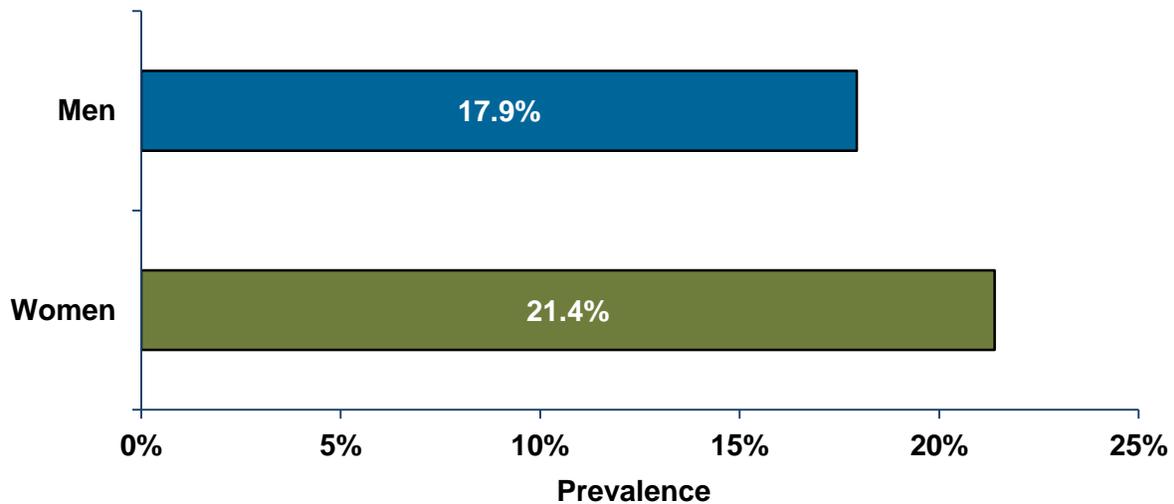


Source: 2010 ILBRFSS

Disability by Gender

Illinois men and women reported similar disability prevalence. Figure 3 below describes prevalence of disability among Illinois adults by gender. The two horizontal bars represent men and women, respectively. Although a higher percentage of women reported having a disability than men: 21.4 percent (95 percent CI: 19.5 percent - 23.4 percent) vs. 17.9 percent (95 percent CI: 15.8 percent – 20.3 percent), the difference between the two groups does not reach statistical significance.

Figure 3. Disability Prevalence Among Illinois Adults by Gender

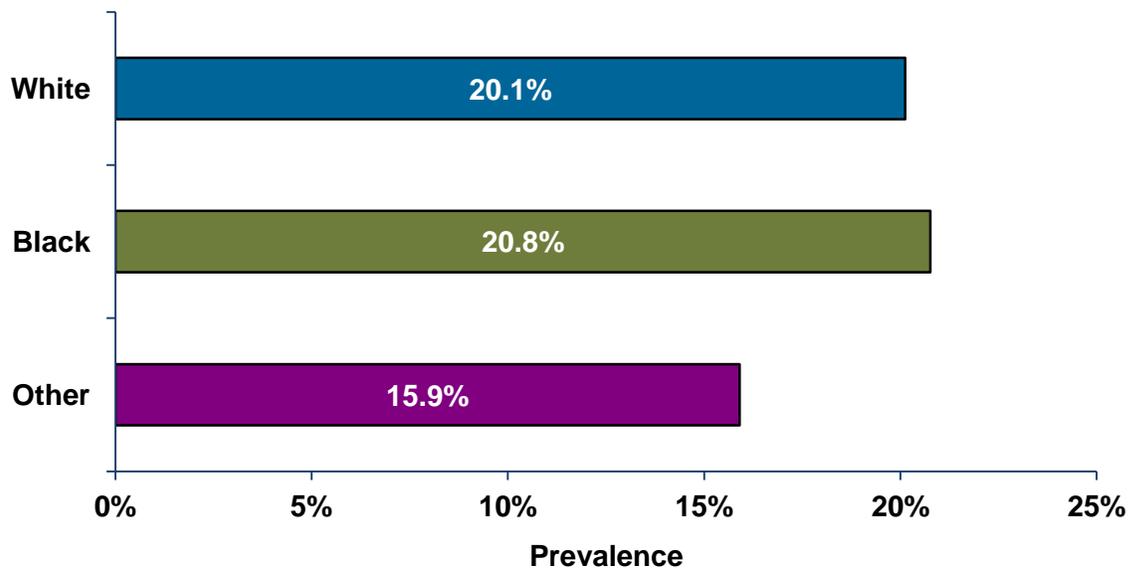


Source: 2010 ILBRFSS

Disability by Race

Figure 4 graphically shows disability prevalence across three race groups. From the top, each of the three bars in the figure represents white Americans, black or African Americans, and other race groups which include American Indians, Alaska Natives, Native Hawaiians, other Pacific Islanders, and others. The prevalence of disability for each race group was 20.1 percent (95 percent CI: 18.5 percent - 21.9 percent), 20.8 percent (95 percent CI: 17.3 percent - 24.8 percent), and 15.9 percent (95 percent CI: 11.2 percent – 22.1 percent), respectively. The prevalence difference across the three groups did not reach statistical significance.

Figure 4. Disability Prevalence Among Illinois Adults by Race

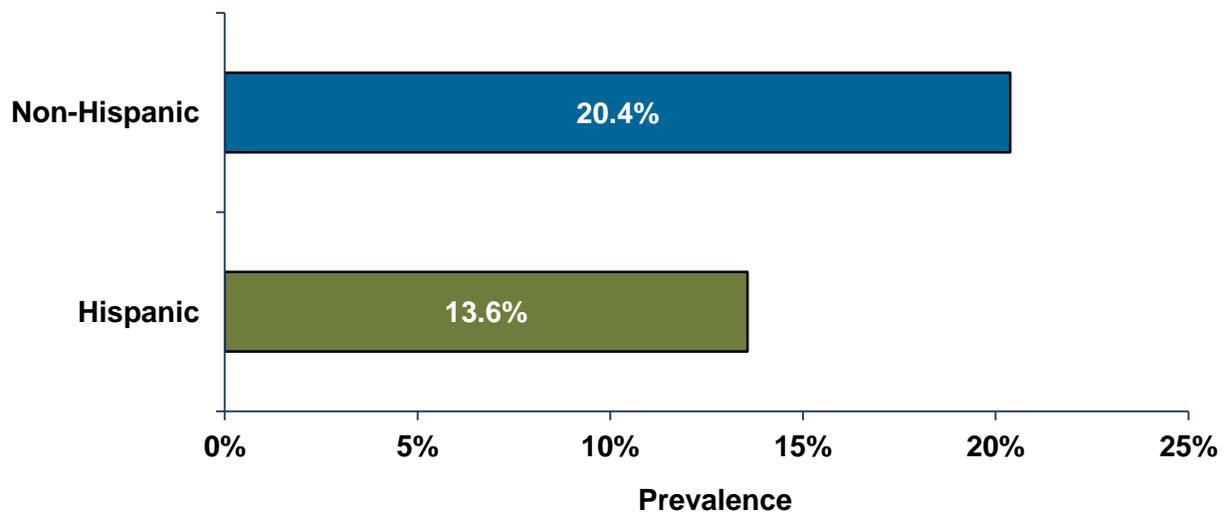


Source: 2010 ILBRFSS

Disability by Hispanic Origin

Illinois adults who are of Hispanic origin reported a similar prevalence of disability with those of non-Hispanic origin. Figure 5 contrasts disability prevalence by Hispanic origin. Each of the two bars in the figure represents Illinois adults who are of non-Hispanic origin, top bar, and Hispanic origin, bottom bar. Illinois adults who are of Hispanic origin reported a seemingly lower prevalence when compared to their counterparts who are non-Hispanic: 13.6 percent (95 percent CI: 9.0 percent – 19.9 percent) vs. 20.4 percent (95 percent CI: 18.9 percent - 22.0 percent), respectively. The difference, however, did not reach statistical significance.

Figure 5. Disability Prevalence Among Illinois Adults by Hispanic Origin

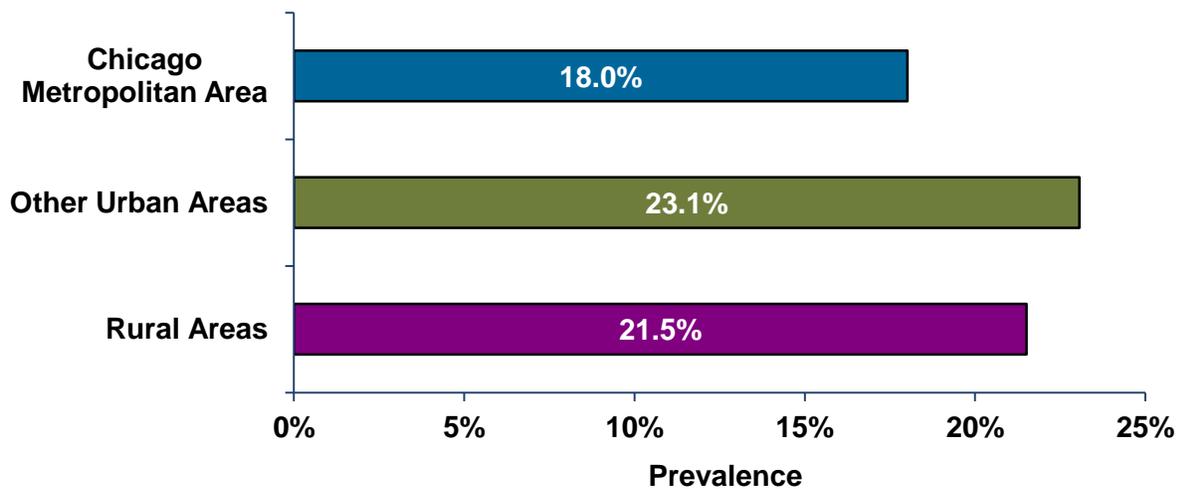


Source: 2010 ILBRFSS

Disability by Geographic Area

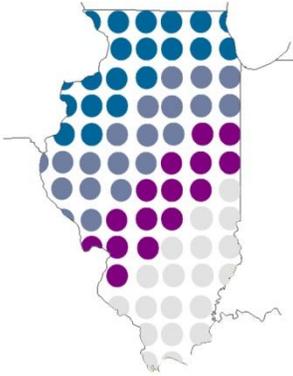
Figure 6 summarizes the prevalence of disability across the three areas of the state: Chicago metropolitan area (i.e., city of Chicago, counties of Cook, Lake, McHenry, Kane, DuPage and Will), other urban areas (i.e., counties of Champaign, DeKalb, Kankakee, Kendall, Macon, Madison, Peoria, Rock Island, Sangamon, St. Clair, Tazewell, McLean, and Winnebago), and the rural areas (i.e., remaining 83 rural counties). There is no statistical difference in the prevalence of disability across the Chicago metropolitan area, 18.0 percent (95 percent CI: 16.3 percent - 19.9 percent), the other urban areas, 23.1 percent (95 percent CI: 19.5 percent – 27.1 percent), and rural areas, 21.5 percent (95 percent CI: 18.2 percent – 25.3 percent).

Figure 6. Disability Prevalence Among Illinois Adults by Geographic Area



Source: 2010 ILBRFSS

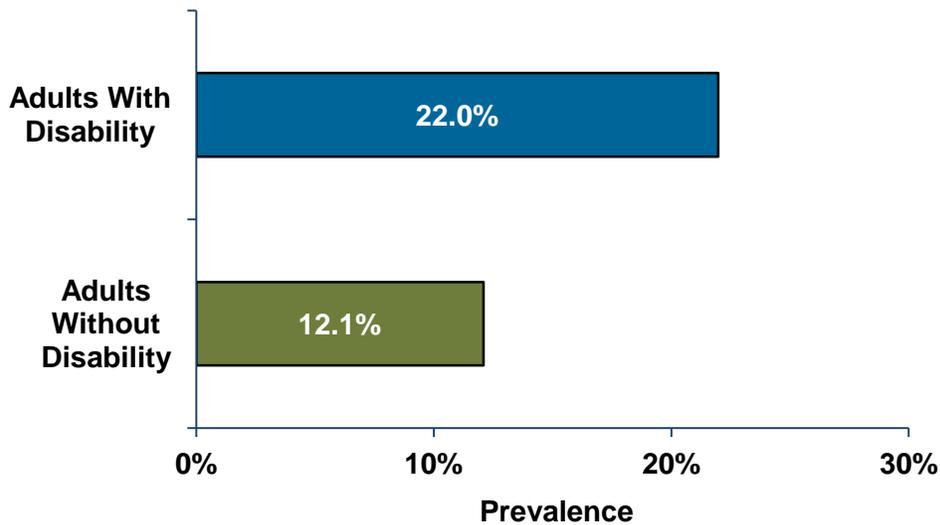
Section II: Chronic Disease Prevalence Among Persons With Disability in Illinois



Asthma

Illinoisans with disability are more likely to have asthma than their counterparts without disability. Shown in Figure 7 is the prevalence of doctor-diagnosed asthma between Illinois adults with and without disability. Prevalence of asthma among adults with disability, represented in the top bar of the figure, is 22.0 percent (95 percent CI: 18.7 percent – 25.6 percent). The prevalence rate for adults with disability is higher than that of adults without disability, which is 12.1 percent (95 percent CI: 10.4 percent – 14.0 percent).

Figure 7. Prevalence of Asthma by Disability Status

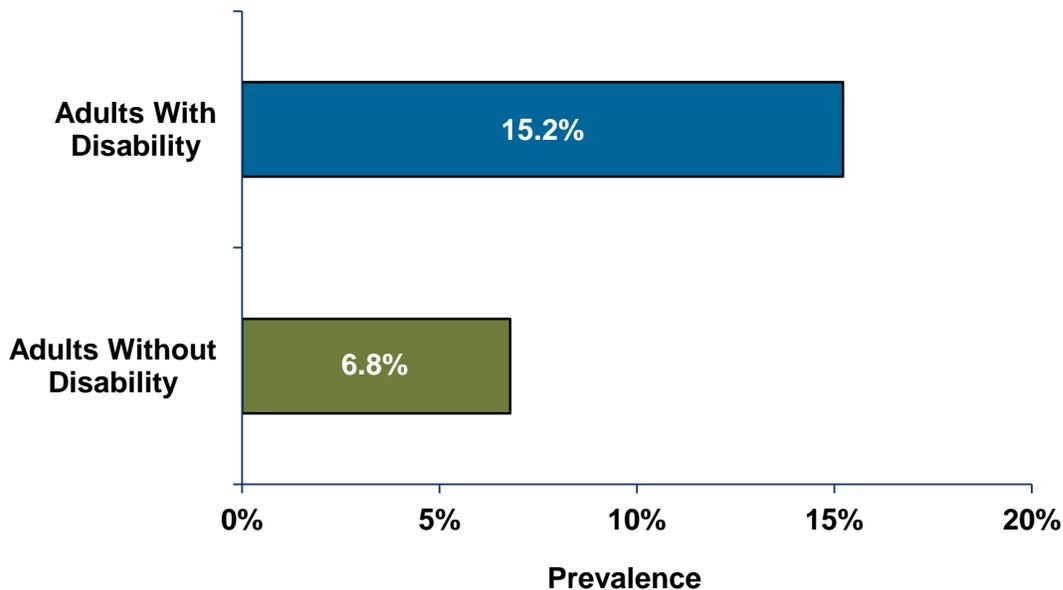


Source: 2010 ILBRFSS

Diabetes

Prevalence of diabetes is higher among Illinoisans with disability than those without disability. Figure 8 summarizes the prevalence of diabetes between adults with disability, represented in the top bar of the figure, and adults without disability, represented in the bottom bar. The top bar shows that 15.2 percent (95 percent CI: 13.1 percent – 17.6 percent) of adults with disability have ever been told by a doctor that they have diabetes. The bottom bar shows that 6.8 percent (95 percent CI: 5.9 percent – 7.8 percent) of adults without disability have ever been told that they have diabetes.

Figure 8. Prevalence of Diabetes by Disability Status

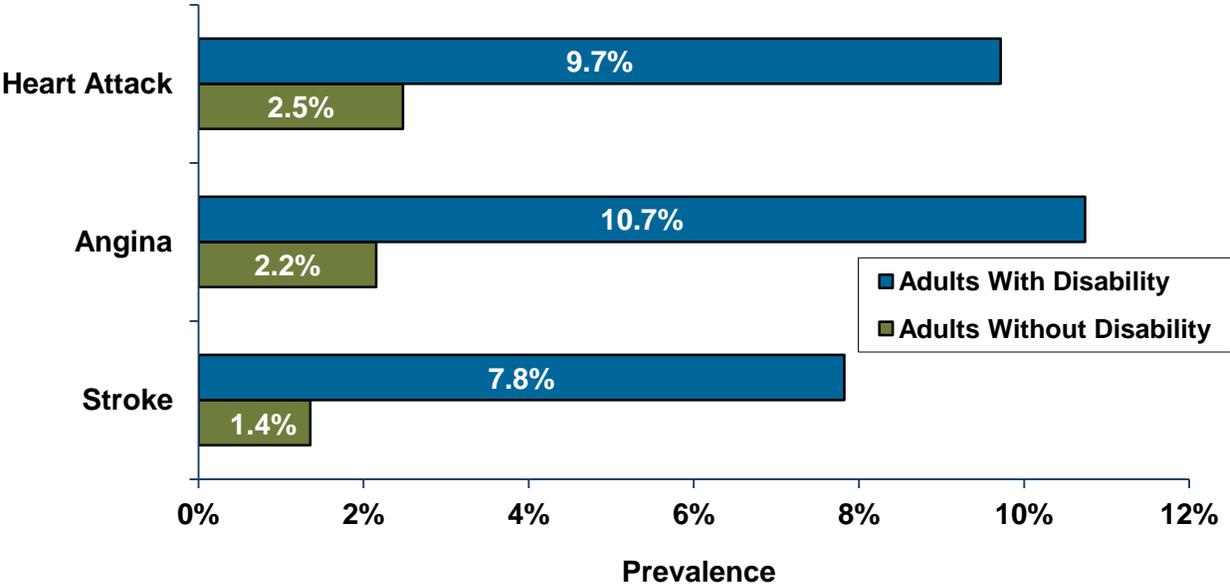


Source: 2010 ILBRFSS

Cardiovascular Disease

Cardiovascular disease, which includes a wide variety of heart and blood vessel diseases, is much more prevalent among Illinoisans with disability than it is among those without disability. Figure 9 summarizes the prevalence of the three cardiovascular diseases by disability status. Shown in the first pair of bars in the figure is the prevalence of heart attack for adults with disability, 9.7 percent (95 percent CI: 8.1 percent – 11.7 percent), and for adults without disability, 2.5 percent (95 percent CI: 2.0 percent – 3.1 percent). Prevalence of angina, represented in the two bars in the middle, is 10.7 percent (95 percent CI: 9.0 percent – 12.8 percent) for adults with disability, and 2.2 percent (95 percent CI: 1.6 percent – 2.8 percent) for adults without disability. The two bars at the bottom of the figure show that 7.8 percent (95 percent CI: 6.3 percent – 9.7 percent) of adults with disability and 1.4 percent (95 percent CI: 1.0 percent – 1.9 percent) of adults without disability ever had stroke.

Figure 9. Prevalence of Cardiovascular Disease by Disability Status



Source: 2010 ILBRFSS

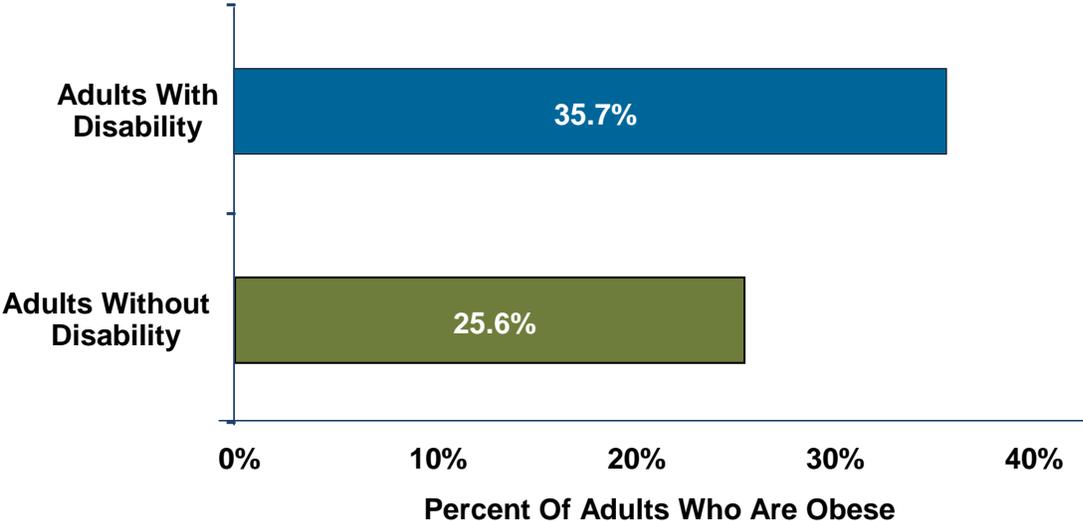
Section III: Risk Factors for Chronic Disease



Obesity

Illinois adults with disability are more likely to be obese (i.e., Body Mass Index equal to or greater than 30.0) than their counterparts without disability. Figure 10 summarizes the prevalence of obesity among Illinois adults by disability status. The bar on the top shows that 35.7 percent (95 percent CI: 32.0 percent - 39.6 percent) of adults with disability reported being obese compared to 25.6 percent (95 percent CI: 23.4 percent – 27.9 percent) of adults without disability, represented in the bottom bar.

Figure 10. Obesity Prevalence Among Illinois Adults by Disability Status

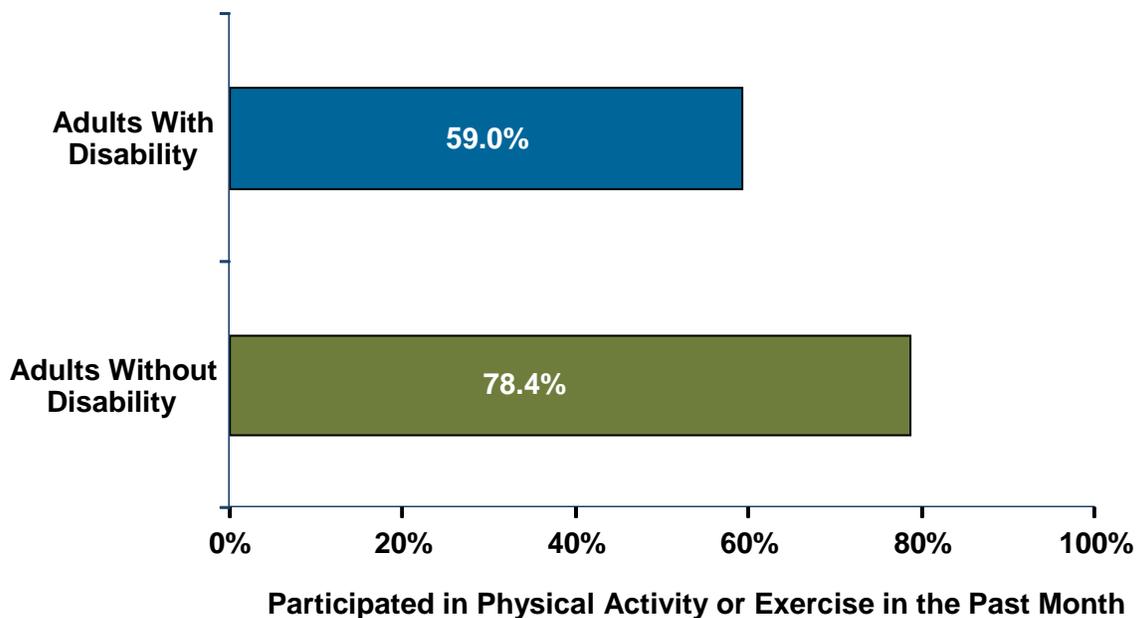


Source: 2010 ILBRFSS

Exercise

Illinoisans with disability engage in exercise less frequently than Illinoisans without disability. Figure 11 compares the proportion of adults who engage in any physical activities or exercise such as running, calisthenics, golf, gardening, or walking for exercise, other than their regular job, in the past month by disability status. The bar on the top indicates that 59.0 percent (95 percent CI: 55.0 percent – 62.9 percent) of adults with disability participated in any physical activity or exercise in the past month. The rate is lower than the rate reported by adults without disability, 78.4 percent (95 percent CI: 76.4 percent – 80.3 percent), shown in the bottom bar.

Figure 11. Percent of Illinois Adults Who Participated in Any Physical Activity or Exercise in the Past Month by Disability Status

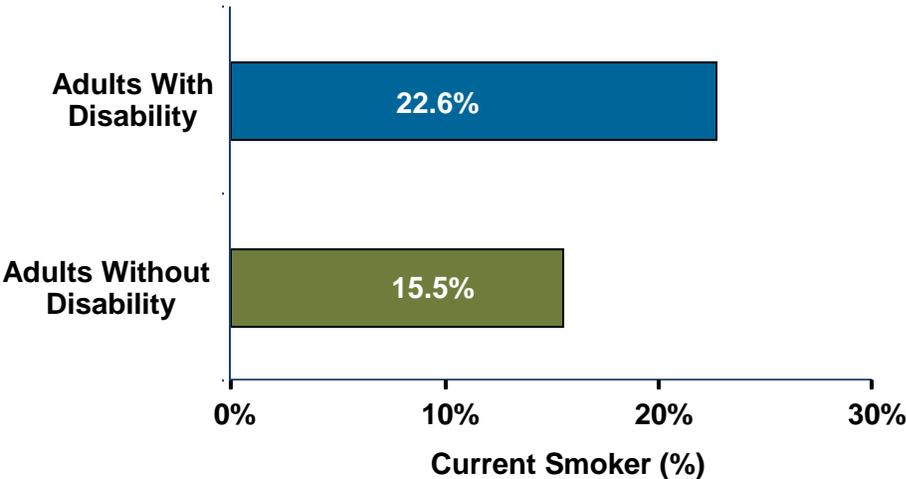


Source: 2010 ILBRFSS

Cigarette Smoking

Smoking prevalence in Illinoisans with disability is higher than that for Illinoisans without disability. Figure 12 shows the proportion of Illinois adults who reported smoking cigarettes by disability status. Twenty-two percent (22.6 percent, 95 percent CI: 19.2 percent – 26.5 percent) of Illinois adults with disability, shown in the top bar, are currently smoking cigarettes compared to 15.5 percent (95 percent CI: 13.7 percent – 17.4 percent) of those without disability, shown in the bottom bar.

Figure 12. Percentage of Illinois Adult Cigarette Smokers by Disability Status

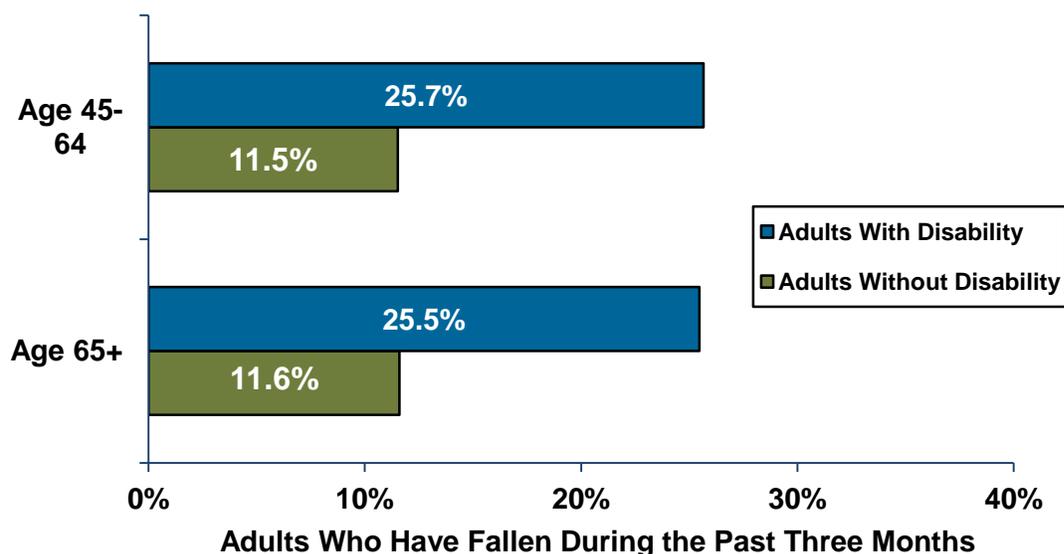


Source: 2010 ILBRFSS

Falls

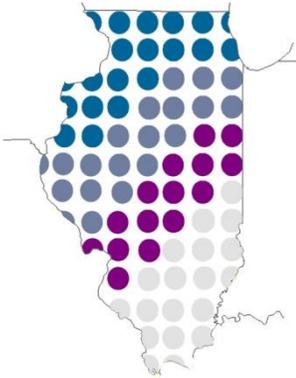
Illinoisans with disability are at a higher risk of injury from falls than Illinoisans without disability. Figure 13 compares the rate of adults who have fallen at least once during the past three months by disability status across the two age groups: ages 45 to 64 and ages 65 and older. The two bars on the top, representing adults ages 45 to 64 with and without disability, show that the rate is 25.7 percent (95 percent CI: 21.5 percent – 30.4 percent) for adults with disability and 11.5 percent (95 percent CI: 9.5 percent – 13.9 percent) for adults without disability, respectively. The two bottom bars represent adults ages 65 and older by disability status. In this age group, the rate is 25.5 percent (95 percent CI: 21.4 percent – 30.0 percent) for adults with disability and 11.6 percent (95 percent CI: 9.5 percent – 14.1 percent) for adults without disability.

Figure 13. Percent of Illinois Adults, Ages 45 and Older, Who Have Fallen During the Past Three Months by Disability Status



Source: 2010 ILBRFSS

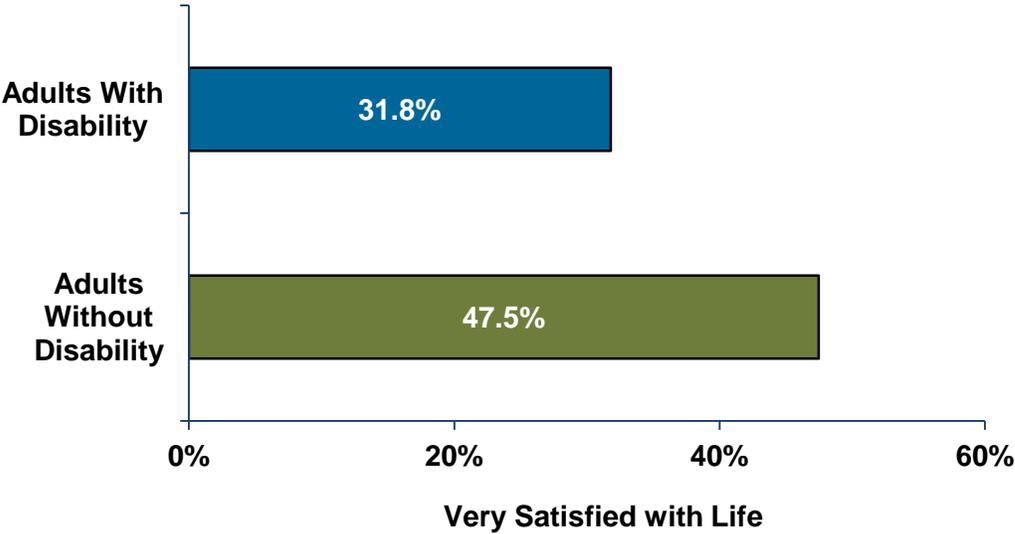
Section IV: Quality of Life Among Persons With Disability



Satisfaction With Life

Illinoisans with disability are less likely to be satisfied with their life than those without disability. Figure 14 below compares the proportion of adults who are “very satisfied with life” by disability status. Illinois adults with disability, represented in the top bar, reported that 31.8 percent (95 percent CI: 28.3 percent – 35.5 percent) were very satisfied with their life. The rate for those without disability, represented in the bottom bar, was 47.5 percent (95 percent CI: 45.0 percent – 49.9 percent); substantially higher than their counterparts.

Figure14. Self-reported Satisfaction With Life Among Illinois Adults by Disability Status

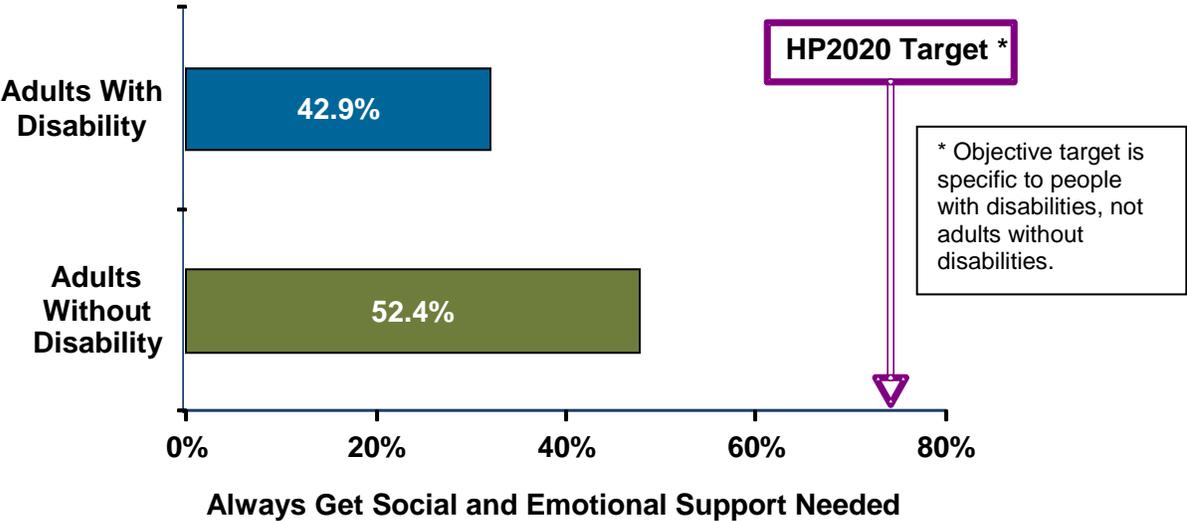


Source: 2010 ILBRFSS

Social and Emotional Support

Social and emotional support is associated with general mental and physical health and quality of life. Illinoisans with disability report less social and emotional support than Illinoisans without disability. Figure 15 below shows the proportion of adults who report they “always” get social and emotional support needed. Illinois adults with disability, represented in the top bar, reported that 42.9 percent (95 percent CI: 39.0 percent – 47.0 percent) always received the social and emotional support needed. The rate for those without disability, represented in the bottom bar, was 52.4 percent (95 percent CI: 50.0 percent – 54.9 percent); substantially higher than their counterparts. The *Healthy People 2020* Objective (i.e., DH-17) is that 76.5 percent of adults with disabilities report sufficient social and emotional support by 2020.

Figure 15. Always Get Social and Emotional Support Needed

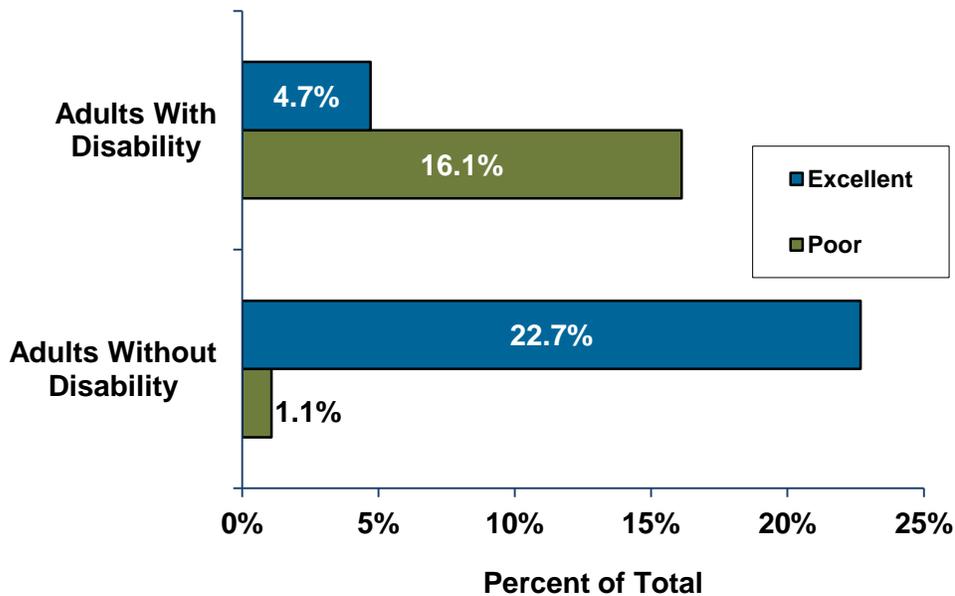


Source: 2010 ILBRFSS

Self-rated Health Status

Illinoisans with disability rated their health status less favorably than their counterparts without disability. Figure 16 contrasts how Illinois adults with and without disability perceive their health status differently. The two bars at the top of the graph show that 4.7 percent (95 percent CI: 3.3 percent – 6.6 percent) of adults with disability rated their health as “excellent” and that 16.1 percent (95 percent CI: 13.3 percent – 19.4 percent) rated it as poor. For adults without disability, represented in the two bottom bars, the rate was 22.7 percent (95 percent CI: 20.7 percent – 24.8 percent) and 1.1 percent (95 percent CI: 0.6 percent - 1.8 percent), respectively. More than three times as many adults with disability reported their health as poor compared to those who reported excellent health. For those without disability, only a few rated their health as poor.

Figure 16. Self-rated Health Status Among Illinois Adults by Disability Status

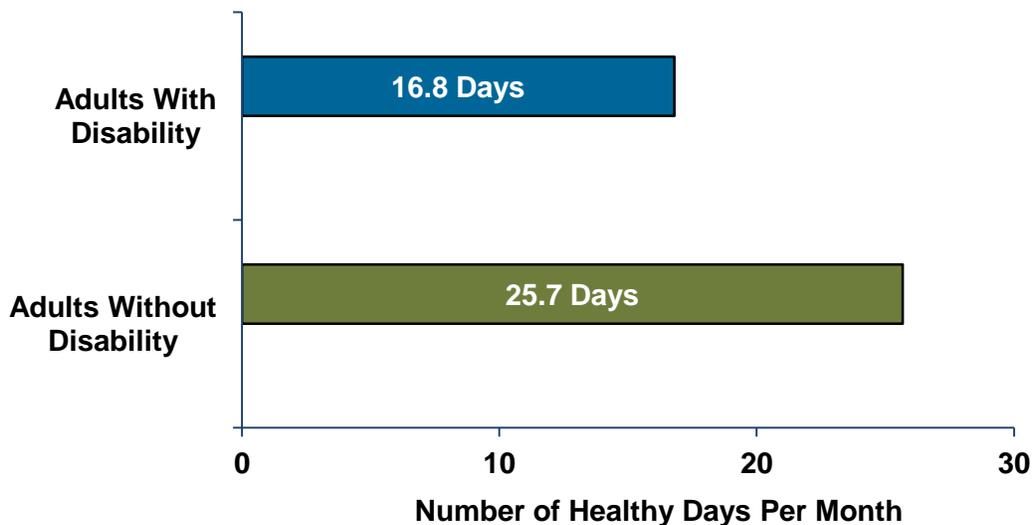


Source: 2010 ILBRFSS

Healthy Days

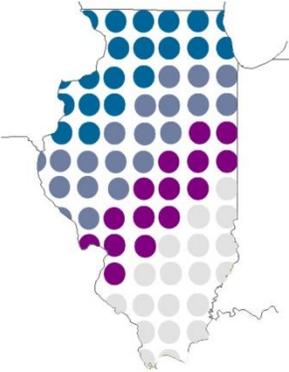
Illinois adults with disability reported fewer healthy days in a month than those without disability. Figure 17 below shows the average number of healthy days reported by Illinois adults with and without disability. The average number of the healthy days reported by Illinois adults with disability was 16.8 days (95 percent CI: 15.9 percent – 17.8 days) per month, which is graphically shown by the top bar in the graph. Adults without disability, represented in the bottom bar, reported 25.7 (95 percent CI: 25.3 percent – 26.1 days) healthy days during the past 30 days.

Figure 17. Self-reported Number of Healthy Days During the Past 30 Days by Disability Status



Source: 2010 ILBRFSS

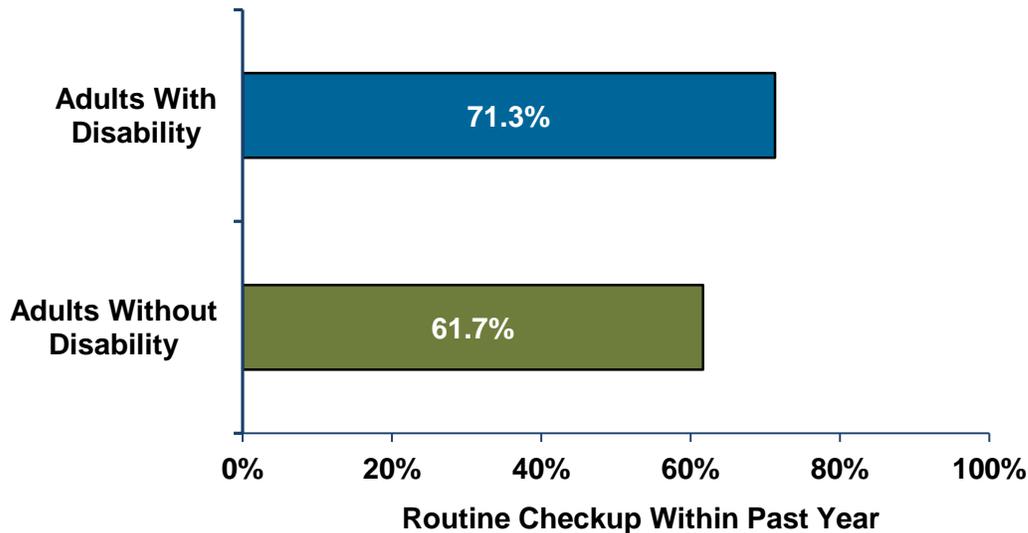
Section V: Access to Health Care and Screenings



Routine Checkup

Illinois adults with disability are more likely to have had a routine physical checkup within the past year than those without disability. Figure 18 below represents the proportion of Illinois adults who visited a doctor for a routine checkup, a general physical exam, within the past year by disability status. Represented in the top bar, 71.3 percent (95 percent CI: 67.1 percent – 75.2 percent) of Illinois adults with disability received the routine checkup within the past year. The rate was higher than that reported by Illinois adults without disability, 61.7 percent (95 percent CI: 59.2 percent – 64.1 percent), represented in the bottom bar.

Figure 18. Percent of Illinois Adults Who Had Routine Checkup Within Past Year

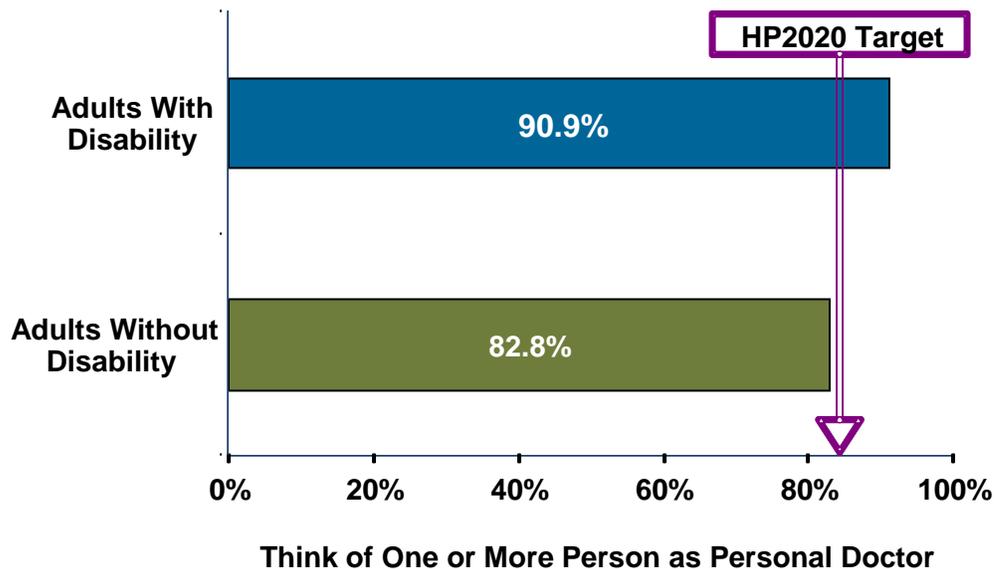


Source: 2010 ILBRFSS

Usual Primary Care Provider

Illinois adults with disability are more likely to have a usual primary care provider than those without disability. Figure 19 below represents the proportion of Illinois adults who think of one or more person(s) as their personal doctor or health care provider by disability status. Represented in the top bar, 90.9 percent (95 percent CI: 87.5 percent – 93.5 percent) of Illinois adults with disability reported having one or more person(s) whom they think of as their personal doctor or health care provider. The rate meets the *Healthy People 2020* target of 83.9 percent (i.e., Objective AHS-3). The rate for Illinois adults without disability, represented in the bottom bar, was 82.8 percent (95 percent CI: 80.4 percent – 84.9 percent).

Figure 19. Percent of Illinois Adults Who Have One or More Person(s) as a Personal Doctor or Health Care Provider

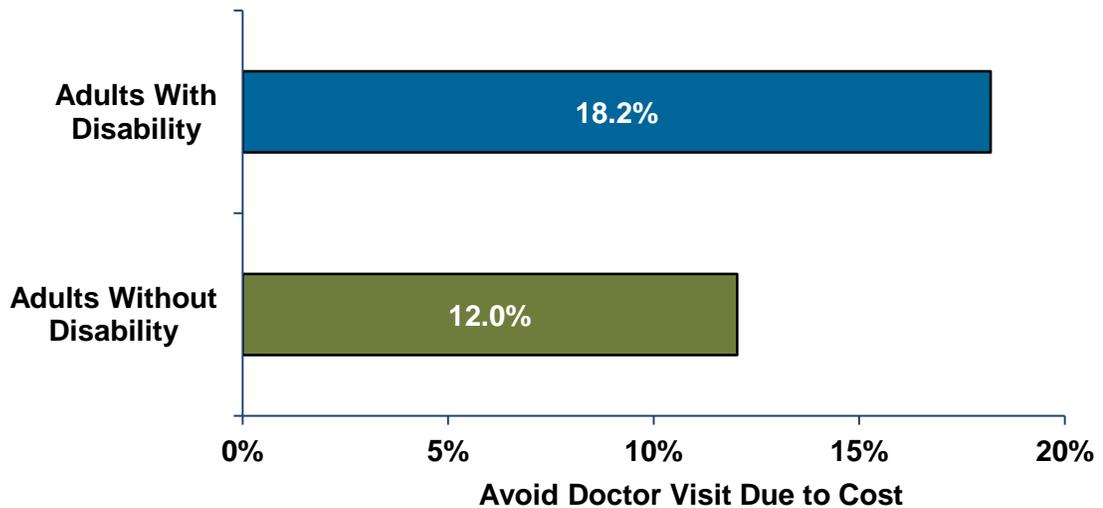


Source: 2010 ILBRFSS

Economic Barrier in Access to Health Care

For Illinoisans with disability, costs associated with health care appear to hinder their use of such services. Figure 20 shows that Illinois adults with disabilities are less likely to access health services due to cost than those without disability. Figure 20 compares the proportion of Illinois adults who avoided visiting a doctor due to cost by the presence of disability. The rate for Illinois adults with disability, 18.2 percent (95 percent CI: 15.2 percent - 21.6 percent) represented in the top bar, is higher compared to 12.0 percent (95 percent CI: 10.2 percent – 14.1 percent) for those without disability shown in the bottom bar.

Figure 20. Percent of Illinois Adults Who Avoided Doctor Visits Due to Cost by Disability Status

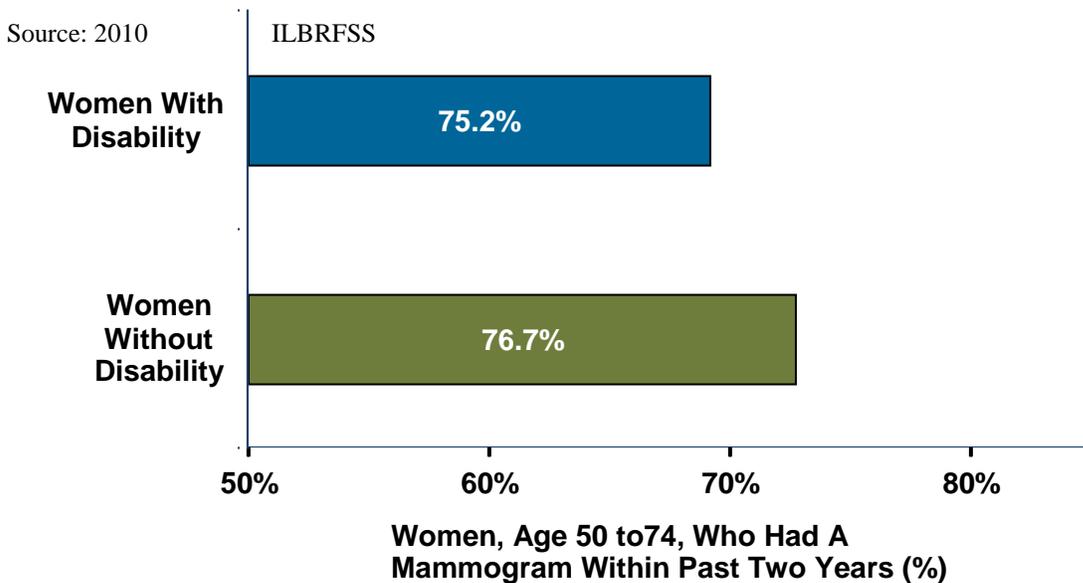


Source: 2010 ILBRFSS

Mammography

Illinois women with and without disability reported a similar rate of having a mammography. Figure 21 below summarizes the percentage of Illinois women, ages between 40 and 74 years old, who have received a mammogram within the last two years, by disability status. The top bar represents women with disability; the bottom bar represents women without disability. The rate was similar between women with disability (75.2 percent, 95 percent CI: 69.9 percent – 79.8 percent) and those without it (76.7 percent, 95 percent CI: 73.4 percent - 79.7 percent).

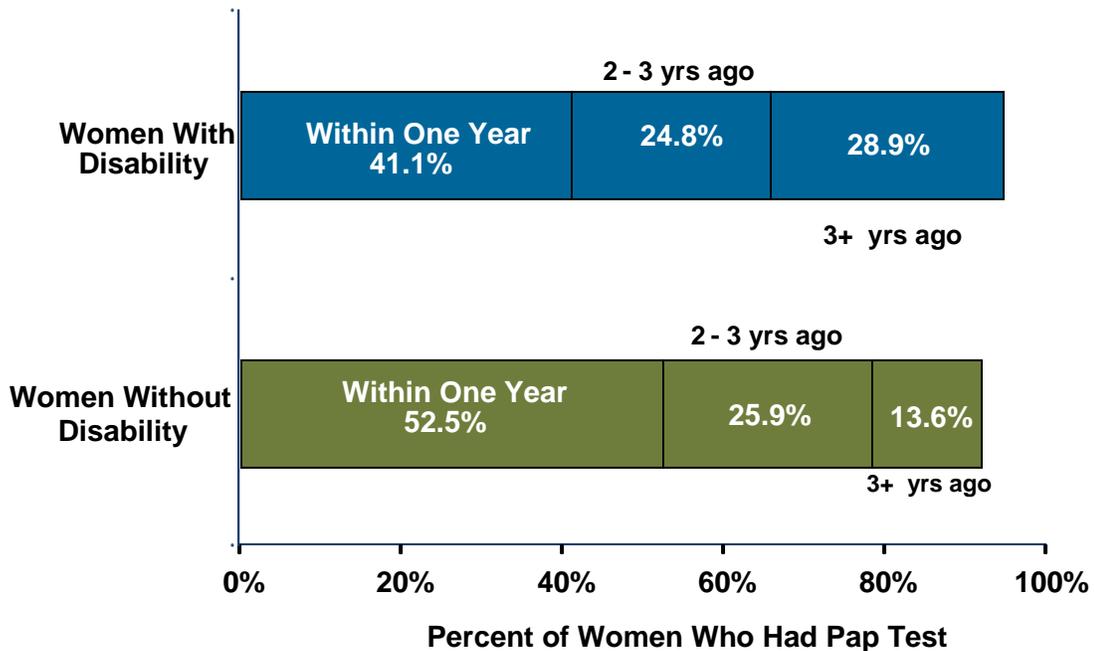
Figure 21. Percent of Illinois Women Age 50 to 74 Who Have Had a Mammogram Within the Last Two Years by Disability Status



Pap Test

It is recommended that all women, ages 18 and above, have a pap test for cervical cancer regularly. Figure 22 below summarizes the percentage of Illinois women who have received a pap test by disability status. The top bar represents women with disability; the bottom bar represents women without disability. Overall, most women have the pap test regardless of their disability status. Women with disability were less likely to have the test within one year compared to women without disability (41.1 percent, 95 percent CI: 36.4 percent – 46.0 percent vs. 52.5 percent, 95 percent CI: 49.4 percent – 55.6 percent). In contrast, women with disability were more likely to have the test three or more years ago compared to women without disability (28.9 percent, 95 percent CI: 25.2 percent – 32.9 percent vs. 13.6 percent, 95 percent CI: 12.1 percent – 15.3 percent).

Figure 22. Percent of Illinois Women Who Have Had a Pap Test by Disability Status

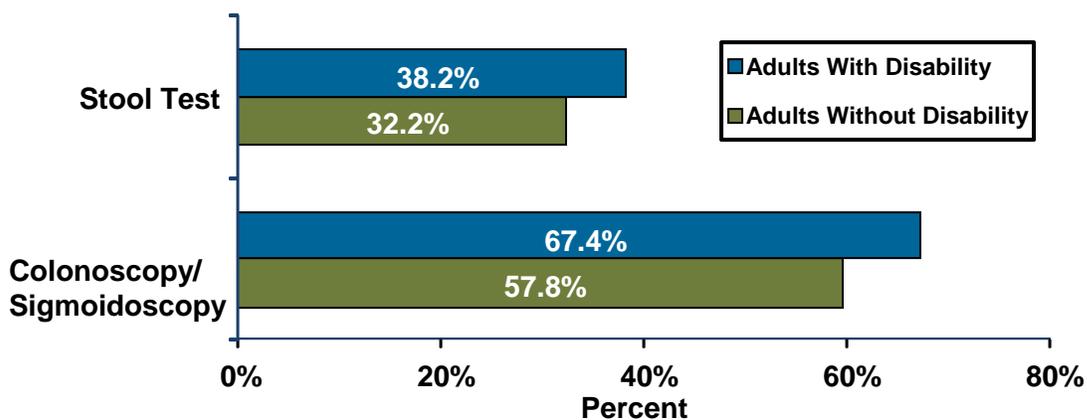


Source: 2010 ILBRFSS

Colorectal Cancer Screening

Figure 23 below represents the proportion of Illinois adults with and without disability, age 50 to 75 years, who have received two common colorectal cancer screenings: stool test and colonoscopy/sigmoidoscopy. Persons with disability are more likely to have had these tests than persons without disability. The rate for each group for the stool test is shown in the top two bars. The bottom two bars represent the rates for colonoscopy/sigmoidoscopy. The rate for Illinois adults with disability who have *ever* had a stool test is 38.2 percent (95 percent CI: 34.6 percent – 41.8 percent). There is no statistically significant difference from the rate for Illinois adults without disabilities (32.2 percent, 95 percent CI: 29.8 percent – 34.7 percent). The rate for Illinois adults with disability who ever received a colonoscopy/sigmoidoscopy (67.4 percent, 95 percent CI: 62.7 percent – 71.8 percent) is higher compared to Illinois adults without disability (57.8 percent, 95 percent CI: 54.6 percent – 60.9 percent).

Figure 23. Percent of Illinois Adults Age 50 to 75 Obtaining Colorectal Screening

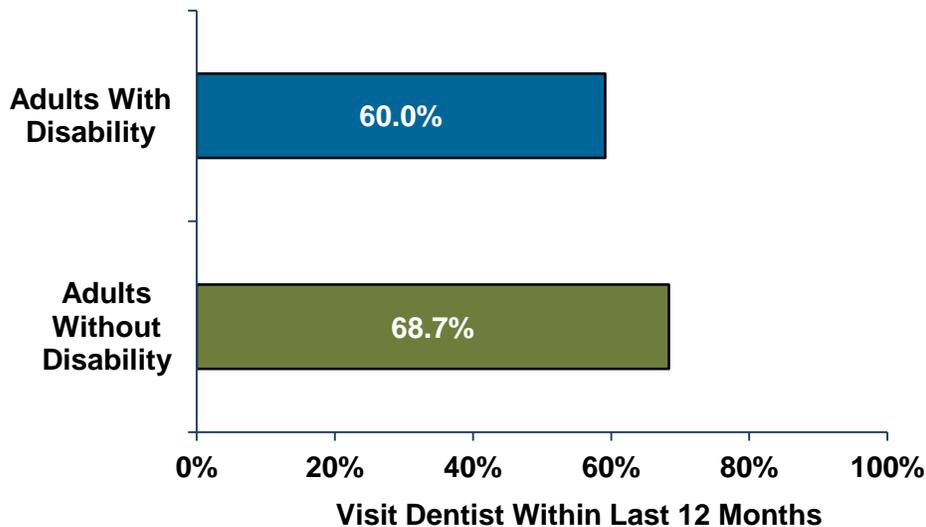


Source: 2010 ILBRFSS

Visit to Dentist

Illinoisans with disability are less likely to visit the dentist than those without disability. Figure 24 summarizes the proportion of Illinois adults who have visited the dentist within the past 12 months. The top bar shows that 60.0 percent (95 percent CI: 55.9 percent – 63.9 percent) of adults with disability have visited the dentist within the past 12 months. The rate is lower than that of adults without disability, 68.7 percent (95 percent CI: 66.2 percent – 71.0 percent) shown in the bottom bar.

Figure 24. Percent of Illinois Adults Who Visited Their Dentist Within the Past 12 Months by Disability Status

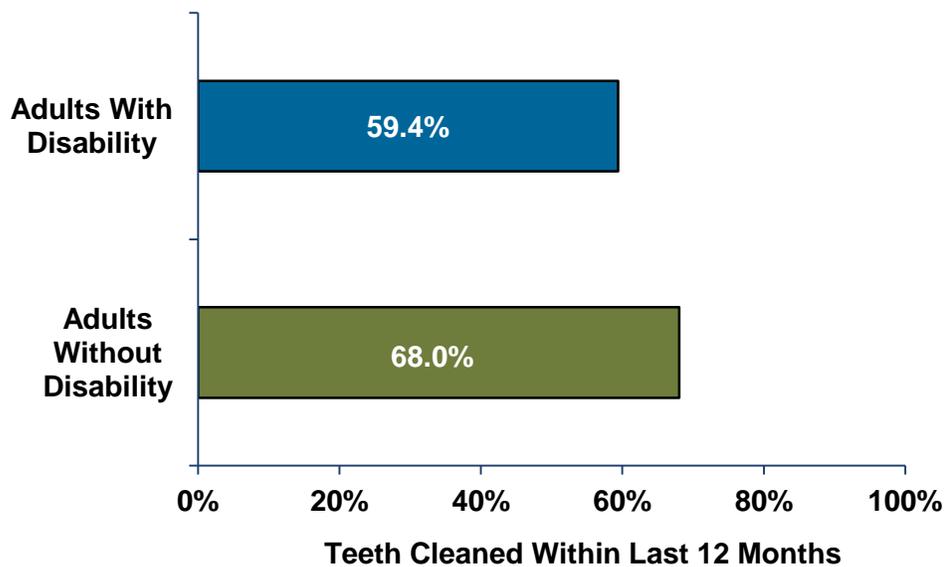


Source: 2010 ILBRFSS

Oral Hygiene

Illinoisans with disability are less likely to access oral hygiene services than those without disability. Figure 25 summarizes the proportion of Illinois adults who have had their teeth cleaned by a dentist or oral hygienist within the past 12 months. The top bar shows that 59.4 percent (95 percent CI: 54.9 percent – 63.7 percent) of adults with disability have had their teeth cleaned within the past 12 months. The rate is lower than that of adults without disability, 68.0 percent (95 percent CI: 65.5 percent – 70.5 percent) shown in the bottom bar.

Figure 25. Percent of Illinois Adults Who Have Had Their Teeth Cleaned by a Dentist or Oral Hygienist Within the Past 12 Months by Disability Status

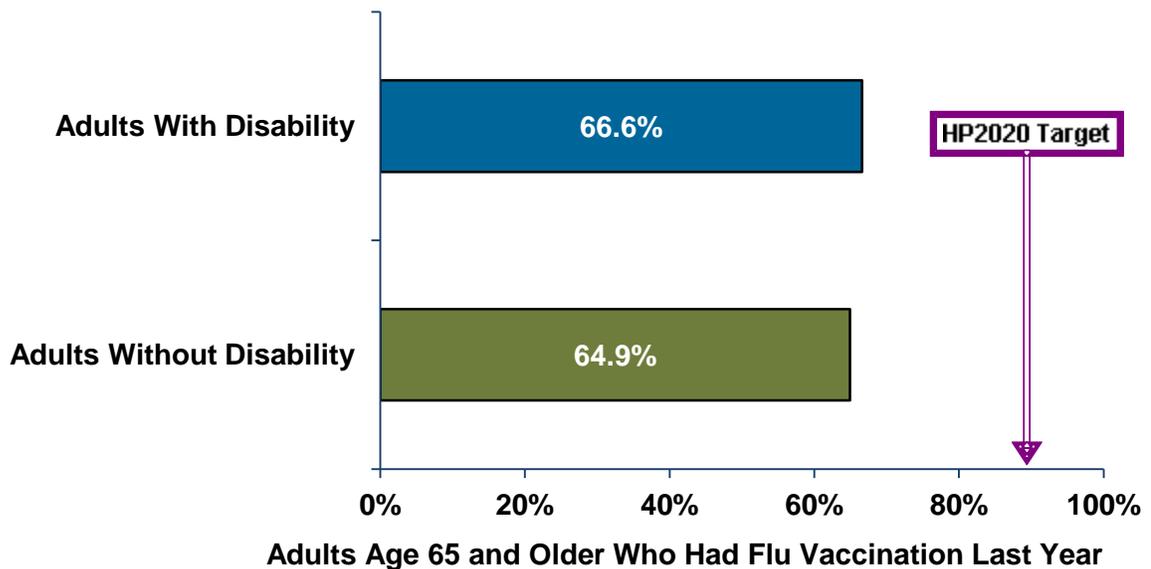


Source: 2010 ILBRFSS

Immunization

The proportion of Illinois seniors with disability who receive immunization against influenza is lower than the federally recommended level. Figure 26 represents the proportion of Illinois adults with disability, age 65 years old and older, who have received vaccinations against influenza. The proportion of seniors with disability who received a flu shot during the past 12 months was 66.6 percent (95 percent CI: 62.0 percent – 70.9 percent). The rate is similar to that of their counterparts without disability (64.9 percent, 95 percent CI: 61.2 percent – 68.5 percent). Neither group has reached the *Healthy People 2020* Objective of 90 percent (i.e., Objective IID-12.7).

Figure 26. Percent of Illinois Adults With Disability, Age 65 and Older, Who Received Flu Shot



Source: 2010 ILBRFSS

Call to Action

This report highlights demographic, health and health-related lifestyle characteristics of Illinois non-institutionalized people with disabilities. In addition, this report shows disparities in the rates of obtaining common health screenings between people with and without disabilities. The intent is to provide a clearer understanding of the health status of people with disability in the state and their access to health service programs. Understanding the extent of disability and the life circumstances facing Illinois citizens with disability are critical steps to planning effective health promotion and prevention strategies for this large, but under-studied sub-population in the state.

Findings from this and the previous reports suggest that people with disabilities will continue to comprise a major portion of the population base in Illinois and that state and local policymakers need to prepare for a growing population that will require services to remain integrated in their communities. Monitoring and tracking this growing population at the state level will become more critical for future development and implementation of policies and programs that meet the unique needs of state residents with disabilities. The Illinois Disability and Health Program, with funding from the U.S. Centers for Disease Control and Prevention, National Center on Birth Defects and Developmental Disabilities, Disability and Health Team, will continue its effort in monitoring the health of Illinoisans with disability and informing its findings to various stakeholders who are interested in promoting the health and wellness of citizens with disability.

Having a disability does not necessarily mean the lack of health or poor health. People with disabilities can benefit from disease prevention and health promotion efforts as much as those without disability. Because people with disabilities are at an increased risk of developing additional health conditions (i.e., secondary conditions), practicing disease prevention and health promotion may be more critical in maintaining health and continuing active life in the community.

Reducing barriers and expanding access to various health services and health promotion programs in the community are critical and urgent issues in supporting their independence. Traditionally, community health services have not been developed with all of the many needs of people with disabilities in mind. Thus, people with disabilities who want to utilize these services often experience access barriers including inaccessible medical facilities and equipment, transportation barriers, communication barriers, and inappropriate service delivery attitudes.

Readers are encouraged to develop and refine health promotion programs in state and local communities so that they are more inclusive for people with disabilities, and work together to improve the quality of life for Illinoisans with and without disability. Recommendations for strategies to improve the health of people with disabilities by developing inclusive health promotion programs and increasing access to health care can be found in the *Illinois Disability and Health State Plan: 2012-2017*, which can be downloaded at <http://www.idph.state.il.us/idhp/publications.htm>.

To learn more about the Disability and Health Data Report, the Illinois Disability and Health Program, how to become involved, or to receive the report in an alternate format, contact the Department's Disability and Health Program at 217-557-2939, TTY 800-547-0466.