

disABILITY WELLNESS

Promoting Health and Wellness for Arkansans with Disabilities

Spring 2009

ARKANSAS DISABILITY AND HEALTH PROGRAM

Arkansas Disability & Health Program is Looking for Accessibility Ambassadors

by Vanessa Smith

The Arkansas Disability & Health Program was funded to conduct the Right to Know Breast Care Awareness campaign for women with disabilities. Designed to raise awareness among women with disabilities regarding their increased risk of breast cancer, the Right to Know campaign will kick off in 2009. Before the campaign begins, however, the Arkansas Disability & Health Program wants to ensure the accessibility of mammography clinics in Central Arkansas. Working with Accessibility Ambassadors, Arkansas Disability & Health Program will collect surveys from mammography clinics and conduct accessibility walkthroughs. These walkthroughs look at staff training, customer service, facility access, elevators, waiting areas, dressing rooms, mammography suites, restrooms and parking. Once completed, staff will evaluate the walkthrough information and build a strengths and needs feedback report offering recommendations for increasing accessibility for each clinic. Arkansas Disability & Health Program offers free brochures on Self Breast Exams for Women with Physical or Sensory Limitations developed by the Breast Health Access for Women with Disabilities to all participating mammography clinics. ADHP also offers training and technical assistance on disability and accessibility. All this is done to ensure that women with disabilities get the most effective mammography possible.

The 2005 Behavioral Risk Factor Surveillance Survey (BRFSS) shows that women in Arkansas with a severe disability are at a higher risk of having breast cancer than women without disabilities (4.9% and 2.4% respectively). Despite their increased risk for breast cancer, women living with disabilities are less likely to receive routine screening mammograms (40.6% compared to women with no disability, 26.4%), typically because of a bad experience. Instead they more frequently obtain mammograms for a suspected problem. Later stage diagnosis typically results

in more costly and disfiguring treatment, greater functional impairment, poorer quality of life, shorter survival rates, and increased mortality. Given the unique needs of the growing and diverse disability population, education and training of health care providers is vital to promote survival rates.

We need your help. If you have a disability or know someone that would like to assist the Arkansas Disability and Health Program as an Accessibility Ambassador, please contact Vanessa Smith at (501) 526-5962, toll-free at 1-800-342-2923 or via email at SmithVanessaL@uams.edu. We are looking for Accessibility Ambassadors in Central Arkansas - from Russellville to Pine Bluff and Searcy to Hot Springs. All Accessibility Ambassadors will be trained and assist staff to conduct the walkthroughs. Your experience with environmental barriers and showing what you have learned will help greatly in educating healthcare clinics on making their services more accessible for women with disabilities.

Please feel free to copy and distribute the insert in this newsletter to others who may be interested.

Partners Perspectives

by Angie Shaffner

Community Health Centers of Arkansas

Community Health Centers in Arkansas provide comprehensive medical/dental/mental services, as well as prenatal services, pediatrics, laboratory services, counseling, chronic disease management and all other primary, comprehensive care services, to the uninsured, underinsured, and all other Arkansans, regardless of payor type or ability to pay.

With the national economy suffering and so many Americans losing their jobs, income and insurance, more and more Arkansans will turn to CHCs for their primary medical/dental/mental needs. In order to accommodate these growing needs

and provide a medical healthcare home for a growing population in need, stronger infrastructure will be required.

Arkansans with disabilities will have the same access, affordability and quality of care as any patient of the CHCs. Throughout the years, CHCA and the CHCs have worked with a diverse group of partners, to learn from one another, share best practices, and utilize each other's resources to best learn to meet the needs of individuals with disabilities. These partnerships have trained the CHC staff to identify the ongoing, changing needs of people with disabilities, and best meet those needs in a caring, competent, compassionate fashion.

House Bill 1204, now Act 180, will enable the Community Health Centers to continue to preserve existing processes and procedures that have proven to be cost effective, as well as high quality. The Tobacco tax will also enable CHCs to strengthen their existing programs and expand programs to more areas, in order to serve more Arkansans. This funding will also expand Enabling Services, which are imperative to increasing access to healthcare services and providing transportation assistance when needed.

In addition, CHCs will increase literacy education, translation services, and have the resources necessary to continue to educate the communities in preventative care, healthcare screenings, and other measures to improve their quality of life overall.



On the Go

Eating Healthy on a Budget

by Vanessa Smith

1. Make a grocery list by planning weekly menus and using shopping ads. This not only ensures you have what you need to prepare each meal but also helps with the decision of what to have for dinner tonight.



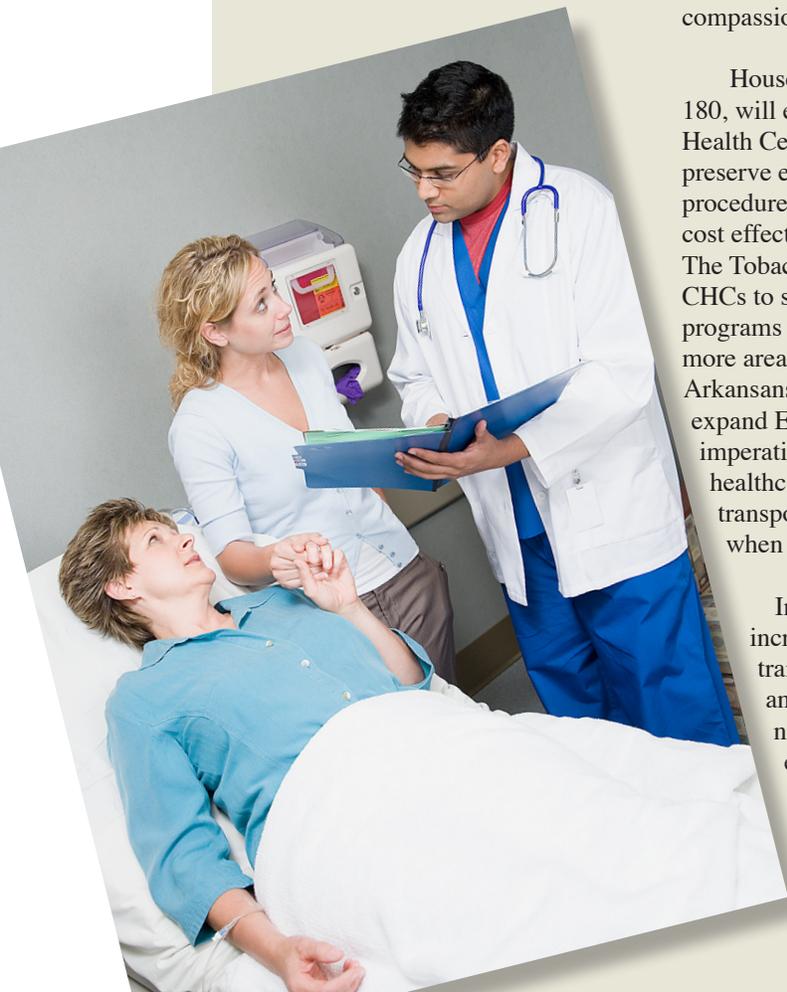
2. Stop buying soft drinks. On average, every man, woman and child consumes 50 gallons of soft drink annually. These are not only not good for you but expensive. Switch to water.

3. Using coupons is good, but switching to store brands is usually better for your budget.

4. Don't throw away food. Use leftovers for lunch the next day or turn them into a whole new meal. Banana's getting mushy? Make banana bread!

5. Go meatless one or two days a week. Try a salad or baked potato night! Beans, lentils, rice or pasta with plenty of vegetables and fruits can fill you up.

6. Limit your dining out. Going out to eat is nice, but more often than not you can cook better tasting, healthier food for less money.



Health News Updates

by Vanessa Smith

The Washington County Department of Emergency Management, Disabilities Emergency Planning Committee and the Arkansas Disability & Health Program sponsored an event to provide education on individual preparedness for people with disabilities and promote awareness among first responders. The event was held at the Fayetteville Police Department Training Annex on April 6, 2009 from 1 p.m. until 5 p.m.

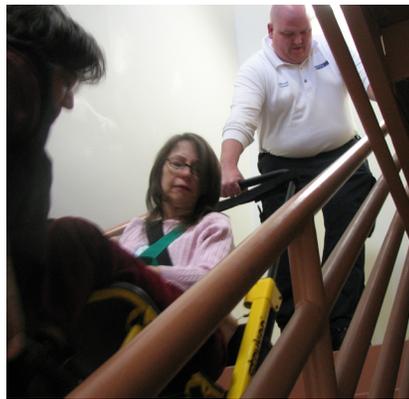
Keeping with the preparedness and planning theme, activities included:

1. **Get a Kit:** Individuals learned what was included in an emergency kit and how to use each item. Participants received an emergency kit and were given supplemental items such as an emergency planning calendar, sanitary wipes and a deck of playing cards.



2. **Make a Plan:** Individuals were encouraged to watch the Ready.gov videos on how to plan for emergencies for people with disabilities, seniors and pets/service animals. Planning counselors were on hand to provide individually tailored planning for participants based on their functional needs and disability. This planning looked at communication, medical, independence, supervision, and transportation needs.

3. **Be Informed:** Participants were encouraged to meet their local first responders and resources in the community and invited to tour an ambulance and Red Cross van. Vendors included the American Red Cross, Emergency Medical Services, Ozarks Electric Cooperative, Ozark Transit, Sign Language Specialists, among others.



The event, originally planned for March 28th, was postponed because of winter weather. Approximately 100 individuals with disabilities, support staff, and/or family members participated on April 6th.

An exit survey asked participants their thoughts and feelings about developing a voluntary registry for people needing extra assistance in the event of a city/county wide emergency. The information in the registry would aid emergency responders in locating and evacuating people with disabilities during an emergency and help county level planners in the development of shelter plans. If you would like to participate in a meeting about a voluntary registry for Washington County, contact Vanessa Smith using the contact information on the back of this newsletter. Please leave your name and best method of contact so we can let you know when this meeting has been scheduled.

Viewing Supports from the Outside In

by Roberta Sick

I have had people in the past express to me that we don't work in the real world of disabilities. What is the real world of disabilities? From the outside looking in at people with disabilities—whether we are from a university (like Partners) or a DD Provider Program, DDS or a national effort trying to come to consensus and plan for what is needed. The people who know the real world of disability are the people who live in it. This reminds me of the Alliance for Full Participation Summit in 2005 where a bunch of different organizations including self advocate organizations came together to try and speak with one voice. During the planning of it there was some controversy from some of the self advocate groups about their voice not really being listened too at the table. It got to be a big deal, but eventually worked out. What would have happened had they not attended? Self advocates are still finding their voice nationally. It reminds me of A CREDO FOR SUPPORT. Here is where you can see the you-tube version. <http://www.youtube.com/watch?v=wunHDfZFxXw>

I have thought a lot lately about how long I have been in the field. It is easy for us oldies to become rigid in our thinking; credo for support is a good reminder.

Send your thoughts to sickrobertae@uams.edu.



By Eldon Schultz

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Medical Records, YOUR Responsibility

Many children and adults have complex and numerous medical conditions that require subspecialty medical consultations that are critical in the long-term care provided by the patient's primary care physician. Communication between physicians is necessary to provide this highly specialized care in an efficient and patient centered setting. Physician-to-physician communication is becoming increasingly strained and in many cases non-existent which is leading to duplication of labs, unnecessary diagnostic studies, medication errors and inadequate medical follow-up. An electronic medical record (emr) could improve the availability, accuracy and timeliness of a patient's vital information regardless of the patient's location.

Even with Obama's current emphasis on emr, implementation of a national standard which is present in all physicians' offices, hospitals, care facilities and pharmacies is years off. Meanwhile, realizing that lack or miscommunication will occur, you, the parent or patient must be prepared.

Always request a copy of your or your child's report from a medical appointment, keep this record in an organizer and never allow anyone to keep the original report. When visiting a new consultant or physician, make sure you receive a copy of the assessment, plan of care and medications, including any tests that were done. Assume that your primary care physician has not communicated with the specialist. Hand-carry a copy of the specialist's report to your primary care physician. If you've been hospitalized, ask that a copy of the discharge summary be sent to you and make sure you know the name and how to contact the attending physician who took care of you during the hospitalization.

Poor communication is not only frustrating, but it can result in an unfavorable outcome. As we all wait for the emr to improve communication and the delivery of medical care, we all need to become active in our or our children's care by managing our personal medical information.

If you have any questions

or if the staff of the AR Disability & Health Program can be of assistance, do not hesitate to contact us:

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