

# **Persons with Disabilities in Alameda County**

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December 2016



This slide set was produced by the Alameda County Public Health Department Community Assessment Planning and Evaluation (CAPE) Unit in collaboration with the ACPHD Developmental Disabilities Council and Sandi Soliday. It is intended to describe the population of persons with disabilities in Alameda County and the economic and health disparities they face.

Slides and maps may be referenced and/or reproduced in reports, presentations and publications with the ACPHD logo and the recommended citation: Alameda County Public Health Department, Disability Slide Set, December 2016.

# Key Questions

1. What is the public health definition of disability?
2. What does the population with disabilities look like in Alameda County?
3. What economic inequities exist for persons with disabilities in Alameda County?
4. What health inequities exist for persons with disabilities in Alameda County?



The four key questions this presentation will address.

# Public Health Definition of Disability



# Disability Definition for PH Surveillance

- **Hearing:** Deafness or serious difficulty hearing (all ages)
- **Vision:** Blindness or serious difficulty seeing (all ages)
- **Cognitive:** Serious difficulty in concentrating, remembering, or making decisions because of physical, mental, or emotional condition (5 years or older)
- **Ambulatory:** Serious difficulty walking or climbing stairs (5 years or older)
- **Self Care:** Difficulty dressing or bathing (5 years or older)
- **Independent Living:** Difficulty doing errands alone because of physical, mental or emotional condition (15 years or older)



Source: US Department of Health and Human Services, Final data collection standards required by section 4302 of the Affordable Care Act, October 31, 2011.

Disability has been defined differently across federal agencies, national data systems, and international frameworks.

In 2003, there were no fewer than 67 US federal statutory definitions of disability.

With passage of the Affordable Care Act (ACA) in 2010, Section 4302 required data collection standards be used for race/ethnicity, sex, primary language, and disability status.

This objective was achieved in October 2011 when HHS established data standards for defining disability in public health surveys.

These standard questions across the life span ask about limitations in six areas: hearing, vision, cognitive, ambulatory, and independent living.

- “Because surveys have counted disability in different ways, national prevalence estimates in public health surveys have ranged from 12% to 30%”
- Differences primarily due to severity of disability
  - Severely limited → lowest %
  - Moderate or mild definitions → higher %
- Sampling and survey data analysis methods also lead to differences



Source: Krahn GL, Walker, DK, Correa-De-Araujo R. Persons with Disabilities as an Unrecognized Health Disparity Population. *AJPH* 2015 Supplement 2; 105 (52): S198-206.

Because surveys have counted disability in different ways, prevalence estimates in public health surveys have ranged from 12% to 30%. These differences in prevalence estimates relate primarily to how disability is defined and what level of severity qualifies for disability status.

The recently established HHS standards for data collection specify “seriously limited,” which results in approximately 12.5% of the general US adult population being considered disabled. Other data sets that measure mild-to-moderate limitations include substantially larger portions of the population.

Other reasons include sampling and weighting of populations in surveys.

# National Disability Laws/Decisions

## 1990 – Americans with Disabilities Act (ADA)

- Provides national mandate for eliminating discrimination against individuals with disabilities.
- ADA ensures equality of opportunity, full participation, independent living and economic self-sufficiency

## 1999 – Olmstead Decision (Supreme Court)

- Upheld integration mandate of ADA
- Prohibits unjustified segregation of individuals with disabilities



# California Disability Laws & Policies

## 1985 – Lanterman Act (Lanterman Promise)

- People with developmental disabilities and their families have a right to services and supports they need to live like people without disabilities

## CA Developmental Disability Definition

- Disability begins before 18th birthday
- Disability is substantial and will continue indefinitely
- Includes: Cerebral palsy, intellectual disability, autism, and epilepsy



# Persons with Disabilities in Alameda County



This section includes demographic data on persons with disabilities in Alameda County.



# Persons with Disabilities in Alameda County

- In 2014, between 10% and 30% of the Alameda County population identified as disabled. (Estimates range between 153,500 and 470,500 persons with disabilities.)\*
- Majority of persons with disabilities are older ( $\geq 65$  years).
- Slightly more females than males have disabilities.
- Black/African Americans, American Indian/Alaskan Natives, and Native Hawaiian/Other Pacific Islanders have highest percentages of persons with disabilities.
- Cherryland, Oakland, and San Lorenzo have the highest percentages of persons with disabilities in Alameda County.

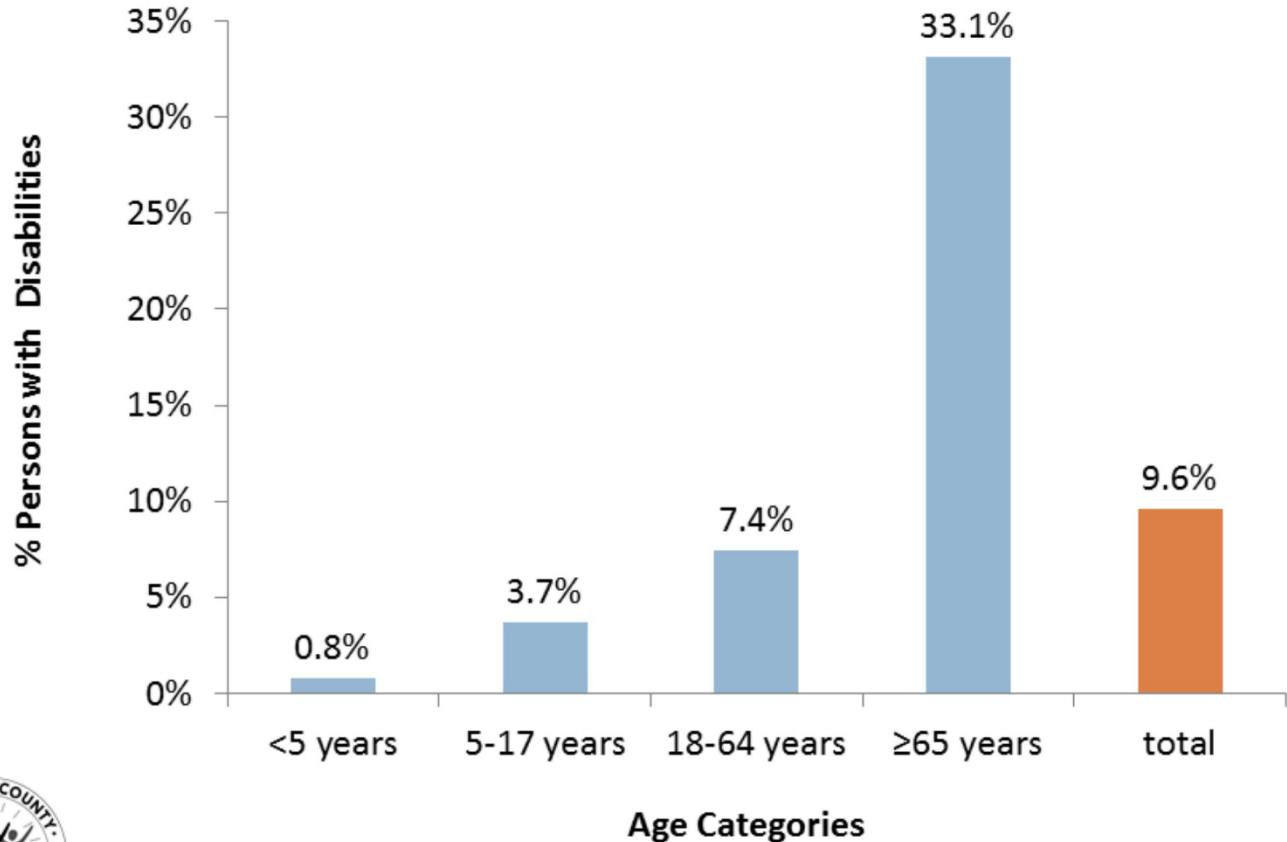


\*Disability includes at least one type of disability and could include more than one type.  
Sources: American Community Survey 2014, 1-year file (low estimate) and California Health Interview Survey 2013-2014 pooled data (high estimate).

Persons with disabilities includes one or more of the following types of disabilities: hearing, cognitive, ambulatory, self-care, and independent living.

Age, gender, race/ethnicity, and city prevalence estimates are based on American Community Survey data.

# Percentage With Any Disability by Age Group



Disabled includes at least one type of disability and could include more than one type.  
Source: American Community Survey 2014, 1-year file.

Source: American Community Survey 2014, 1-year file.

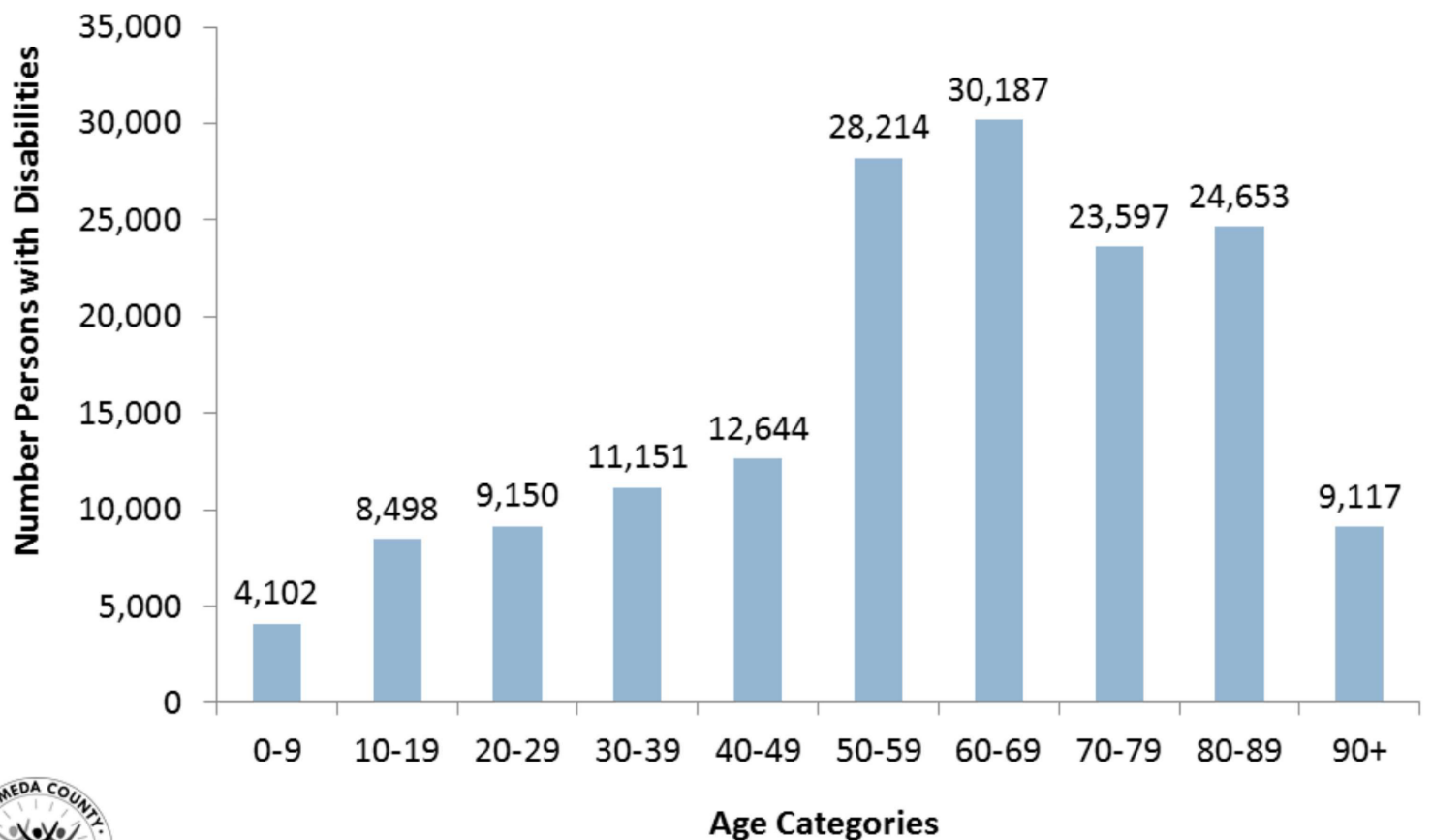
This figure shows the percentage of persons in Alameda County with at least one disability by age group as well as the total percentage for the county.

In 2014, one-third of older adults lives with one or more of the six disabilities defined by HHS, compared to less than 1% of children under 5 years. The large proportion of older adults living with any disabilities has an impact on the overall prevalence (percentage) for the county.

Of note, 18-64 years is a very large age category, comprising the majority of Alameda County residents.

This figure also shows the progression of disability with age. As people age they are more likely to develop a disability. The youngest age categories likely had congenital disabilities or had an early disability diagnosis.

# Count of Persons With Any Disability by Age Group



Disabled includes at least one type of disability and could include more than one type.  
Source: American Community Survey PUMS 2014, 1-year file.

Source: American Community Survey PUMS 2014, 1-year file.

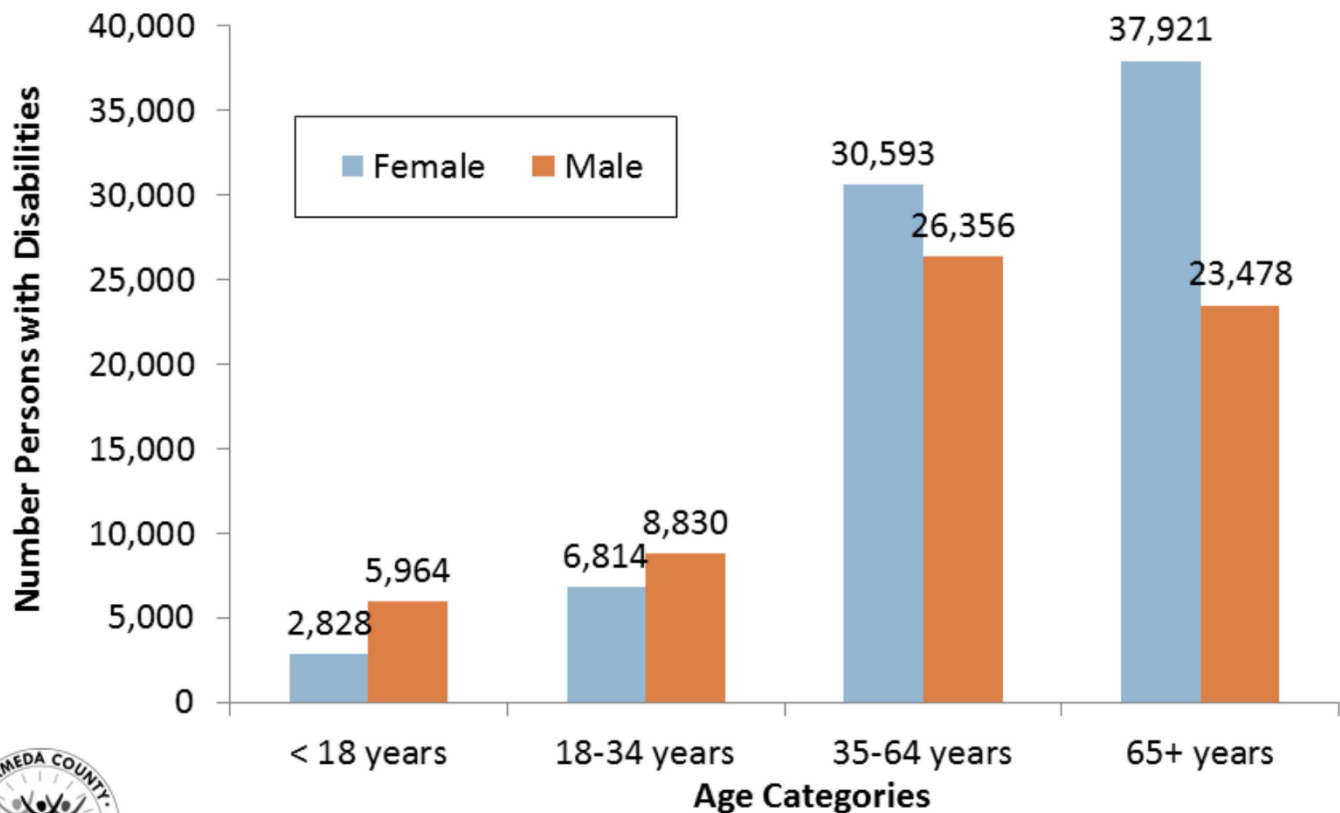
The height of the bars on the horizontal axis of this figure shows the total number of persons with any disability in 10-year age groups. These are different age groupings from those on the previous slide.

The age groups with the highest number of persons with disabilities in Alameda County are 60-69 years and 50-59 years, followed by those 70-79 years and those 80-89 years.

This bar chart shows that the majority of adults with disabilities are 50 years or more.

Of note: The 9,117 persons 90+ years with a disability comprised 77% of persons in the age category.

# Number Persons with Any Disability by Gender and Age Group



Disabled includes at least one type of disability and could include more than one type.  
Source: American Community Survey 2014, 1-year file.

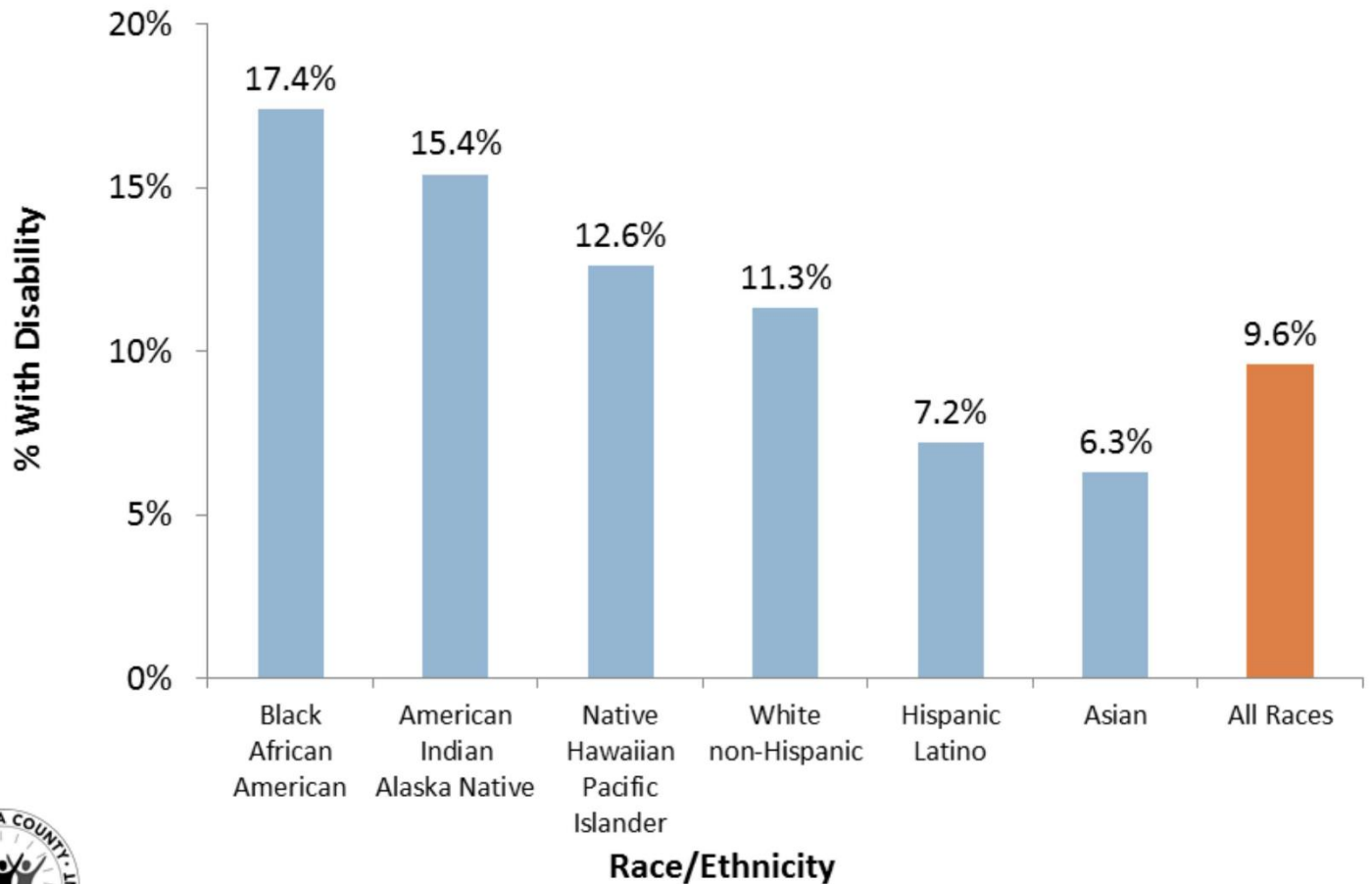
Source: American Community Survey 2014, 1-year file.

The height of the bars on the horizontal axis of this figure shows the total number of persons with any disability by gender and age group.

Overall, females have a higher prevalence of disabilities than males (10.3% v. 8.9%). However, the gender difference changes by age. There are more young males with disabilities than females, especially among those under 18 years of age; there are more than twice as many males under 18 years with disabilities than females.

Conversely, there are more older females with disabilities than males especially those at 65 years or more. This is at least partially due to the fact that women live longer than men so there are more women alive at 65 years or more than men.

# Percentage With Any Disability by Race/Ethnicity



Disabled includes at least one type of disability and could include more than one type.  
Source: American Community Survey 2014, 1-year file.

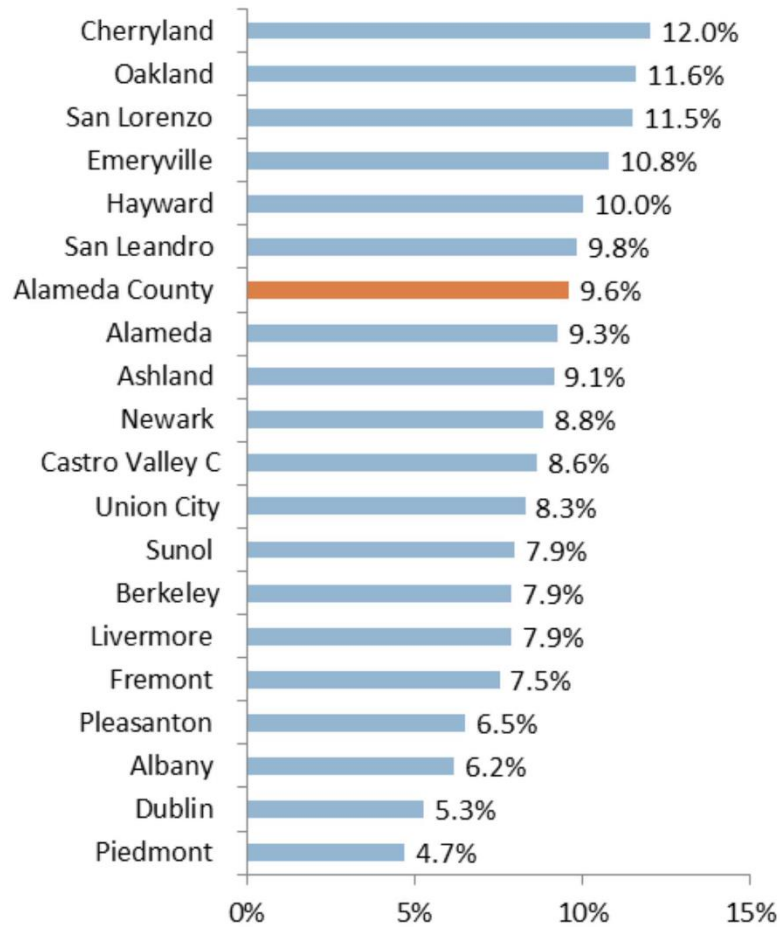
Source: American Community Survey 2014, 1-year file.

This figure shows the percentage of persons with at least one disability among each racial/ethnic group.

African Americans have the highest prevalence of persons with disabilities followed by American Indians and Pacific Islanders. Latinos and Asians have a lower prevalence of disabilities relative to the county background prevalence of 9.6%.

ACS Data Limitations: White Non-Hispanic does not include Hispanics/Latinos. All other racial groups include Hispanic/Latinos (e.g. Asians and African American/Blacks include those who are of Hispanic/Latino ethnicity). The Hispanic/Latinos category includes persons of all races.

# Percentage with Any Disability by City/Place



Source: American Community Survey 2014, 5-year file.

Source: American Community Survey 2014, 5-year file.

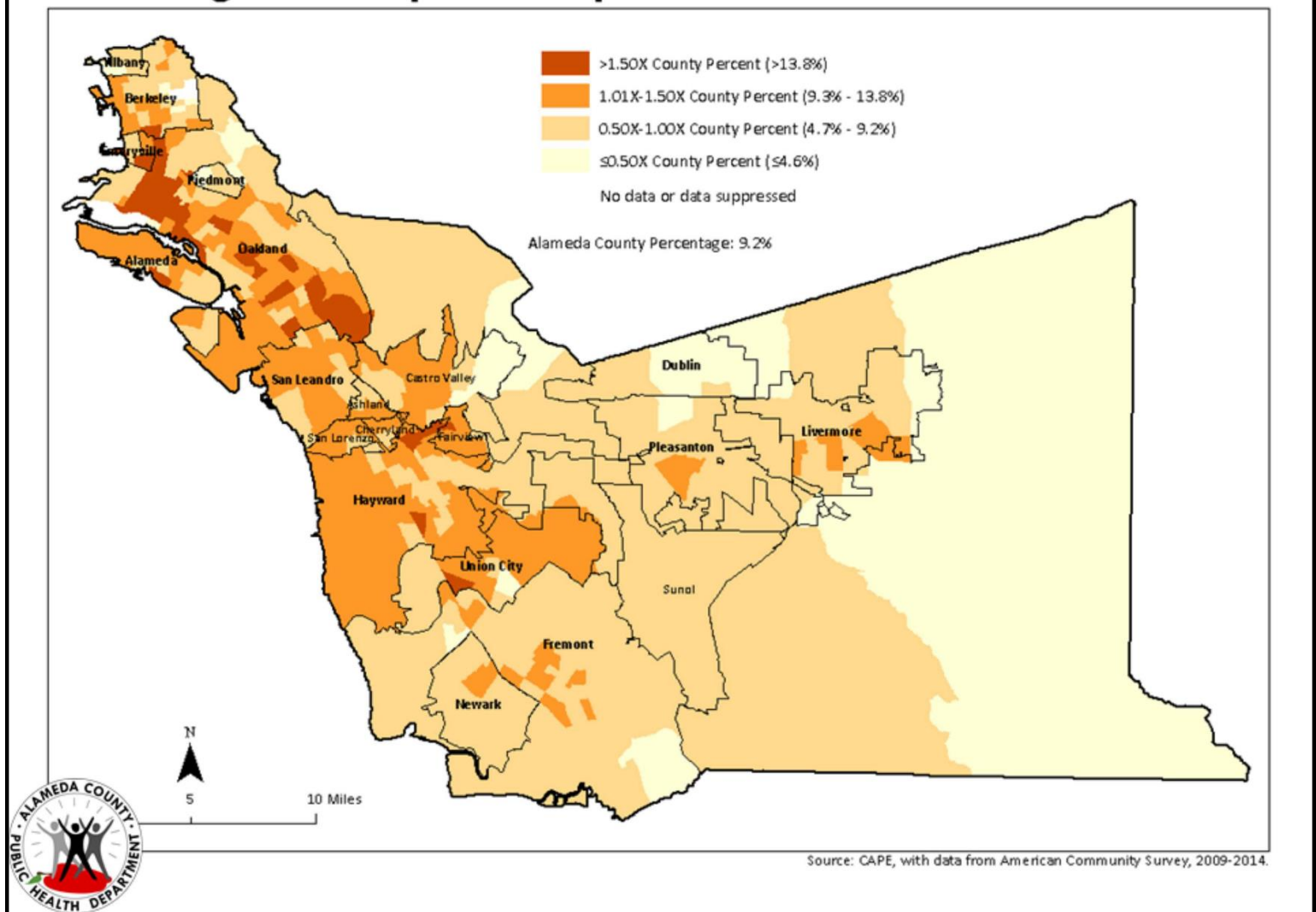
The prevalence of one or more disabilities in the population varies across Alameda County cities and places, from a low of 4.7% in Piedmont to a high of 12.0% in Cherryland, or 2.5 times that of Piedmont.

Oakland, San Lorenzo, Emeryville, and Hayward are also at or above the county prevalence of 9.6%.

Limitation: These percentages are not age-adjusted and may therefore be influenced by the age structure of each city/place.



## Percentage with any Disability



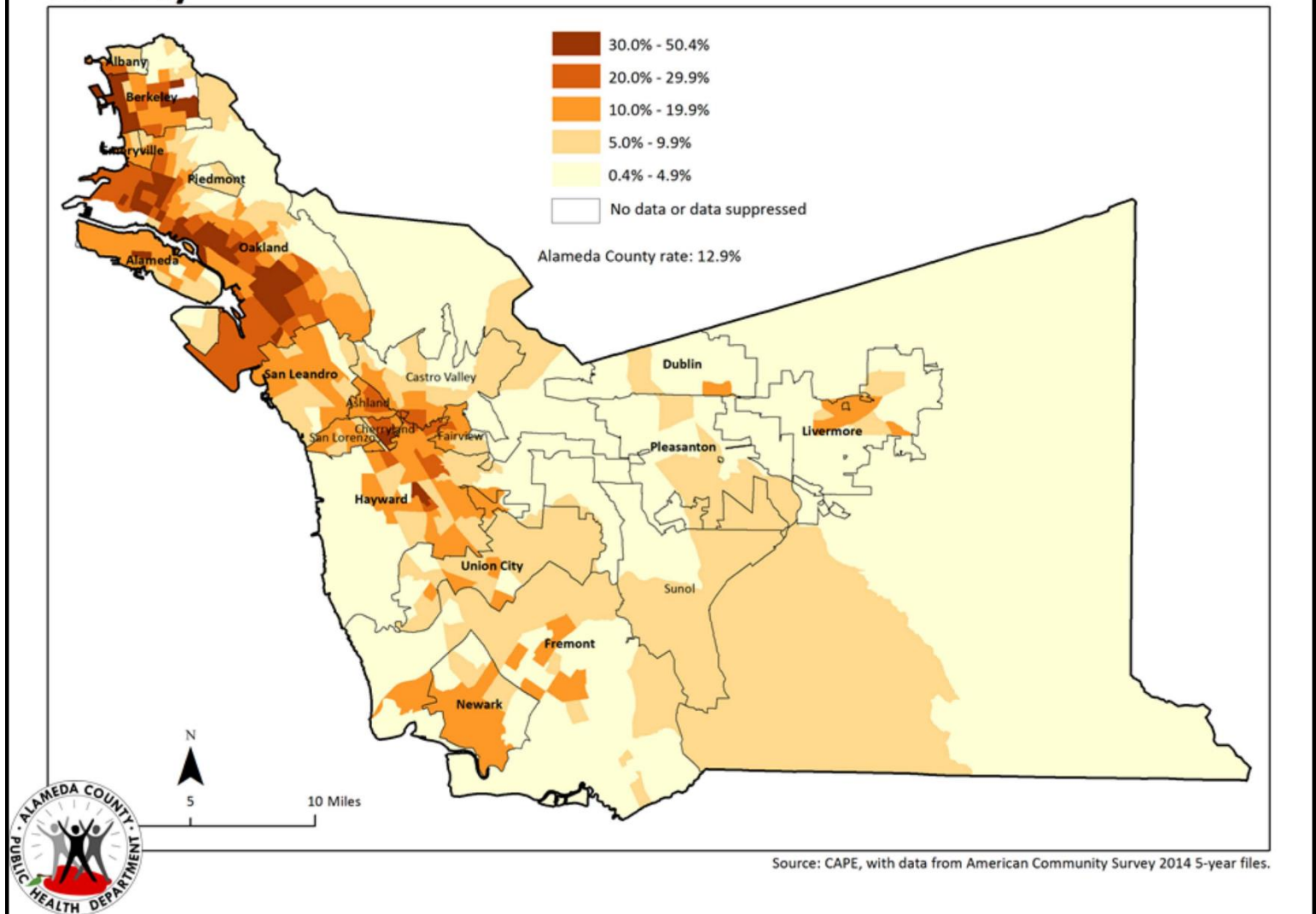
Source: American Community Survey 2014, 5-year file.

This map shows a more granular view of the prevalence of one or more disabilities in the population. Again, this is likely influenced by the presence of an older adult population, but it also tracks with places of high poverty, low life expectancy and other poor health outcomes.

Areas in north, west, and east Oakland, Cherryland, and Union City have the highest prevalence of persons with disabilities in the county.



# Poverty



Source: American Community Survey 2014, 5-year file.

Disability maps closely with poverty in that areas in Oakland (north, west, and east Oakland), Ashland, Cherryland, San Lorenzo and some areas in Berkeley have the highest rates of poverty in the county.



# **Economic Inequities among Persons with Disabilities**

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Summary conclusions of the following slides: Persons with disabilities are more likely to live in poverty, are less likely to graduate high school, are less likely to be currently employed, when employed are more likely to earn much less, are more likely to be out of the labor force (not looking for work), are more likely to live alone, have a higher housing cost burden, and are more dependent on public transit than those without disability in Alameda County.

# Economic Disparities by Disability Status

**In Alameda County, 1 in 5 people *with disabilities* live in poverty**



**1 in 10 people *without disabilities* live in poverty**



**In Alameda County, 1 in 2 people *with disabilities* cannot make ends meet (<200% FPL)**



**1 in 4 people *without disabilities* cannot make ends meet (<200% FPL)**



Source: American Community Survey 2014, 1-year file.

Source: American Community Survey 2014, 1-year file.

People with disabilities are poorer than the rest.

22% of people with disabilities live at or below 100% of the federal poverty level compared to 11.5% of those without disabilities in Alameda County.

42% of people with disabilities live below 200% of the federal poverty level in Alameda County. In contrast, just about one-fourth of people without a disability live with incomes this low.

## Key Definitions

The poverty rate is defined by the Office of Management and Budget (OMB) by the income and size of the household. For example, the rate in 2014 for a family of four was \$23,850 for the 48 contiguous states and DC. If the household is in poverty then every person in that household is considered to be in poverty.

# Economic Disparities by Disability Status

**1 in 4 people 25 years or more  
with disabilities did not graduate  
high school**



**1 in 10 people 25 years or more  
without disabilities did not graduate  
high school**



**3 in 5 adults (18-64 years) with  
disabilities are not in the labor force**



**1 in 5 adults (18-64 years) without  
disabilities are not in the labor force**



Source: Community Survey 2014, 1-year file.

Source: American Community Survey 2014, 1-year file.

People 25+ years with disabilities are less likely to have educational attainment of high school or equivalent, are more likely to be unemployed, and are more likely to not participate in the labor force (be employed or unemployed and looking for work).

It is clear that having a disability can get in the way of graduating high school and attending and graduating from college. For those 25+ years without disabilities, 46% have completed a bachelor's degree or better, twice the rate for people with disabilities (23%).

Conversely, the percentage of adults 25+ years with less than a high school education is 24%, more than twice that of among people without disabilities (11%).

60% of working age adults 18-64 years with a disability are not in the labor force compared to 20% of those without a disability.

# Economic Disparities by Disability Status

	Persons with Disabilities	Persons without Disabilities
Median Earnings	\$25,237	\$40,616
Living Alone	22.7%	7.4%
>50% Housing Cost Burden	23.7%	14.3%
Transit Dependent	20.7%	5.1%
Uninsured	4.6%	8.5%



Source: American Community Survey 2014, 1-year file.

Source: American Community Survey 2014, 1-year file.

People with disabilities in Alameda County earn less, are more likely to live alone, experience higher housing cost burdens, and are more dependent on public transportation than those without disabilities. This points to further economic vulnerability beyond poverty, education, and employment.

- The median annual income among adults with disabilities is about \$15,000 a year less than those without disabilities.
- The percentage of persons with disabilities living alone is over three times that of those without disabilities (22.7% v 7.4%).
- Persons with disabilities have a higher housing cost burden. 23.7% pay one-half or more of their monthly income toward housing as compared to 14.3% without disabilities.
- More than one-fifth (20.7%) of persons with disabilities are dependent on public transportation (have zero vehicles in their household) versus only 5.1% of those without disabilities, or four times the rate among the disabled.
- More persons with disabilities have health insurance than those without. Only 4.6% of those with disabilities are uninsured versus 8.5% of those without disabilities.

## Key Definitions

**Median Earnings:** Median income for individuals 15 years old and over for whom income can be determined; median means that 1/2 of incomes fall above this and 1/2 fall below this number.

**Living Alone:** Living alone includes all persons living in a household of only 1 person.

**Transit Dependent:** Persons with 0 vehicles in the household.

**Uninsured:** People are classified as uninsured if for the entire year they were not covered by any type of health insurance or those whose only coverage was Indian Health Service.

# Health Inequities by Disability Status

- Health Care Utilization
- Health Behaviors
- Chronic Health Conditions

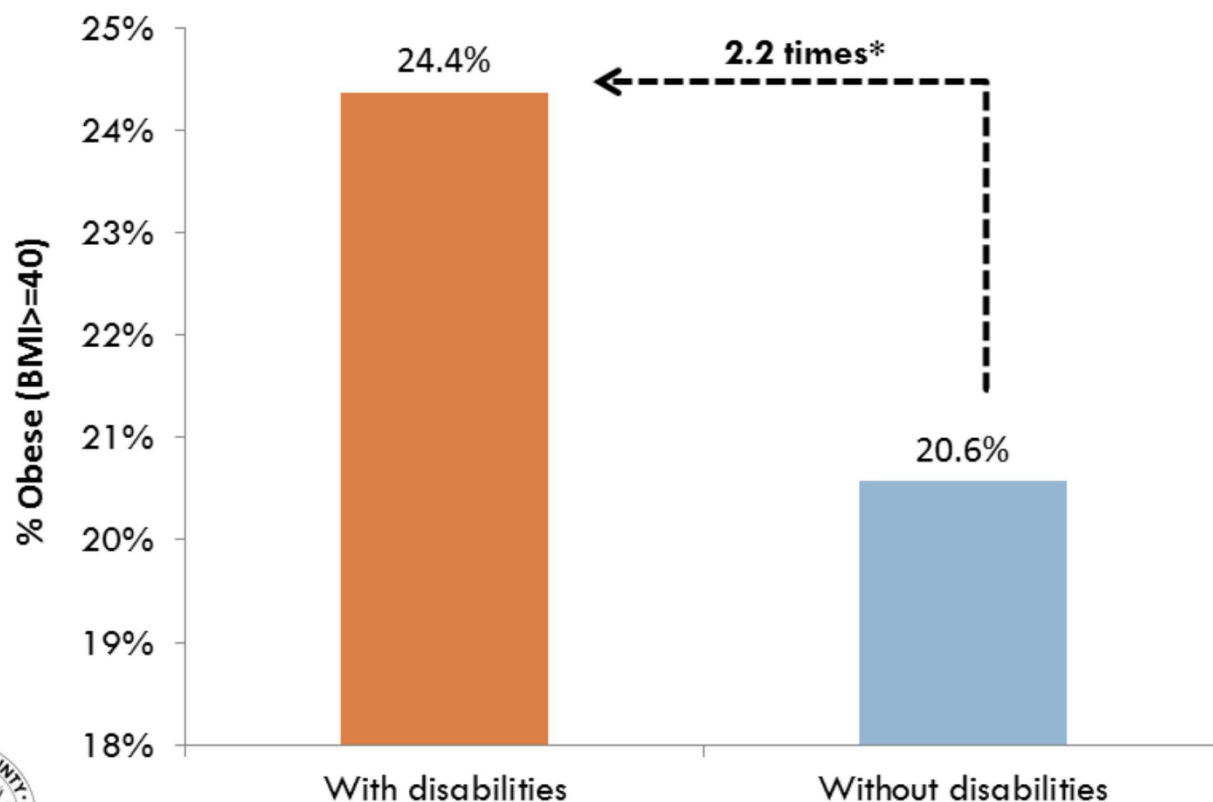
Data Source: California Health Interview Survey (CHIS), 2013-2014 data. CHIS data reflects a 30% prevalence of persons with any disability in Alameda County.

CHIS data show the 30% of persons in Alameda County have one disability or more.

Other surveys have publicized other rates of disability. These rates are affected by survey question, method, and other factors. Each survey has strengths and weaknesses. Comparing between the surveys' data is discouraged by all survey organizations.

Health data shows health inequities by disability status in three areas: Utilization of health care services, unhealthy behaviors, and chronic medical conditions.

# Percentage of Persons Who Visited the ER within the Past Year by Disability Status



\*Statistically significant difference.

Source: California Health Interview Survey 2013-2014 pooled data.

Source: California Health Interview Survey 2013-2014 pooled data. Includes all adults 18 years and over.

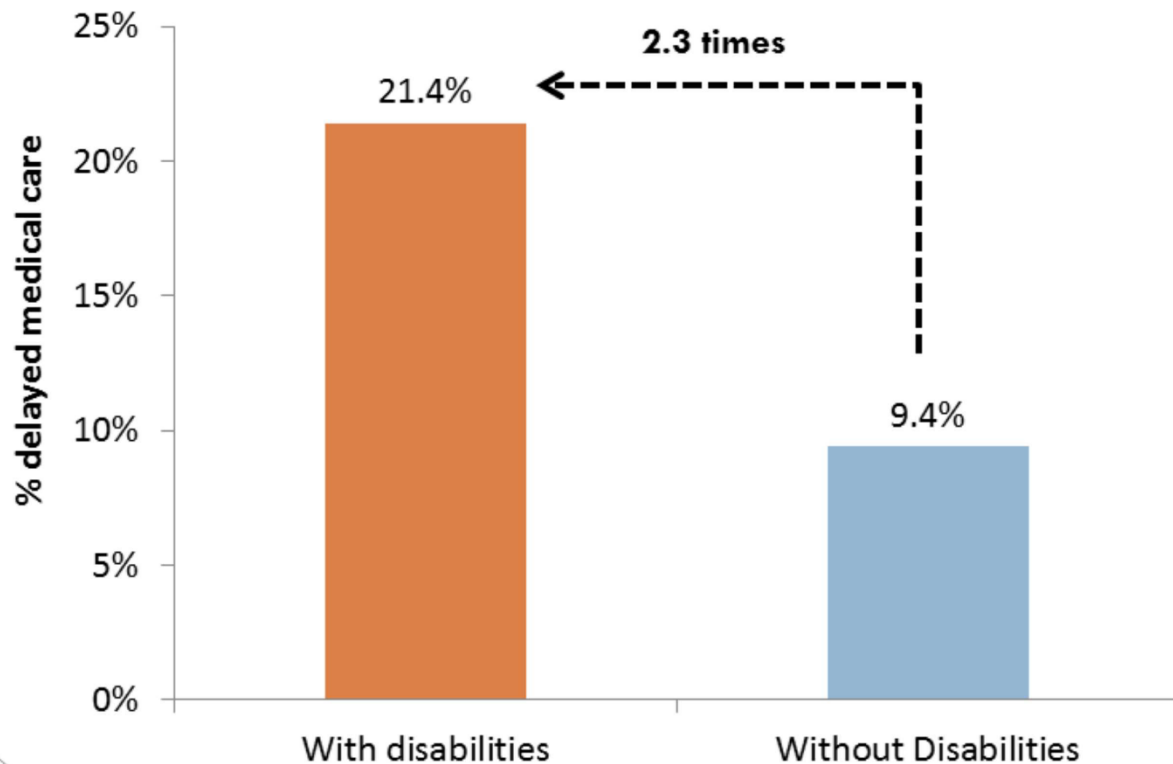
CHIS question: Did you visit the emergency room in the past 12 months? (Y/N)

Among those with disabilities 34% self-reported that they had visited the emergency department within the past year versus 16% of those without disabilities.

This means that persons with disabilities are over two times as likely to have visited the ER within the past year as those without disabilities in Alameda County.

This result is statistically significant.

# Percentage of Persons Who Delayed Medical Care within the Past Year by Disability Status



Source: California Health Interview Survey 2013-2014 pooled data.

Source: California Health Interview Survey 2013-2014 pooled data. Includes all adults 18 years and over.

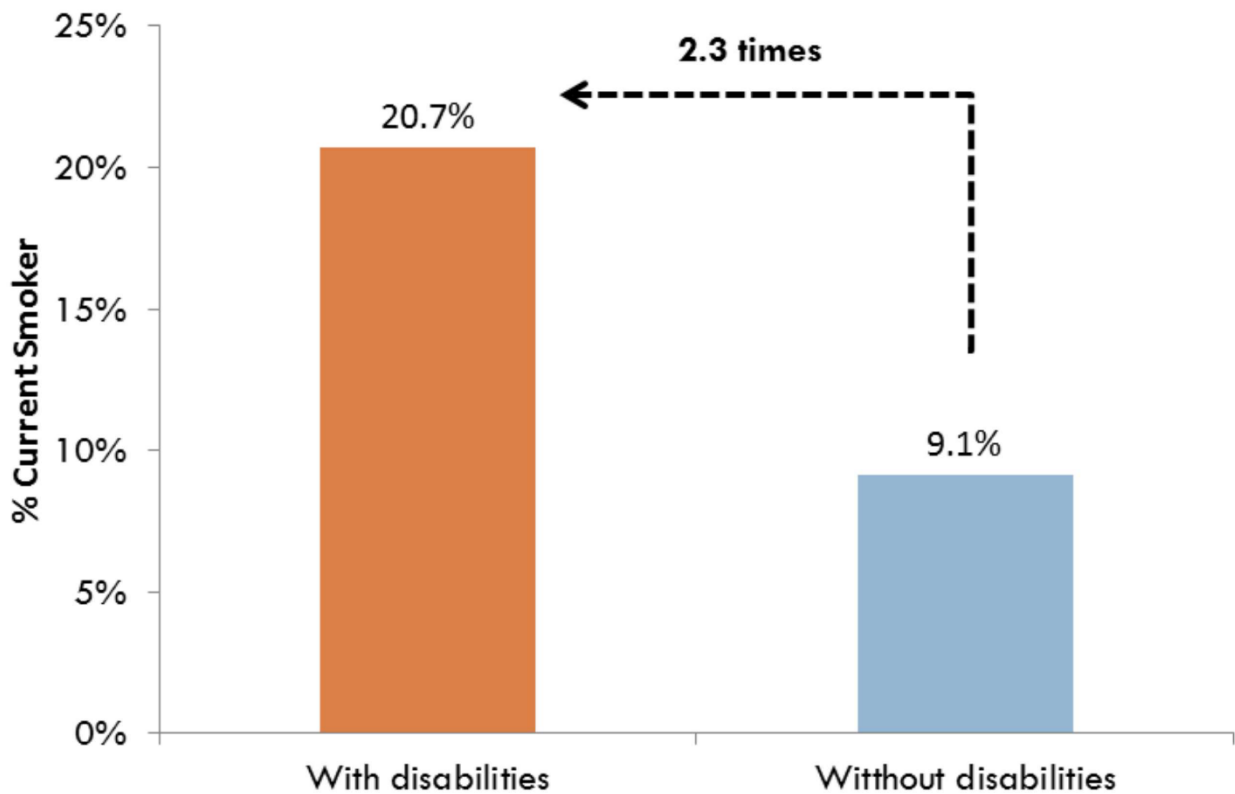
CHIS question: Did you delay or not get medical care in the past 12 months? (Y/N)

Among those with disabilities, 21% self-reported that they had delayed or did not get needed medical care within the past year versus 9% of those without disabilities.

This means that persons with disabilities are over two times as likely to have delayed medical care within the past year as compared to those without disabilities in Alameda County.

This result is not statistically significant.

## Percentage of Current Smokers by Disability Status



Source: California Health Interview Survey 2013-2014 pooled data.

Source: California Health Interview Survey 2013-2014 pooled data. Includes all adults 18 years and over.

CHIS: Created variable on smoking status as current, former, or never.

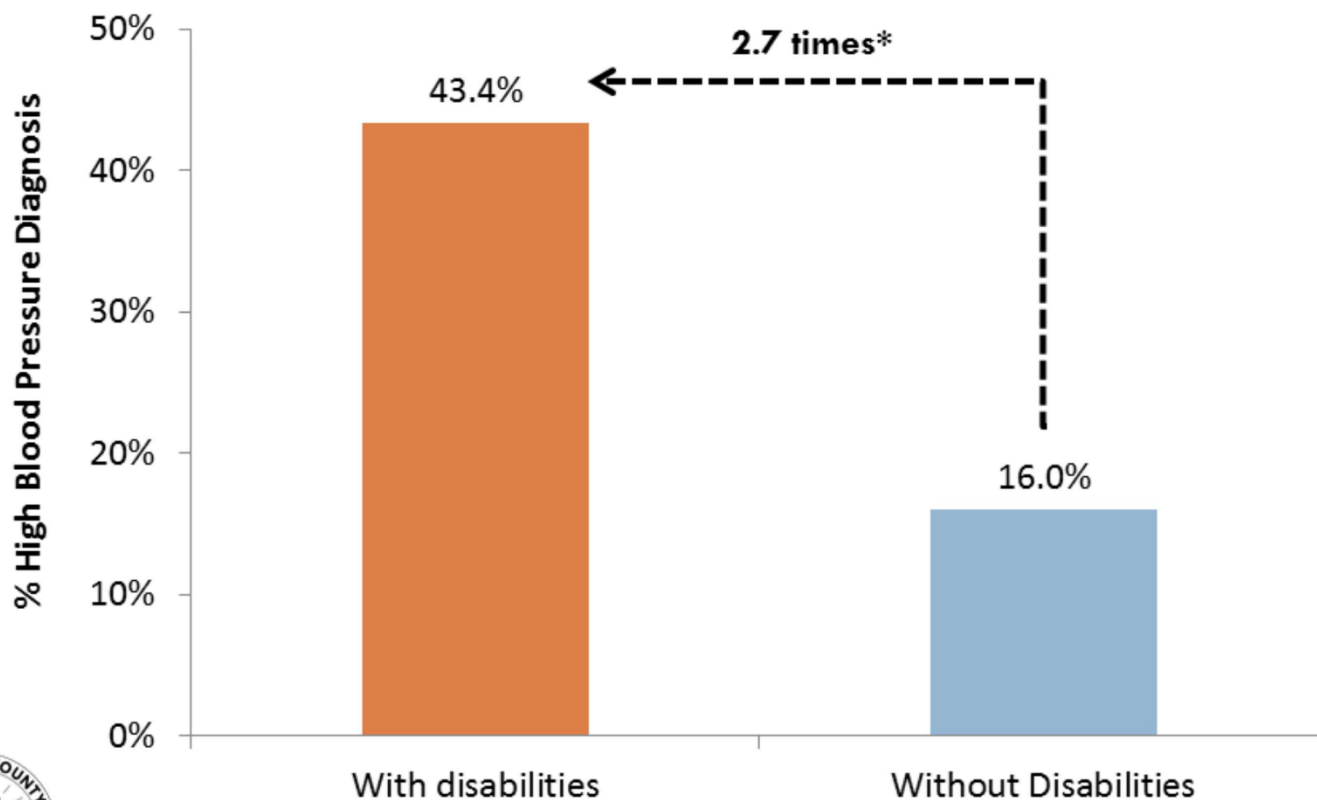
Among those with disabilities, 21% self-reported that they were current smokers versus 9% of those without disabilities.

This means that those with disabilities were over two times as likely to be current smokers as those without disabilities in Alameda County.

This result is not statistically significant.



# High Blood Pressure Diagnosis by Disability Status



\*Statistically significant difference.

Source: California Health Interview Survey 2013-2014 pooled data.

Source: California Health Interview Survey 2013-2014 pooled data. Includes all adults 18 years and over.

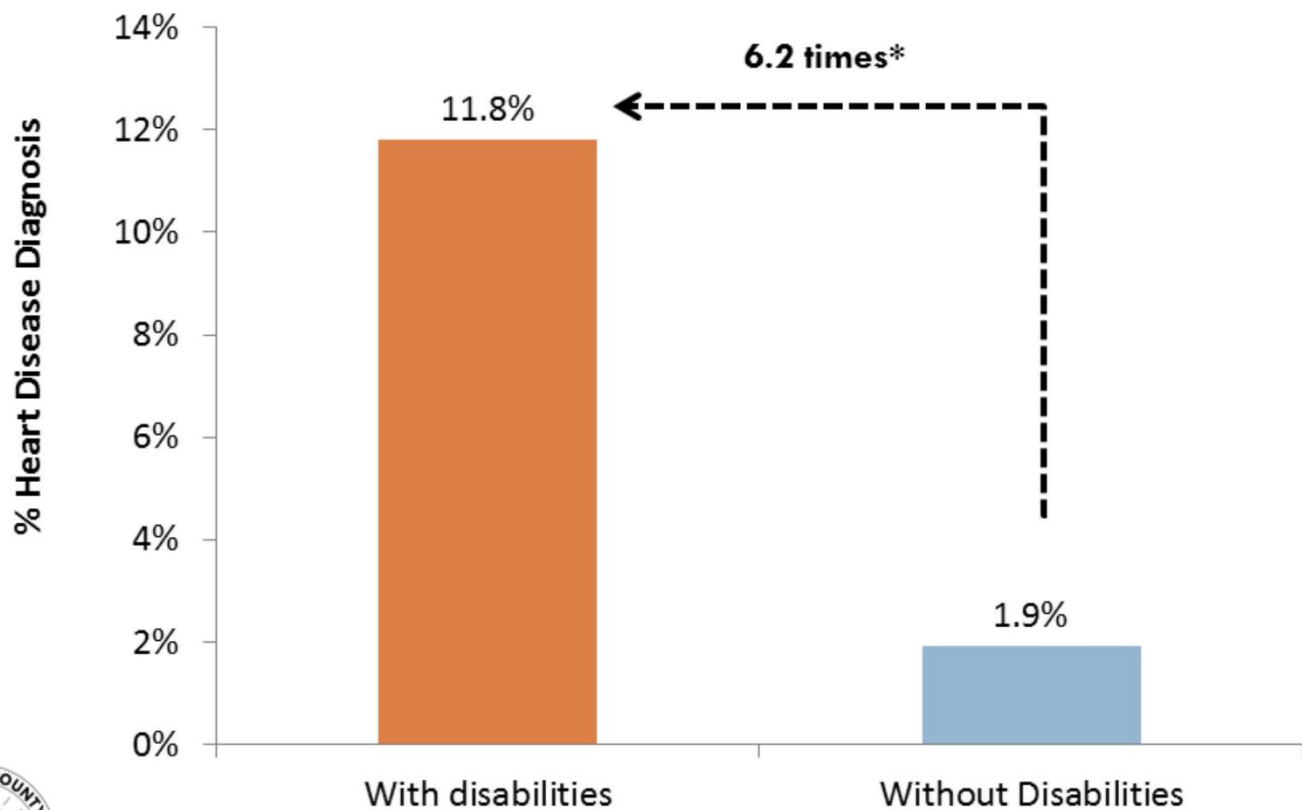
CHIS question: Has a doctor ever told you that you have high blood pressure? (Y/N).

Among those with disabilities 43% self-reported that they were diagnosed with high blood pressure compared to 16% of those without disabilities.

This means represents a 2.7 times higher percentage in high blood pressure among those with disabilities compared to those without in Alameda County.

This result is statistically significant.

# Heart Disease Prevalence by Disability Status



\*Statistically significant difference.

Source: California Health Interview Survey 2013-2014 pooled data.

Source: California Health Interview Survey 2013-2014 pooled data. Includes all adults 18 years and over.

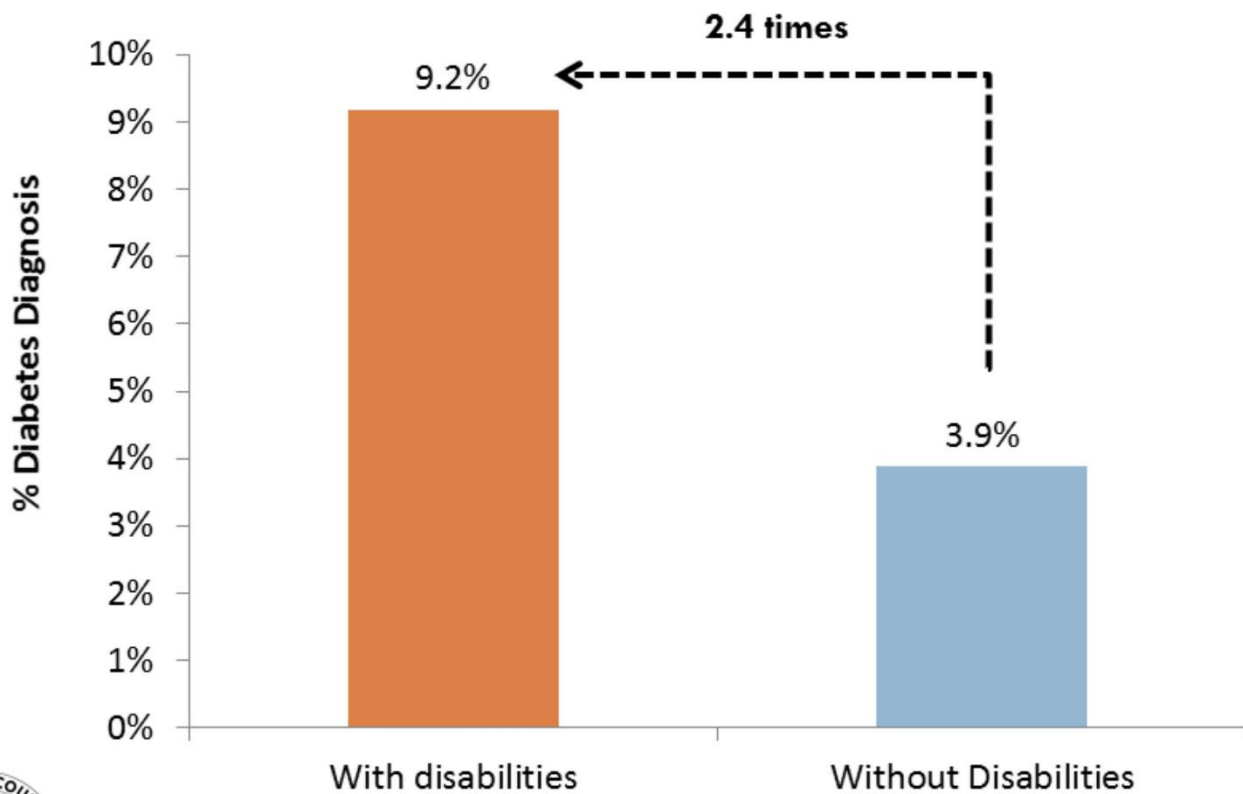
CHIS question: Has a doctor ever told you that you have any kind of heart disease? (Y/N).

Among those with disabilities 12% self-reported that they were diagnosed with heart disease compared to 2% of those without disabilities.

This represents a 6.2 times higher percentage in heart disease among those with disabilities compared to those without in Alameda County.

This result is statistically significant.

# Diabetes Prevalence by Disability Status



Source: California Health Interview Survey 2013-2014 pooled data.

Source: California Health Interview Survey 2013-2014 pooled data. Includes all adults 18 years and over.

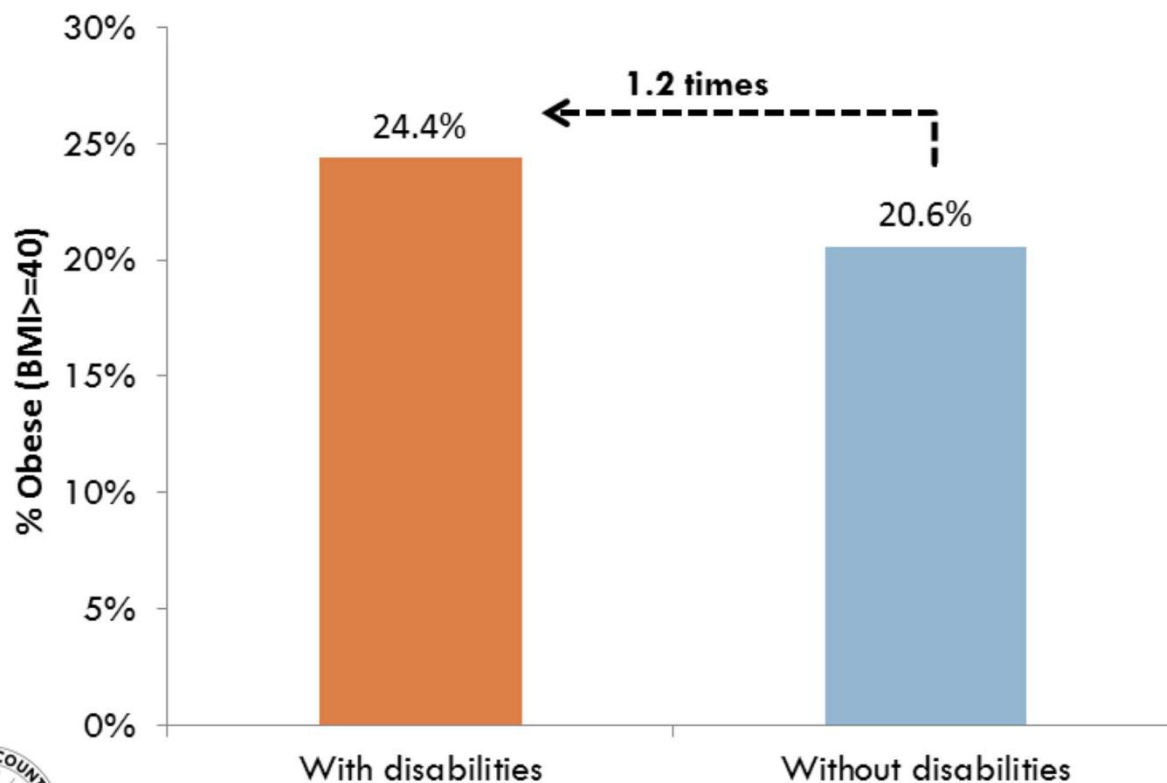
CHIS question: Has a doctor ever told you that you have diabetes? (Y/N).

Among those with disabilities 9% self-reported that they were diagnosed with diabetes compared to 4% of those without disabilities.

This represents a 2.4 times higher percentage in diabetes among those with disabilities compared to those without in Alameda County.

This result is not statistically significant, but is very close.

# Obesity Prevalence by Disability Status



Source: California Health Interview Survey 2013-2014 pooled data.

Source: California Health Interview Survey 2013-2014 pooled data. Includes all adults 18 years and over.

CHIS: Created variable based on self-reported body mass index (BMI)  $\geq 30$ , or obese.

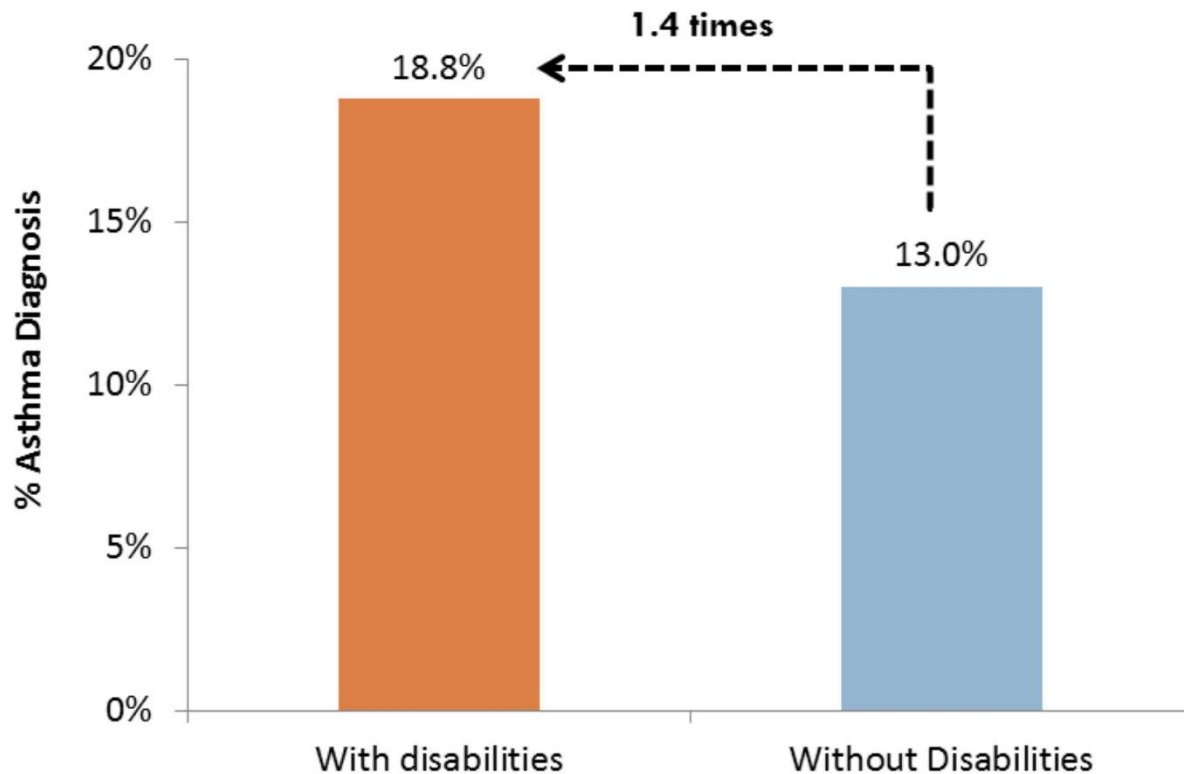
Obesity is an important factor in developing additional chronic health conditions. Nationally there is a 10% point increase 44% v. 34% nationwide (NHANES 2009-2010).

Among those with disabilities 24.4% self-reported that they were obese compared to 20.6% of those without disabilities.

This represents a three percentage=point increase in obesity among those with disabilities than those without in Alameda County.

This result is not statistically significant.

# Asthma Prevalence by Disability Status



Source: California Health Interview Survey 2013-2014 pooled data.

Source: California Health Interview Survey 2013-2014 pooled data. Includes all adults 18 years and over.

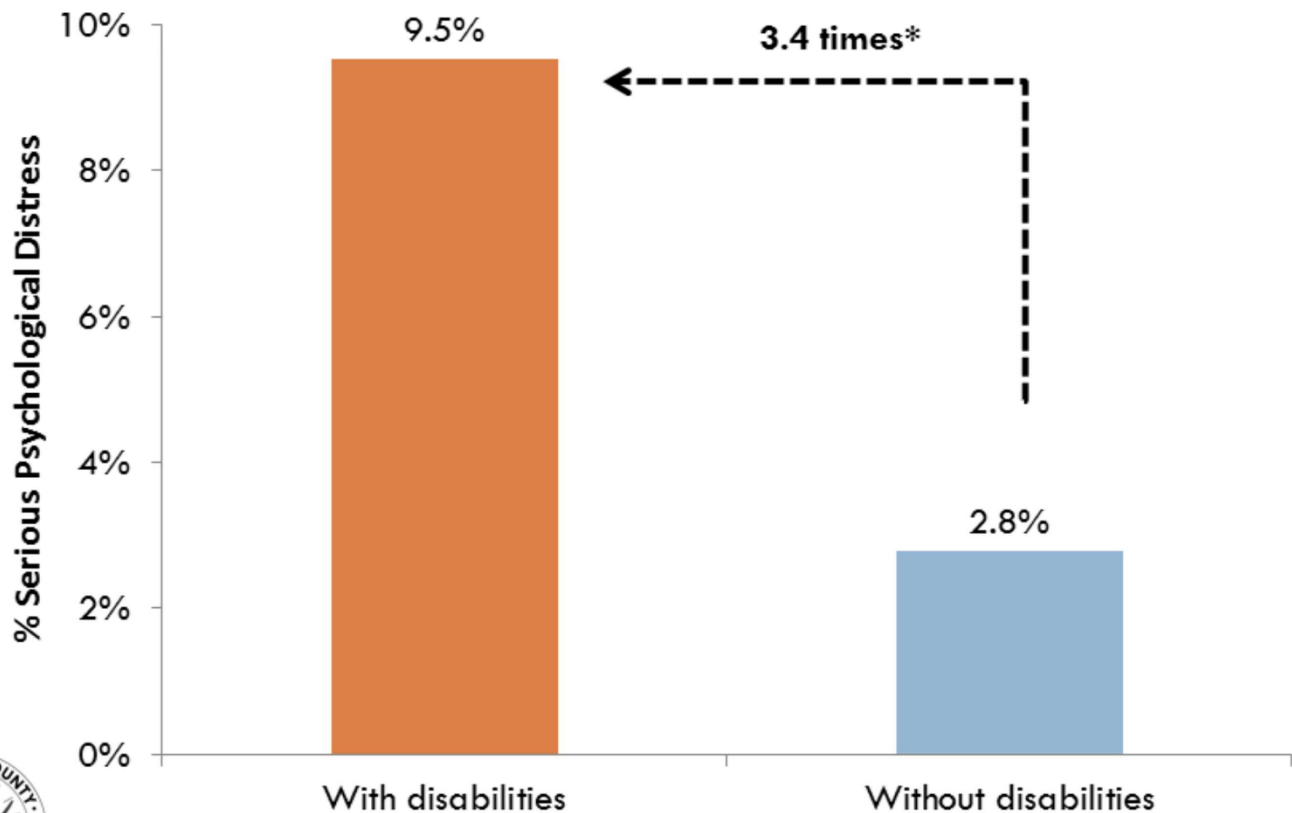
CHIS question: Has a doctor ever told you that you have diabetes? (Y/N).

Among those with disabilities 19% self-reported that they were diagnosed with asthma compared to 13% of those without disabilities.

This represents a 6 percentage point increase in asthma among those with disabilities than those without in Alameda County.

This result is small and not statistically significant

# Serious Psychological Distress by Disability Status



\*Statistically significant difference.

Source: California Health Interview Survey 2013-2014 pooled data.

Source: California Health Interview Survey 2013-2014 pooled data. Includes all adults 18 years and over.

CHIS question: Likely has had psychological distress in the past 12 months? (Y/N).

Among those with disabilities 10% self-reported that they had experienced serious psychological distress in the past year compared to 3% of those without disabilities.

This represents a 3.4 times higher percentage in serious psychological distress among those with disabilities compared to those without in Alameda County.

This result is statistically significant

# Six Areas to Improve Health for People with Disabilities

- Improved access to health care and human services
- Increased data for decision-making
- Strengthened health and human services workforce capacity
- Explicit inclusion in public health programs
- Increased preparation for emergencies
- Exploring intersection of disability and aging populations and services



Source: Krahn et al. Persons with Disabilities as an Unrecognized Health Disparity Population. *AJPH* 2015; 105 (S2): S198-206.

# HCSA Disability Programs and Services

- Blue Skies: Provides consultation and linkages to mental health services for MPCA home visiting clients.
- CCS: Assists children with serious medical conditions receiving specialty medical care.
- CCS Medical Therapy Units: Provides free physical and occupational therapy services for medically eligible children with disabilities.
- DDC Program and Policy Unit: Provides services for individuals with development disabilities and their families.





# HCSA Disability Programs and Services (cont.)

- **Healthcare for the Homeless:** Provides coordination of health centers and CBOs to increase access and improve care for individuals experiencing homelessness.
- **Public Health Nursing:** Provides comprehensive assessments of individuals and families to determine their health care needs, referrals and linkages to resources, and health information and education.
- **BHCS:** Provides mental health and substance use services for residents including crisis support, crisis facilities and advocacy.



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Lewis Kraus, Deputy Director of the Center on Disability at the Public Health Institute provided insight and technical support for this slide presentation.