

## Promoting Health and Wellness

### Introduction

People with intellectual and developmental disabilities (IDD) have a greater prevalence of physical health conditions and face more significant barriers to accessing adequate medical care compared to people without disabilities (Cooper et al., 2015). People with IDD are also more likely to die prematurely from preventable and avoidable causes (O’Leary et al., 2018). Understanding the socio-ecological factors associated with negative and positive health outcomes is essential to promote health and wellness for people with IDD.

This issue brief describes health and wellness goals organized using the individual, interpersonal, community, and societal levels of the socio-ecological model (SEM; McLeroy et al., 1988), and provide an opportunity for people with IDD, clinicians, researchers, educators, and key community partners to take a collaborative and integrated approach to promote positive health outcomes.

### Individual Level Goals

health promotion. Health promotion education should include information about the “fatal five” and other chronic health conditions to reduce their incidence or impact, coaching and other techniques to improve health literacy, education promoting self-determination and supported decision-making, and transition planning across the lifespan.

### Interpersonal Level Goals

Foster environments where people with IDD feel valued, supported, and included, to enhance their overall quality of life. Foster interpersonal goals by addressing social isolation and developing

### Plain Language Summary

People with intellectual and developmental disabilities (IDD) get sick more often than others and sometimes have trouble getting good medical care. They might die earlier from health problems that could have been prevented. Here are four main recommendations:

- **Help Individuals:** Teach people with IDD and their families about important health problems. Show them how to make good choices about their health. Help them plan for their future.
- **Help Small Groups:** Make sure people with IDD feel welcome and cared for. Help them meet other people and learn about health together. Train caregivers to better understand what people with IDD need.
- **Help the Community:** Make buildings and programs easier for everyone to use. Make sure doctors and nurses learn about helping people with IDD. Make it easier for people to get rides to where they need to go. Remember that people with IDD come from all different backgrounds.
- **Help the Country:** Make sure health insurance pays for things like dentist visits. Get money to help people with disabilities live in their homes and communities. Keep track of health problems that affect people with IDD. Create health programs that work for everyone.

We need to help in all these different ways at the same time to make sure people with IDD can be as healthy as possible.

physical and mental peer health education programs for people with IDD, enhancing support for family caregivers, and providing person-centered training on the health and wellness needs of people with IDD to direct support professionals.

### **Community Level Goals**

Enhance the physical and social accessibility of community programs, facilities, and opportunities for engagement in health promoting activities. Health promotion programs designed for the general population, such as lifestyle campaigns, rarely reach people with an intellectual disability (Joyce, 2024). Community level goals should include universal design across programs and facilities, mandatory inclusion of IDD content in healthcare workforce training, expanded transportation options, and an acknowledgement of the intersecting identities people with IDD often experience.

### **Societal Level Goals**

Pursue public policies that protect and support the health of people with IDD. Ensure adequate Medicaid coverage for dental care, preventative care, and specialists services, and funding for home and community-based service (HCBS) services to reduce health care disparities. Develop and implement health programs using the principles of universal design, including supporting people with disabilities toward reducing barriers to positive health outcomes. Include IDD markers in large national health datasets, such as the National Health Information Systems (NHIS) or Behavioral Risk Factors Surveillance Systems (BRFSS) to increase knowledge about the health concerns of people with IDD.

### **Conclusion**

A multilevel SEM approach has potential to help A multilevel SEM approach has potential to help expand access and opportunities to health promotion for people with IDD. Individual, interpersonal, community, and societal level approaches are critical to addressing the needs of people with IDD.

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