Adults with Disabilities
Physical activity is for everybody

More than 21 million US adults 18–64 years of age have a disability. These are adults with serious difficulty walking or climbing stairs; hearing; seeing; or concentrating, remembering, or making decisions. Most adults with disabilities are able to participate in physical activity, yet nearly half of them get no aerobic physical activity. Physical activity benefits all adults, whether or not they have a disability, by reducing their risk of serious chronic diseases, such as heart disease, stroke, diabetes and some cancers. Only 44% of adults with disabilities who visited a doctor in the past year were told by a doctor to get physical activity. Yet adults with disabilities were 82% more likely to be physically active if their doctor recommended it.

Doctors and other health professionals can:

◊ Ask adults with disabilities how much physical activity they get each week.

◊ Remind adults with disabilities to get regular physical activity consistent with their abilities. They should try to get at least 2 1/2 hours a week of moderate-intensity physical activity. If this is not possible, some activity is better than none.

◊ Recommend physical activity options that match the specific abilities of each person and connect them to resources that can help each person be physically active.

See page 4
Want to learn more? Visit

www.cdc.gov/vitalsigns/disabilities/

National Center on Birth Defects and Developmental Disabilities
Division of Human Development and Disability
Problem

More adults with disabilities need to get physical activity.

Adults with disabilities who get no physical activity are 50% more likely to have certain chronic diseases than those who get the recommended amount of physical activity.

◊ Aerobic physical activity can help all adults avoid costly and deadly chronic diseases such as heart disease, stroke, diabetes, and some cancers.

◊ 1 in 2 adults with disabilities get no aerobic physical activity compared with 1 in 4 adults without disabilities.

◊ Adults with mobility limitations (serious difficulty walking or climbing stairs) are the least likely to get any aerobic physical activity. Nearly 6 in 10 of them do not get any aerobic physical activity.

◊ Adults with disabilities face physical and emotional barriers to getting aerobic physical activity, including:
  ■ Knowing about and getting to programs, places, and spaces where they can be physically active;
  ■ Having social support for physical activity;
  ■ Finding fitness and health professionals who can provide physical activity options that match their specific abilities.

Adults with disabilities are more likely to get physical activity if doctors recommend it.

◊ Only 44% of adults with disabilities who visited a doctor in the past year got a physical activity recommendation from their doctor.

◊ Adults with disabilities who got a physical activity recommendation from their doctor were 82% more likely to be physically active than those who did not get one.

◊ It is critical for doctors to know the Physical Activity Guidelines and help their patients with disabilities overcome barriers to reach their physical activity goals.

Percentage of adults ages 18–64 who get no aerobic physical activity, by disability type

Mobility: Serious difficulty walking or climbing stairs
Cognitive: Serious difficulty concentrating, remembering or making decisions
Vision: Serious difficulty seeing, even wearing glasses
Hearing: Serious difficulty hearing
No Disability: Does not have any of the above disability types

Percentage of adults ages 18–64 with disabilities who have 1 or more chronic diseases, by aerobic physical activity level

Inactive

Active

No chronic disease

1 or more chronic diseases

Increasing physical activity among adults with disabilities

Doctors and other health professionals can use these steps to recommend aerobic physical activity options that match each person’s specific abilities and connect him or her to resources that can help each person be physically active.

1. Know the Physical Activity Guidelines
   - The Physical Activity Guidelines are for everybody. www.health.gov/paguidelines/guidelines/
   - Review the patient’s charts before each visit.
   - Explain that adults of all shapes, sizes and abilities can benefit from being physically active.
   - Encourage at least 2½ hours a week of moderate-intensity physical activity.

2. Ask about physical activity
   - How much physical activity are you currently doing each week?
   - What types of physical activity do you enjoy?
   - How can you add more physical activity in your life?
   - Remember to look beyond the disability and put the person first. Use terms such as “person with a disability” instead of “disabled” or “handicapped person”.

3. Discuss barriers to physical activity
   - Physical Barriers
   - Emotional Barriers

4. Recommend physical activity options
   - Describe physical activity options based on patient’s abilities.
   - Brisk walking
   - Wheeling oneself in wheelchair
   - Swimming laps
   - Water aerobics
   - Hand-crank bicycle

5. Refer patient to resources and programs
   - Check-in with patient about his or her activity level at every visit.
   - Refer patient to resources and programs to help them begin or maintain their physical activity.
   - Remember to use the “teach-back” method to make sure patient understands the recommendations.

For resources: www.cdc.gov/disabilities/PA

What Can Be Done

The Federal government is

◊ Funding national and state programs to develop physical activity programs for adults with disabilities.
  www.cdc.gov/disabilities/programs

◊ Measuring state and national progress towards getting all US adults physically active through the Disability and Health Data System (DHDS) and other systems.

◊ Providing accessible and high-quality health care to adults with disabilities by improving training and cultural competency for doctors and other health professionals.

Doctors and other health professionals can

◊ Ask adults with disabilities about how much physical activity they get each week.

◊ Remind adults with disabilities to get regular physical activity. They should try to get at least 2 hours and 30 minutes a week of moderate-intensity physical activity. If this is not possible, patients with disabilities should avoid inactivity; some activity is better than none.

◊ Recommend physical activity options that match each person’s specific abilities and connect him or her to resources that can help each person be physically active.

◊ Use CDC’s website to find resources that can help you talk to patients with disabilities about physical activity.
  www.cdc.gov/disabilities/PA

States and communities can

◊ Bring together adults with disabilities, health professionals, and community leaders to address resource needs to increase physical activity.

◊ Make sure physical activity, recreation, and sport-based program opportunities are accessible to adults with disabilities.

◊ Incorporate community features such as proper curb cuts on sidewalks, ramps for wheelchair access, and well-maintained trails to improve safe access to public places for physical activity.

◊ Encourage fitness and recreation facilities to have low-counter front desks for wheelchair users, family changing areas in locker rooms, push-button operated doors, and elevators.

Adults with disabilities can

◊ Talk to your doctor about how much and what kind of physical activity is right for you.

◊ Find opportunities to increase physical activity regularly in ways that meet your needs and abilities.
  - Regular aerobic physical activity increases heart and lung function; improves daily living activities and independence; decreases chances of developing chronic diseases; and improves mental health.
    www.cdc.gov/disabilities/PA

◊ Start slowly based on your abilities and fitness level (e.g. be active for at least 10 minutes at a time, slowly increase activity over several weeks, if necessary).

For more information, please contact
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www.cdc.gov/vitalsigns/disabilities/
www.cdc.gov/mmwr