10 ESSENTIAL QUESTIONS FOR DISABILITY INCLUSION IN HEALTH AGENCIES

Public health agencies must comprehensively include people living with disabilities in their work. People living with disabilities make up more than one-fourth of the United States population and therefore are impacted by all public health issues. Neglecting to include people with disabilities in public health planning creates barriers that can lead to the exacerbation of health disparities. Consider these questions when planning programs, policies, and activities:

1. **What is the impact of the public health issue on people living with disabilities?**
   People living with disabilities may feel the impact of public health issues in different ways than other groups. Consider their experiences.

2. **What disability rules and laws relate to the public health issue?**
   Disability laws such as the Americans with Disabilities Act (ADA), the Individuals with Disabilities Education Act (IDEA), and the Fair Housing Act include certain requirements for different programs.

3. **What is the history around the public health issue and people living with disabilities?**
   Consider how historical trauma may influence the way people living with disabilities view public health issues.

4. **What can disability agencies, organizations, and service providers contribute?**
   Create opportunities for disability agencies to engage in planning and programming through contracts, requests for proposal, consultancies, memoranda of understanding, or grants. Disability agencies can provide critical context and open community pathways.

5. **Are people living with disabilities who are employed at the agency willing to share their experiences?**
   People living with disabilities working at the agency may have powerful insights that combine perspectives from within the community and public health.

6. **Were people living with disabilities, their families, and service providers consulted during program planning?**
   Gathering perspectives directly from the disability community is critical. Feedback directs planning to meet the specific needs of different groups.

7. **Was intersectionality* considered?**
   People living with disabilities may identify with a variety of groups. Consider how many identities may influence their view on the public health issue.

8. **Are the program and program materials accessible, both physically and virtually?**
   Some individuals may require accommodations such as interpretation into sign language or Braille, captioning, or wheelchair accessibility to use a program. User testing can help identify barriers to accessibility.

9. **Do relevant disability groups prefer specific language choices on this subject?**
   Different groups of people living with disabilities may prefer different language to describe their disability.

10. **Based on answers to the questions above, what plan revisions would better include people living with disabilities?**
    Go through these questions early in the planning process to allow time to make necessary changes. Commit to inclusivity by being open to making changes.

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*Intersectionality is used here to mean the multiple groups people with disabilities may identify with that may have experienced discrimination. Learn more about health equity and intersectionality [here](#).