

# Adults with developmental disabilities need more support managing chronic diseases

## What is this research about?

Adults with developmental disabilities have higher rates of chronic disease than those without developmental disabilities and yet they are receiving inadequate chronic disease management in many areas. More work is needed to avoid the complications of disease and to improve the quality of life for this vulnerable population.

### What did the researchers do?

The Health Care Access Research and Developmental Disabilities (H-CARDD) program set out to examine how well care is being provided for those adults with developmental disabilities who also have chronic illnesses. The researchers looked at how this population compares to those without developmental disabilities. Four key areas were explored:

- diabetes care
- mental health management
- osteoporisis monitoring
- preventable hospitalizations

H-CARDD's researchers also looked at the influence of factors like age, sex, neighborhood income, place of residence, and region. Finally, they examined whether getting care through a Family Health Team made a difference.

# What you need to know

Adults with developmental disabilities have higher rates of chronic disease than those without developmental disabilities and yet they are receiving inadequate chronic disease management in many areas. More work is needed to avoid the complications of disease and to improve the quality of life for this vulnerable population.

# What did the researchers find?

Adults with both developmental disabilities and diabetes receive eye exams at a higher rate (63%) than those without disabilities (57%)—a positive finding. And when it comes to mental health problems, rates of follow-up with a family physician or psychiatrist — within a month of visiting the emergency room — are similar among adults with and without disabilities. Still, over a third of those with developmental disabilities did not receive any follow-up care in that month.

The disparities in outcomes between persons with and without DD are striking in other areas. While low trauma bone fractures are often a first sign of osteoporosis, only



16% of adults with developmental disabilities received bone mineral density testing within a year of a fracture, compared to 22% for those without developmental disabilities. Another way to study chronic disease management is to measure how often people get hospitalized for conditions that can be managed in the community ("preventable hospitalizations"). Adults with developmental disabilities were over 5 times more likely to have a preventable hospitalization compared to adults without developmental disabilities. These findings suggest that this population isn't receiving adequate primary care to manage their chronic health issues.

# How can you use this research?

Adults with developmental disabilities who have chronic diseases need coordinated plans that are suited to their individual needs, and that bring together both social and medical supports. Health care workers and those in social services need more training in managing chronic diseases. Chronic disease guidelines should emphasize the specific needs of adults with developmental disabilities. Conversely, health care guidelines that are specific to developmental disabilities should have more information about managing chronic diseases.

# **About the researchers**

This Research Snapshot is based on the fifth chapter of H-CARDD's 1 2013 resource *The Atlas on the Primary Care of Adults with*Developmental Disabilities in Ontario (available on www.hcardd.ca). The chapter was led by Dr. Robert Balogh,

Assistant Professor at the University of Ontario Institute of Technology in Health Sciences, and an Adjunct Scientist at the Institute for Clinical Evaluative Sciences (ICES).

H-CARDD's partners in the creation of *The Atlas* include the Ontario Ministry of Community and Social Services, the Ontario Ministry of Health and Long-Term Care, Surrey Place Centre, the University of Ontario Institute of Technology, the University of Ottawa and Queen's University, as well as ICES and the Centre for Addiction and Mental Health.

### robert.balogh@uoit.ca

# **Keywords**

Developmental disability, Ontario, primary care, secondary prevention, health disparities

# **About H-CARDD**

Health Care Access Research and Developmental Disabilities (H-CARDD) is a research program whose primary goal is to enhance the overall health and well-being of people with developmental disabilities through improved health care policy and services. H-CARDD research is conducted by dedicated teams of scientists, policymakers, and health care providers. H-CARDD is funded by the Partnerships for **Health System Improvement** Program of the Canadian Institutes of Health Research and the Health Systems Research Fund of the Ministry of Health and Long-Term Care.

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