



**CONSORTIUM FOR CITIZENS
WITH DISABILITIES**

**EFFECTIVE PROGRAMS OF HUMAN DEVELOPMENT
MAY PREVENT DISABILITY**

A briefing was held by the Director of the Division of Human Development and Disability of the Center for Disease Control and Prevention (CDC). Questions and answers followed the presentation.

Summary

A general principle of the Center for Disease Control and Prevention (CDC) is to improve population based life expectancy and well being. More specifically the priorities of the CDC Division of Human Development and Disability (DHDD) of represent a life course approach to prevention of diminished health that can contribute to disability and secondary disabling conditions. Some of the priorities that may achieve favorable morbidity and mortality outcomes are to 1) ensure identification of physical and mental impairments across health conditions, 2) promote optimal developmental outcomes that prevent unnecessary diminished health that contributes to disability and secondary disabling conditions 3) identify and reduce disparities in key indicators in people with disabilities such as obesity, and mental health, 4) and identify and reduce disparities for health care access. The DHDD takes a public health approach that develops robust data on key measures of disability populations and increases emphasis on translating data to influence programs, policies and partnerships. A coordinated approach was suggested for serving people with disability

Disability Prevention Issues

Two issues were raised in the area of prevention of disability during the question and answer session. One was measurement of the impact of programs on outcomes that facilitate health and development or diminish health and contribute to disability. The other issue was collaboration with agencies and Federal Departments with public health functions outside of CDC and the Department of Health and Human Services. For instance, an example was provided of the Social Service Block Grant (SSBG) of the early 1980s. This block grant consolidated 29 programs of which 21 had public health functions. Appropriations for the SSBG in 1985 were \$2.8 billion and \$1.7 billion for FY2012. Thus, implementation of the public health system is fragmented in to other agencies and departments where missions are other than public health. Public health programs within this context receive low political priority and are targets in fiscal austerity environments. Such conditions are a recipe for diminished population based health that can contribute to disability and secondary disabling conditions.

Activity

There is on going activity with the Center for Disease Control and Prevention to prevent disability and secondary disabling conditions.

Principle

There should be effective collaboration among agencies and departments with public health functions that result in improved measures associated with disability preventio