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# Adolescents with Disabilities

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Today more than 90% of all children born with a chronic or disabling condition will live to be an adult.



## Prevalence

18% of youth have a chronic condition; 5% have a condition that has a functional limitation.

# Disability Patterns

- Prevalence rates have increased more than 250% since 1975;
- Prevalence rates increased with age;
- Ethnic minorities have highest prevalence;
- Those who are poor and/or from single-parent households have higher prevalence.

# Prevalence for Leading Chronic Conditions of Adolescence

Conditions	Per 1,000
Asthma	42.5
Congenital Heart Disease	15.2
Epilepsy	2.4
Cerebral Palsy	1.8
Autism	1.8
Diabetes	1.0
Cancer	0.4
Spina Bifida	0.2
Sickle Cell	0.2

## International Data

- 180 million young people (10-24) worldwide
- 80% live in developing countries
- 1/3 of street children have a disability (UNICEF 1999)
- UNICEF in 1999 reported only 12% of all disability experts/ organizations targeted young people as a distinct group
- Odds greater for males than females
- Incidence and Prevalence is correlated to GDP

# Terms

Impairment: a statement of the physical condition

Disability: the *functional* limitations that are the consequence of an impairment; unable to performance-appropriate tasks

Handicap: the *social* limitations that result from a disability

Chronic: present for more than 3 months

Special Health Care Needs: those who have or are at increased risk for a chronic physical, developmental, behavioral, or emotional condition and who also require supplemental health care and related services.

# Pubertal Maturation


For most adolescents with disabilities the process and pattern of pubertal maturation varies little from peers. It is the *tempo* of maturation that frequently varies.

# Pubertal Dyssynchrony is Associated with Emotional Distress


- For girls early maturation is associated with increased risk taking behaviors;
- For boys pubertal delay is associated with feelings of inadequacy and low self esteem.

# Youth With Chronic Conditions Have More Adolescent Health Concerns Than Peers


- Height & weight
- Acne
- Headaches
- Health worries



There is a public perception that alterations in the timing of puberty result in altered sexual drive or behavior.



For many — especially those with motor impairments — it is not the sex act but the inability to locate a partner that is the major problem.



For most young people with chronic conditions research suggests that they are at least as likely as peers to engage in sexual intercourse.



## Research Questions

- What is the relative risk exposure of youth with disabilities?
- What factors exacerbate risk and which are associated with risk reduction for youth with disabilities?

# Risk Behaviors Among Youth With and Without Disabilities

	<b>Non-Disabled Youth</b>	<b>Emotional Disabilities</b>	<b>Learning Disabilities</b>	<b>P Value</b>
<b>Suicide Attempts</b>	1.9%	11.6%	5.7%	<.001
<b>Regular Cigarette Smoker</b>	20.2%	32.8%	26.6%	<.001
<b>Alcohol Use</b>	16.1%	24.2%*	14.5%	*<.001
<b>Marijuana Use</b>	24.6%	38.5%*	26.2%	*<.001
<b>First Sexual Intercourse &lt; 12 years old</b>	2.8%	4.9%	5.2%	<.001

# Risk and Protective Factors in the Lives of Youth With and Without Disabilities

<b>Risk Factors</b>	<b>Protective Factors</b>
<ul style="list-style-type: none"><li>•Suicide of family member</li><li>•Works more than 20 hours per week for pay</li><li>•Has had sexual intercourse</li><li>•Appears old for age</li><li>•Same sex attraction</li><li>•Believes they will die young</li><li>•Victim of violence</li><li>•Somatic complaints</li></ul>	<ul style="list-style-type: none"><li>•Family connectedness</li><li>•Parent (s) home at key times during the day</li><li>•Parents expectations for school</li><li>•School connectedness</li></ul>

# Means/Prevalence of Risk and Protective Factors Among Youth with Disabilities Compared to Controls – Family

<b>Factors</b>	<b>Controls</b>	<b>Emotionally Disturbed</b>	<b>Mobility Impaired</b>	<b>Learning Disabled</b>
Family Connectedness	7.46	6.80	7.18	7.35

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Parental Presence	7.21	6.95	7.15	7.31

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Parental Presence	7.21	6.95	7.15	7.31
Activities with Parents	1.87	1.68	1.61	1.60

# Means/Prevalence of Risk and Protective Factors Among Youth with Disabilities Compared to Controls – Family

<b>Factors</b>	<b>Controls</b>	<b>Emotionally Disturbed</b>	<b>Mobility Impaired</b>	<b>Learning Disabled</b>
Lives with Both Parents	52.9%	41.8%	40.6%	39.0%

# Means/Prevalence of Risk and Protective Factors Among Youth with Disabilities Compared to Controls – Family

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Lives with Both Parents	52.9%	41.8%	40.6%	39.0%
Welfare Status	9.5%	15.7%	20.0%	17.1%

# Means/Prevalence of Risk and Protective Factors Among Youth with Disabilities Compared to Controls – Family

<b>Factors</b>	<b>Controls</b>	<b>Emotionally Disturbed</b>	<b>Mobility Impaired</b>	<b>Learning Disabled</b>
Lives with Both Parents	52.9%	41.8%	40.6%	39.0%
Welfare Status	9.5%	15.7%	20.0%	17.1%
Family Suicide/ Attempt	3.5%	8.6%	8.0%	5.7%

# Means/Prevalence of Risk and Protective Factors Among Youth with Disabilities Compared to Controls — Individual

<b>Factors</b>	<b>Controls</b>	<b>Emotionally Disturbed</b>	<b>Mobility Impaired</b>	<b>Learning Disabled</b>
Age	16.2	16.4	16.5	16.1
Religiosity	6.42	6.03	5.46	5.24
Self-esteem	5.45	5.28	5.04	5.35
Work after School	1.24	1.41	1.32	1.02
Somatic Complaints	2.84	3.86	3.79	3.05
Victim of Violence	0.50	0.96	1.30	0.86

# Means/Prevalence of Risk and Protective Factors Among Youth with Disabilities Compared to Controls — Individual

<b>Factors</b>	<b>Controls</b>	<b>Emotionally Disturbed</b>	<b>Mobility Impaired</b>	<b>Learning Disabled</b>
Fear of Untimely Death	1.45	2.29	2.02	1.84
Emotional Distress	1.24	3.88	2.42	2.09
Non-heterosexual	5.3%	8.9%	11.3%	11.5%
Appears Old for Age	12.1%	14.1%	13.8%	11.5%
Sexually Experienced	36.9%	51.8%	45.7%	38.5%

# Means/Prevalence of Risk and Protective Factors Among Youth with Disabilities Compared to Controls – School

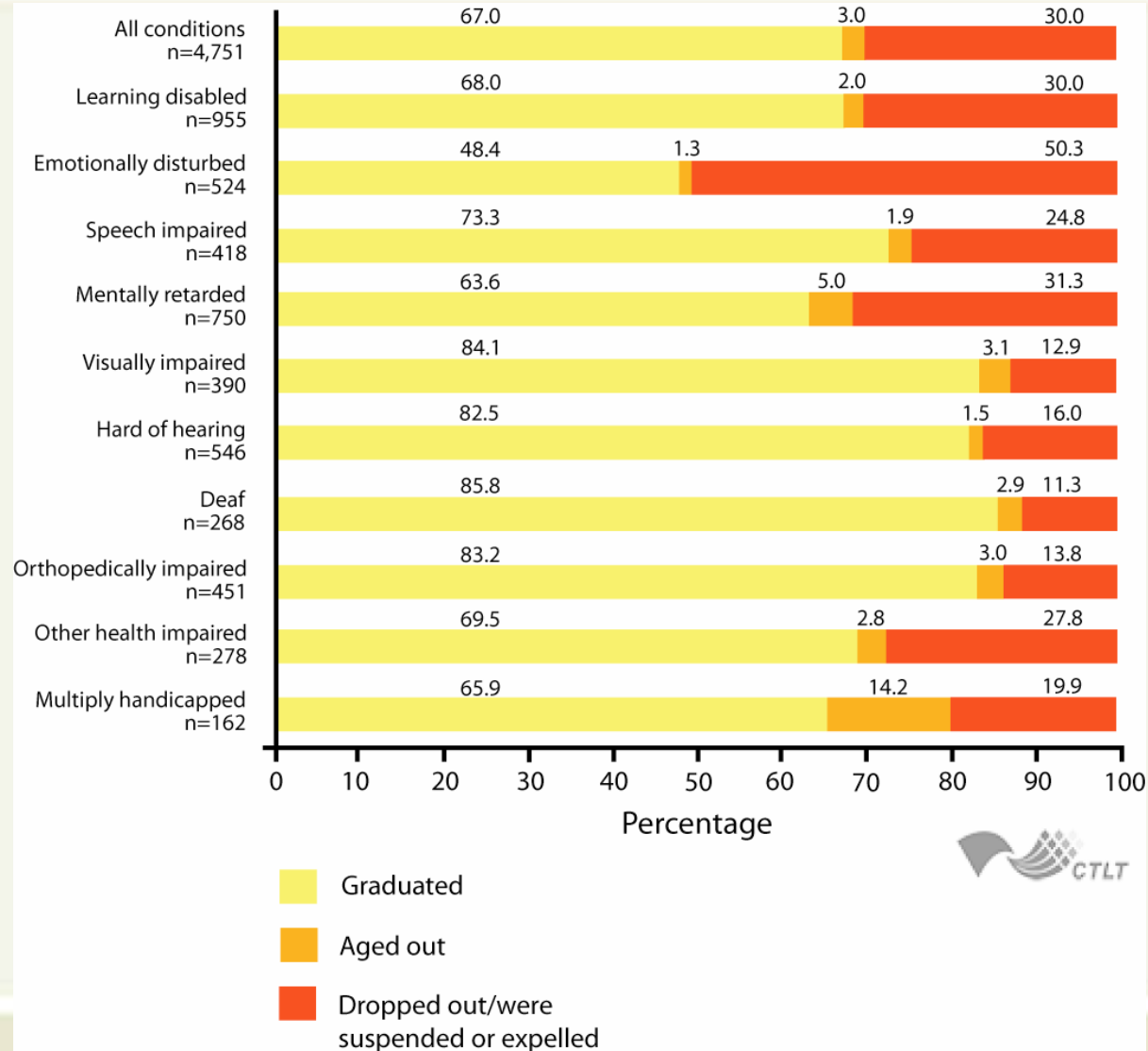
<b>Factors</b>	<b>Controls</b>	<b>Emotionally Disturbed</b>	<b>Mobility Impaired</b>	<b>Learning Disabled</b>
School Connectedness	6356	5.49	6.00	6.29
GPA (A=4.0)	2.83	2.55	2.65	2.40
Repeated a Grade	18.2	31.0	34.0	49.6

# Conclusions

Youth with disabilities are more likely to experience health risks than peers.

- They are more likely to experience the preconditions that predispose to risk.
- They are less likely to have access to those factors that protect young people from harm.

# School Completion Status of Students with Disabilities Who Attend Regular High Schools



# The Educational Impact

<b>Severity of Impairment</b>	<b>Graduation Rate (%)</b>
None	82.6
Mild	79.5
Moderate	76.1
Severe	61.4

# Postsecondary School Enrollment of Youth with Disabilities out of School 3 to 5 Years

Primary Disability Category	Percentage of Youth Who, Since High School, Had Enrolled In:			
	Any Postsecondary School	Postsecondary Vocational School	2-Year College	4-Year College
All conditions	26.7	15.9	11.3	4.2
Learning disability	30.5	19.0	13.7	4.4
Emotional disturbance	25.6	15.4	10.1	4.2
Speech impairment	48.8	16.4	25.4	13.3
Mental retardation	12.8	9.6	3.6	.0
Visual impairment	57.0	15.6	27.5	33.4
Hard of hearing	60.4	16.0	40.4	15.7
Deafness	60.0	22.5	33.2	22.1
Orthopedic impairment	46.3	12.6	32.3	12.9
Other health impairment	56.0	33.9	28.4	21.9
Multiple disabilities	8.6	.7	7.9	2.2

# The Employment Impact of Having a Disability

England: males with disabilities were less likely to be employed and had less education than peers. The same was not true for females.

Finland: Young adults with disabilities were twice as likely *not* to receive vocational training. At age 36, 14% of men without disabilities were unemployed compared to 59% of men with (a 400% difference). No difference for women.

United States: 54% of adults with renal disease are employed compared with 75% without.

# The Social Impact of Having a Disability

Young adults with disabilities are more than twice as likely to still be living with parents (68% vs. 29%);

More likely to be single (76% vs. 65%)



# Risks

- Social isolation
- Discrimination
- Built environment
- Lack of support
- Unemployment
- Victims of violence
- Low access to appropriate programs
- Increase risk of pregnancy and other co-morbidities
- Lack of healthcare facilities