DEPARTMENT OF HEALTH

Learning from People Living with Disabilities and Chronic Conditions

CONVERSATIONS WITH MINNESOTANS LIVING WITH DISABILITIES ABOUT CHRONIC DISEASE PREVENTION AND MANAGEMENT (2025)

Executive summary

Key findings

- People define health and wellness broadly, including pain levels and the ability to do activities they enjoy.
- Socializing and having fun are strong motivators for focusing on health and wellness.
- Barriers to health and wellness are more often tied to systemic issues like transportation and health care access, rather than to individual circumstances.
- To be healthy, people expressed a need for more opportunities to be active, help learning to cook healthy and enjoyable meals, guidance on managing dietary needs, and support from others.

Recommendations

- **Design programs that center social connection and enjoyable activities.** Pair evidence-based practices with direct input from people with disabilities to ensure programs reflect their goals and needs.
- **Support providers and organizations to offer disability-informed care.** Create tools, training, and resources to increase awareness and build capacity. Collaborate with health care organizations to improve administrative processes to improve quality of care.
- **Address systemic barriers**—Transportation, service costs, and insurance and health system complexities impact access to care. Leverage resources across sectors to overcome these factors.

Purpose

Nearly 1 in 4 Minnesotan adults has a disability. These individuals are more likely to experience chronic conditions like diabetes, arthritis, and heart disease—and are over six times more likely to report poor health. Yet, their voices are often left out of public health planning. To address this, the Minnesota Department of Health (MDH) partnered with SMILES Center for Independent Living (SMILES), Special Olympic Minnesota (SOMN), and Improve Group to talk directly with people with disabilities about their experiences managing health and chronic conditions.

Laying the Foundation: Partnering to Center Disability Voices in Public Health

MDH partnered with SMILESCIL and SOMN to engage 19 people with disabilities in conversations about their health and wellbeing.

SMILES Center for Independent Living

SMILES provides a wide range of services that support independent living and personal empowerment. Serving people of all ages and types of disabilities across the South-Central region of Minnesota, SMILES

is committed to ensuring individuals with disabilities have access to the same opportunities, choices, and quality of life as everyone else.

Special Olympics Minnesota

Special Olympics Minnesota is dedicated to creating a more inclusive and accepting world for people with intellectual disabilities. Through year-round sports training, competitions, inclusive health care, leadership development, and school-based programs, the Special Olympics empowers individuals to grow in confidence, fitness, and social connection.

What we heard from people with disabilities and chronic conditions

How people define health and wellness

People shared broad and personal definitions of health and wellness. Common themes included feeling well physically and mentally, being able to engage in activities they enjoy, and experiencing minimal pain. Many defined health not by numbers, but by their ability to stay active, care for themselves, and maintain social connections in inclusive environments.

How people support their wellness

Most people support their health through enjoyable movement—walking, sports, gym visits, outdoor activities, or daily tasks. Others mentioned food and nutrition, especially when linked to social or group settings like cooking classes. Creative hobbies, video games, and time with friends or family were also mentioned. People rely on both medical services and at-home health monitoring (like checking blood pressure or blood sugar), as well as support for daily living such as meal delivery and cleaning services.

Motivators for health and wellness

Fun and connection were reported as strong motivators. People said they were more likely to engage in wellness activities when they involved socializing or doing things they enjoy. Confidence, support from caregivers or family, and tools for independence also help encourage healthy behaviors.

Barriers to health and wellness

Most barriers shared by participants stem from systemic issues, not personal ones. Transportation challenges were the most common—limited access, high costs, and lack of rural options. Other barriers included confusing insurance systems, poor provider knowledge of disabilities, and inaccessible or overwhelming public spaces. Some individuals also noted personal limitations such as pain, energy, lack of time, or limited food and cooking knowledge.

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