



DEVELOPMENT COLLEGE OF APPLIED HEALTH SCIENCES



Obesity Among Illinois Adults with Disability

Illinois Disability and Health Program **Data Brief**

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People with disabilities in Illinois have a higher rate of obesity than people without disabilities, and the rate varies across different areas of the state. The table below shows the prevalence of obesity among people with and without disabilities and the gap, or difference, in those rates. It also shows the percent increase of obesity in people with disabilities. A 100 percent increase would indicate that the rate of obesity among people with disabilities is twice as high as that of people without disabilities. The counties served by each Center for Independent Living are listed in the table on the following page.

Prevalence of Obesity: Adults (all ages) with Disability by Centers for Independent Living Service Area: 2010 - 2014

	Obesity Prevalence				
Center for Independent Living	With Disability	Without Disability	Gap *	Increase**	Survey Year
Access Living & Progress Center	49.8%	22.7%	27.1%	119.5%	2014
Advocates For Access	41.6%	20.1%	21.5%	107.3%	2013
AIM	42.6%	22.6%	20.1%	89.0%	2014
IL-IA (IL. only)	43.5%	27.5%	16.1%	58.5%	2013
IL Valley	54.7%	31.5%	23.2%	73.5%	2013
IMPACT	47.2%	25.7%	21.5%	83.6%	2011-2012
Jacksonville Area		24.3%	%	%	2012
Lake	45.6%	20.6%	25.0%	121.2%	2014
LIFE	46.8%	29.7%	17.1%	57.5%	2012-2013
LINC	44.9%	33.6%	11.4%	33.8%	2011
Northwestern	49.1%	29.0%	20.0%	69.0%	2014
Opportunities for Access	44.8%	27.5%	17.3%	62.9%	2011
Options	45.9%	27.1%	18.8%	69.5%	2012 & 2014
PACE	30.1%	25.4%	4.7%	18.3%	2011-2012
RAMP	47.7%	33.0%	14.7%	44.4%	2014
Southern IL	44.1%	26.5%	17.6%	66.5%	2010
SAIL	38.8%	35.2%	3.6%	10.4%	2011-2012
Springfield	31.7%	29.9%	1.8%	6.1%	2011-2012
Stone-Hayes	43.1%	20.1%	23.0%	114.2%	2013
West Central	38.7%	27.4%	11.4%	41.4%	2012-2013
Will-Grundy	38.1%	25.7%	12.3%	48.0%	2014
Southeastern 3 Counties without a CIL	39.9%	26.8%	13.1%	49.0%	2010
Southern 6 Counties without a CIL	51.7%	28.9%	22.8%	78.6%	2010

^{*} A percentage rate gap between adults with disability and adults without disability

Data Source: 2010-2014 Round 5 Illinois County Behavioral Risk Factor Surveys (ICBRFS), a randomdigit telephone survey of community households conducted by the Illinois Department of Public Health.

^{**} Percentage increase calculated as follows: obesity rate gap divided by obesity prevalence for adults without disability

The survey gathers information on health status and health risk factors among Illinois county residents who are 18 years of age and older.

The combined estimate for the Access Living CIL and the Progress Center CIL is extracted from the 2014 Illinois Behavioral Risk Factor Surveillance System. The estimate for persons with disability for the Jacksonville CIL was suppressed because it was statistically unstable. The estimate for the Opportunities for Access CIL is based on the following six counties: Clinton, Effingham, Fayette, Marion, and Washington surveyed in 2011 because the remaining eight counties in the service area were surveyed in 2010 using a different statistical weight.

<u>Disability Screening</u>: Survey participants who responded positive to either or both of the following two questions in the ICBRFS were identified as having a disability: 1) limited in any way in activities because of physical, mental, or emotional problems; 2) have a health problem that requires the use of special equipment, such as a cane, a wheelchair, a special bed, or a special telephone.

<u>Obesity Prevalence</u> (BMI equal to or greater than 30.0) was estimated using a statistical weight for each of the CIL service areas. The statistical weight was primarily based on the probability of each survey respondent being selected in the survey on the basis of sex, age, race, and ethnic origin.

Illinois Centers for Independent Living (CILs) by Service Area (County)

CILs	Service Area (County)		
Access Living & Progress Center	Cook		
Advocates for Access	Fulton, Peoria, Tazewell, and Woodford		
AIM	DuPage, Kane, and Kendall		
Illinois-Iowa (IL only)	Henry, Mercer, and Rock Island		
Illinois Valley	Bureau, LaSalle, Marshall, Putnam, and Stark		
IMPACT	Bond, Calhoun, Greene, Jersey, Macoupin, and Madison		
Jacksonville Area	Cass, Mason, Morgan, and Scott		
Lake	Lake and McHenry		
LIFE	Dewitt, Ford, Livingston, and McLean		
LINC	Monroe, Randolph, and St Clair		
Northwestern	Carroll. Jo Daviess, Lee, Ogle, and Whiteside		
Opportunities for Access	Clay, Clinton, Edwards, Effingham, Fayette, Hamilton, Jasper, Jefferson, Marion, Wabash, Washington, Wayne, and White		
Options	Iroquois and Kankakee		
PACE	Champaign, Douglas, Edgar, Piatt, and Vermillion		
RAMP	Boone, De Kalb, Stephenson, and Winnebago		
Southern Illinois	Franklin, Gallatin, Hardin, Jackson, Perry, Saline, and Williamson		
SAIL	Clark, Coles, Cumberland, Macon, Moultrie, and Shelby		
Springfield	Christian, Logan, Menard, Montgomery, and Sangamon		
Stone-Hayes	Henderson, Knox, and Warren		
West Central	Adams, Brown, Hancock, McDonough, Pike, and Schuyler		
Will-Grundy	Grundy and Will		
Southeastern 3 Counties without a CIL	Crawford, Lawrence, and Richland		
Southern 6 Counties without a CIL	Alexander, Johnson, Massac, Pope, Pulaski, and Union		

This Data Brief is prepared by the Illinois Disability and Health Program, a statewide project initiated jointly by the Illinois Department of Public Health and the University of Illinois at Chicago. The goal of the program is to reduce and prevent chronic health conditions among Illinois citizens with a disability and promote their health, well-being, and quality of life. The Illinois Disability and Health Program represents an effort to include those with a disability in ongoing health promotion and disease prevention activities and to raise public and professional awareness of disability issues to increase access to health care for persons with disability. Funding for this project is provided by the U.S. Centers for Disease Control and Prevention through a cooperative agreement (Grant #: 2NU59DD000938-04). To learn more about the project and how to become involved, contact the program at 217-782-3300, TTY 800-547-0466.