Disability Pride Month &
National Independence Disability Day

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Interview Question: Can you give us a brief history on National Independence Disability Day, Disability Pride Month, and its importance to you and our dietetics community?

Disability Pride Month is celebrated annually in the U.S. in July. Disability Pride began as a day of celebration in 1990, the year that President George H.W. Bush signed the Americans with Disabilities Act (ADA) into law. Boston held the first Disability Pride Day that same year (1990). Twenty-five years later, in July 2015, Disability Pride Month was celebrated officially for the first time. Since 2015, cities across the U.S. have celebrated Disability Pride Month with parades and other festivities.

National Disability Independence Day is celebrated annually in the U.S. on July 26 to commemorate the signing of the ADA into law in 1990. The ADA was first introduced in 1988 and designed to build on the progress of the Rehabilitation Act. The goal was to expand the rights of the disability community in a single law by ensuring their freedom from employment discrimination and ensure access to all levels of government, public establishments, transportation, and communication. The U.S. Congress passed the bill in 1990 with strong majorities in both legislative bodies. The landmark legislation serves as a de facto bill of rights for Americans with disabilities by assuring their access to economic and civic opportunities. Its passage represented an unprecedented bipartisan effort to acknowledge the centuries of discrimination suffered by the disability community, and a fundamental change to how they live their lives.

July 26, 2023 marks the 33rd anniversary of the ADA. This historic civil rights law protects the rights of people with disabilities.

Disability Pride Month and National Disability Independence Day are very important to me and our dietetics community for several reasons. I have an acquired disability which has blessed me with a better lens concerning inclusion, diversity, equity, and access. The Disabilities in Nutrition and Dietetics Member Interest Group (aka “Disabilities MIG”) officially launched on June 1, 2023. We already have more than 190 members! The Disabilities MIG is for you if you are an Academy member with a disability. The Disabilities MIG is also for you if you work with clients or patients with disabilities, teach students/interns with and without disabilities, and/or are interested in the topic of nutrition and dietetics as they relate to disabilities.

The Disabilities MIG’s purpose, vision and goals follow.

**Purpose**—A community to connect Academy members who have disabilities, work with clients/patients with disabilities, educate members with disabilities, and/or are interested in disabilities as related to nutrition and dietetics.

**Vision**—A world where individuals with disabilities have accessible nutrition guidance,
nutrient-rich food to optimize health, and equal access and opportunities to become active and fully contributing dietician practitioners.

**Mission**—Empower members to be leaders in promoting accessible nutrition guidance and nutrient-rich food for individuals with disabilities and to empower individuals with disabilities to achieve full access and inclusion into dietetic education programs, thrive as contributing dietician practitioners, and serve as professional leaders.

Visit the Disabilities MIG online at About Us - Disabilities MIG to learn about our eight goals. Consider joining the Disabilities MIG! You’ll be glad you did!

**Interview Question: How have you celebrated this event in the years past and/or this month? Any personal favorite ways/places to celebrate?**

Neva Cochran and I began working on disability advocacy in the dietetics profession in 2017 when I was selected for the Academy Diversity Leaders Program (2016-2017 cohort). Neva and I successfully advocated to have disability status questions added to the biennial Compensation and Benefits Survey of the Dietetics Profession so the Academy would begin to collect data information on its members with disabilities. The endowed LaVerne and Edwin Domel Memorial Diversity Scholarship was created via the Academy Foundation to award a scholarship annually to students/interns with disabilities and members of the Disabilities MIG. Questions about disability status were added to the Academy Foundation scholarship application. We successfully advocated for captioning to be included during all educational sessions at FNCE® and during all webinars and virtual meetings of the Academy and its groups (such as DPGs and MIGs). To ensure consideration of disabilities, I applied and was selected for the Academy’s 2022 Farm Bill Task Force, Strategic Advancement Task Force on Diversity and Equity, and Evidence Analysis Library Adult Weight Management Work Group; also, I joined two Academy Affinity groups (Dietary Guidelines; Diversity and Health Equity). Neva, other practitioners with disabilities, and I educated members without disabilities about the role of dietetic practitioners with disabilities via three posters at FNCE® 2017 and 2023, five webinars, two virtual workshop sessions and two sessions at FNCE® 2019 and 2022. There will be two more sessions about disabilities at FNCE® 2023. We published articles and/or letters to the editor about disabilities in *Journal of the Academy of Nutrition and Dietetics, Today’s Dietitian* and for two DPG newsletters. We had information about Disability Pride Month added to the Academy websites in July 2023.

I celebrated Disability Pride Month this year with the American Bar Association’s “21-Day Disability Equity Habit-Building Challenge” available online at American Bar Association 21-Day Disability Equity Habit Building Challenge. This Challenge is modeled after the “21-Day Racial Equity Habit-Building Challenge©,” which was conceived several years ago by diversity expert Dr. Eddie Moore, Jr to enhance deeper understandings of how race, power, privilege, supremacy, and oppression intersect. For the Challenge, participants are invited to complete a syllabus of 21 daily, short assignments (typically taking 20 minutes), over 21 consecutive days. The assignments include readings, videos, and podcasts, followed by discussion questions. I confess that I was too eager to view the material over 21 consecutive days! I learned so much new information about disabilities!

I continued to celebrate Disability Pride Month this year by having hour-long phone calls with each of the leaders appointed to serve on the Disabilities MIG Executive Committee for this fiscal year. Each phone revealed new ideas and projects for the Disabilities MIG to advocate for inclusion of people with disabilities and accessibility for people with disabilities in our profession.
as well as topics to help educate Academy members about the diversity of disabilities along with the culture of disability.

**Interview Question: Fun fact about your work as a RDN and do you work with individuals in this community?**

My dietetics career has brought me full circle. My first job was at a residential school for children with disabilities. I resigned my Research Professor position 35 years later due to an acquired disability. Now I volunteer for inclusion, diversity, equity, and access. As a believer, I am confident that the Lord placed me on my scooter (or power wheelchair) for a reason.

Here are a few facts about disabilities for your consideration:

- Among U.S. adults, 27% have disabilities.
- Types of disabilities in U.S. adults vary with 12% mobility, 13% cognition, 7% independent living, 6% hearing, 5% vision, and 4% self-care.
- U.S. adults with disabilities are more likely to have three nutrition-related chronic conditions — obesity (42%), heart disease (10%) and diabetes (16%) — than adults without disabilities (30%, 3%, 8%, respectively).
- U.S. adults with disabilities face barriers to healthcare access — 25% lack a usual healthcare provider, 25% have an unmet healthcare need due to cost in the past year, and 20% lacked a routine check-up in the past year.
- U.S. adults with disabilities vary by race/ethnicity with 30% American Indian/Alaska Native, 25% Black, 20% White, 17% Native Hawaiian/Pacific Islander, 17% Hispanic and 10% Asian.
- U.S. adults with disabilities and obesity vary by race/ethnicity with 41% American Indian/Alaska Native, 47% Black, 36% White, 32% Native Hawaiian/Pacific Islander, 40% Hispanic and 20% Asian.
- Less than 4% of dietetic practitioners have disabilities.
- All U.S. counties experience food insecurity but the highest rates are for rural, southern, Black, Latinx, Native/Indigenous and people with disabilities.
- Disability culture was first recognized in the mid-1990s; however, disabilities are usually excluded from cultural competency training for dietetic practitioners to help them practice cultural humility.
- Older U.S. adults are significantly more likely than younger U.S. adults to have disabilities with 46% for ages 75+, 24% for ages 65–74, 12% for ages 35–64, and 8% for ages <35.
- Americans with disabilities tend to earn less — $28,438 median income— than those without disabilities — $40,948 median income.
- U.S. adults with disabilities have lower rates of technology adoption for some devices than U.S. adults without disabilities. U.S. adults with disabilities are less likely than those without disabilities to say they own a desktop or laptop computer (62% vs. 81%), smartphone (72% vs. 88%), or tablet computer (47% vs. 54%). The percentages of Americans who say they have high-speed home internet are similar for those with and without disabilities (72% vs. 78%). However, Americans with disabilities are less likely than those without disabilities to report using the internet daily (75% vs. 87%). Also, Americans with disabilities are three times as likely as those without disabilities to say they never go online (15% vs. 5%).
- During the 2021-22 school year, 15% of total enrollment in U.S. public schools received special education or related services.
- About two-thirds (66%) of adults with disabilities reported a high level of distress at least
once across four surveys conducted during the COVID-19 pandemic between March 2020 and September 2022 compared with 34% of adults without disabilities.

Author:

Suzanne (“Suzi”) Domel Baxter completed a BS and Coordinated Program (Texas Christian University), MS and PhD (Texas Woman’s University), and Post-Doctoral Fellowship (Medical College of Georgia). She was Principal Investigator on numerous NIH competitive research grants primarily about children’s dietary recall accuracy. She has authored 96 peer-reviewed articles and 5 chapters. She resigned her Research Professor position in late 2016 due to an acquired disability. Her past/present service includes the Academy—Diversity Leaders Program 2017–2019, Affinity Groups (Health Equity and Diversity; Dietary Guidelines), Diversity and Inclusion Advisory Group, 2022 Farm Bill Task Force, 2022 Strategic Advancement Group for the Diversity and Inclusion focus area, HOD meetings auditor, EAL Adult Weight Management Workgroup, Journal of the Academy of Nutrition and Dietetics Board of Editors; Academy Foundation—Second Century Philanthropy Council, Scholarship Committee; Disabilities in Nutrition and Dietetics MIG—Co-founder and Current Chair; Cultures of Gender and Age MIG—Treasurer, Membership Chair; NOBIDAN—Mentor; Research DPG—Treasurer, Diversity Liaison, Mentor; South Carolina Affiliate—President, Foundation Liaison, IDEA Liaison; Diversify Dietetics—Mentor, DAS Program Volunteer, Scholarship and Grants Committee. Her honors include the 2012 South Carolina Outstanding Dietitian of the Year, 2016 Research DPG First Author Publication Award, and 2017 Monsen Award for Outstanding Research Literature.