

University of Montana

## ScholarWorks at University of Montana

---

Health and Wellness

Rural Institute for Inclusive Communities

---

10-2020

### Healthy Community Living: An Update on Outcomes

Craig Ravesloot Ph.D.

*University of Montana Rural Institute - Research and Training Center on Disability in Rural Communities*

Tracy Boehm Barrett

*University of Montana Rural Institute - Research and Training Center on Disability in Rural Communities*

Tannis Mardece Hargrove

*University of Montana Rural Institute - Research and Training Center on Disability in Rural Communities,*  
hargrovet@gmail.com

Justice Ender

*University of Montana Rural Institute - Research and Training Center on Disability in Rural Communities*

Mary Willard

*Association of Programs on Rural Independent Living*

*See next page for additional authors*

Follow this and additional works at: [https://scholarworks.umt.edu/ruralinst\\_health\\_wellness](https://scholarworks.umt.edu/ruralinst_health_wellness)



Part of the [Community Health and Preventive Medicine Commons](#)

## Let us know how access to this document benefits you.

---

### Recommended Citation

Ravesloot, C., Boehm Barrett, T., Hargrove, T., Ender, J., & Willard, M. (October 2020). Healthy Community Living: An Update on Outcomes. Missoula, MT: The University of Montana, Rural Institute for Inclusive Communities.

This Research Brief is brought to you for free and open access by the Rural Institute for Inclusive Communities at ScholarWorks at University of Montana. It has been accepted for inclusion in Health and Wellness by an authorized administrator of ScholarWorks at University of Montana. For more information, please contact [scholarworks@mso.umt.edu](mailto:scholarworks@mso.umt.edu).

---

**Authors**

Craig Ravesloot Ph.D., Tracy Boehm Barrett, Tannis Mardece Hargrove, Justice Ender, Mary Willard, and University of Montana Rural Institute



# Healthy Community Living

## An Update on Outcomes

The Healthy Community Living (HCL) program combines independent living skills training with health promotion to support self-determination and health status of adults with disabilities. It includes two workshop curricula, Community Living Skills and Living Well in the Community. Each of these provides a framework for workshop participants to increase peer support while building their individual capacity to live independently and maintain their health. The HCL Program weaves consumer choice and control throughout all of the workshop sessions by guiding consumers to identify their own goals, intentions, and process for reaching them. These workshops can be conducted in face-to-face groups or using video conferencing software.

### **Why combine IL Skills Training and Health Promotion?**

Nearly 40% of people with disabilities report fair or poor health compared to 9% of people without disabilities.<sup>1</sup> Despite a need for health promotion services, people with disabilities often have the least access to them.<sup>2-4</sup> When people with disabilities have access to health promotion services that provide opportunities for increased health, education and behavior change skill development, their health status and quality of life improves.<sup>5,6</sup>

Reports from CIL staff who facilitated the Living Well health promotion program with consumers indicated that some consumers could benefit from learning independent living skills to increase their success with improving and maintaining their health. We developed the Community Living Skills curriculum to meet this need.

We wrote the CLS curriculum to give consumers the opportunity to increase self-determination. Self-Determination Theory (SDT) suggests that people are more likely to change habits when they feel free to make choices (autonomy), feel capable of successfully following their plans (competence) and feel supported by the people around them (relatedness).<sup>7</sup> When all three of these conditions are met, people are much more likely to feel like they have the control to make their own choices (self-determined). This Self-Determination framework is consistent with Independent Living philosophy that emphasizes consumer choice and control.<sup>8</sup> SDT is a useful framework for understanding and improving consumer choice and control.

This report includes preliminary findings of the effects that the Community Living Skills curriculum has on supporting development of Self-Determination among CIL consumers.

## Preliminary Outcomes

To evaluate the CLS program, we collected surveys from Community Living Skills workshop participants before they started the workshop and again at the completion of the workshop. Responses indicate that, on average, people who participated in the CLS workshop reported an increase in self-determination. Further, nearly 25% of the participants reported a 10% increase in self-determination. Looking at each of the three areas that make up self-determination (i.e., autonomy, competence and relatedness) the change observed in Self-Determination was due to changes in autonomy and relatedness. Below are some of the questions used to measure these two areas that changed the most following the CLS intervention were:

- **I generally feel free to express my ideas and opinions.** (autonomy)
- **People I interact with on a daily basis tend to take my feelings into consideration.** (autonomy)
- **The people I interact with regularly seem to like me.** (relatedness)
- **People are generally pretty friendly towards me.** (relatedness)

## Implications and Next Steps

These preliminary results are promising and suggest that our Community Living Skills curricula has positive effects on self-determination. Completion of our evaluation will examine the extent to which engaging in the Community Living Skills workshop improves the effectiveness of the Living Well health promotion workshop. Overall, we will examine how the Healthy Community Living program leads to improved self-determination and health outcomes.

## References

- <sup>1</sup> Centers for Disease Control and Prevention. Disability and Health Data System (DHDS) [Internet]. [updated 2018 May 24; cited 2018 August 27]. Available from: <http://dhds.cdc.gov>
- <sup>2</sup> Iezzoni, L. I., Davis, R. B., Soukup, J., & O'Day, B. (2002). Satisfaction with quality and access to health care among people with disabling conditions. *International Journal for Quality in Health Care: Journal of the International Society for Quality in Health Care*, 14(5), 369–381. <https://doi.org/10.1093/intqhc/14.5.369>
- <sup>3</sup> Krahn, G. L., Putnam, M., Drum, C. E., & Powers, L. (2006). Disabilities and Health: Toward a National Agenda for Research. *Journal of Disability Policy Studies*, 17(1), 18–27. <https://doi.org/10.1177/10442073060170010201>
- <sup>4</sup> Rimmer, J. H., & Braddock, D. (2002). Health Promotion for People with Physical, Cognitive, and Sensory Disabilities: An Emerging National Priority. *American Journal of Health Promotion*, 16(4), 220–224. <https://doi.org/10.4278/0890-1171-16.4.220>
- <sup>5</sup> Ravesloot, C., Seekins, T., & White, G. (2005). Living Well With a Disability Health Promotion Intervention: Improved Health Status for Consumers and Lower Costs for Health Care Policymakers. *Rehabilitation Psychology*, 50(3), 239–245. <https://doi.org/10.1037/0090-5550.50.3.239>
- <sup>6</sup> Ravesloot, C. H., Seekins, T., Cahill, T., Lindgren, S., Nary, D. E., & White, G. (2007). Health promotion for people with disabilities: Development and evaluation of the Living Well with a Disability program. *Health Education Research*, 22(4), 522–531. <https://doi.org/10.1093/her/cyl114>
- <sup>7</sup> Ryan, R. M., & Deci, E. L. (2000). Self-Determination Theory and the Facilitation of Intrinsic Motivation, Social Development, and Well-Being. *American Psychologist*, 11.
- <sup>8</sup> National Council on Independent Living. (2019). About Independent Living. <https://www.ncil.org/about/aboutil/>



© 2020 RTC: Rural. This project is supported by grant #90DP0073 from the National Institute on Disability, Independent Living, and Rehabilitation Research within the Administration on Community Living, U.S. Department of Health and Human Services. The contents and opinions expressed reflect those of the author(s), are not necessarily those of the funding agency, and should not assume endorsement by the Federal Government.