**Reflection on Nutrition Counseling for Individuals with Disabilities**

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The prevalence of disabilities is rising globally. There are several types of disabilities, including mobility, cognitive, independent living, hearing, vision, and self-care etc. Research has shown that people living with disabilities are more likely to have obesity, smoke, have heart disease or diabetes.1 Therefore, it’s important that useful strategies, practical approaches and effective tactics are adopted to provide Medical Nutrition Therapy and nutrition counseling to people with these disabilities, to decrease the risk of developing nutrition-related chronic diseases. This panel session does a fantastic job at discussing ways to tackle this, enabling practitioners without disabilities develop a better rapport and achieve better health outcomes for those that have disabilities.

Wendy Wittenbrook talks about her struggles with hearing disability. She mentions that Deaf and Hard of Hearing (DHH) is an invisible disability. This means that it’s a medical condition that is not immediately apparent. She provides facts on DHH in the workforce and in education, and follows-up on discussing the various healthcare inequities in DHH. These include, healthcare and healthcare information inaccessibility, lower health literacy, higher rate of anxiety and depression in younger ages, and that lower provider/patient trust due to poor communication can result in medical errors.1 I really enjoyed the story of her journey to becoming a Dietitian while struggling with this disability. She gives several tips for working with patients with DHH, which include, ensuring they have access, asking what their communication preference is, ensure the environment is suitable for them, using signage, and training staff and raising awareness.

Alicia Connor talks about her struggles and views on vision impairment. She mentions the importance of using meal-planning as a center point to focus on healthy eating. If everybody had their own meal planning system, then it would be created by them with their preferences and health goals in mind. She believes focusing on health values over dieting is important, as everybody could develop their own health values, and that’s how they can learn to make decision for their health over dieting. She then talks about the differences between a visible and invisible disability, emphasizing that it’s important to face the elephant in the room instead of avoiding it, and to work through that discomfort. That way you can figure out how you’ll be able to serve the patient better. This was something that was eye-opening for me, as I’m someone who would most likely be uncomfortable in a situation like that. She talks about different worksite accommodations and practical applications for people with vision impairment, which were interesting.

Jacqueline V. Bastiaans talks about the reason behind her ambulatory disability and the various struggles she had in terms of education and her career path to becoming a Dietitian. She mentions the various modifications that were put into place to accommodate for her work, including the parking, healthy teaching kitchen, and the work area locations for better workflow. I really enjoyed the section on the strategies to approach nutrition counseling when considering someone with a disability. Internal reflection and acknowledging any preexisting bias on a disability is very important. The disconnect between how providers may view a person with a disability and how this person actually lives their life needs to be addressed. Familiarizing yourself with the experience of persons with mobility impairments is a huge step to improving this problem. Familiarizing yourself with community resources will give you a huge advantage as well. Jacqueline emphasizes the importance of establishing and maintaining rapport with your patient. Taking an individualized approach during counseling is recommended, by familiarizing yourself with the patient’s diagnosis and their experience with it. To get to the heart of the matter, it’s about using motivational interviewing to understand what matters to your client, collaborating with them & other resources to create goals, and roll with resistance and where they are at in their stage of change.

This session was incredibly empowering. Three RD/RDNs, each with different disabilities, discussing how they were accommodated for their education, internships, and jobs was very interesting to listen to. It felt natural and genuine, since these people have struggled with their disabilities for most of their lives, and how they worked to get where they are today is incredibly inspiring. I learned a lot and really enjoyed the different strategies they provided to establishing a better rapport with patients of different disabilities, since this is something that many non-disabled practitioners may have difficulty with.

**Reference**

1. Panopto. Panopto. Published 2015. Accessed September 20, 2024. <https://kings.hosted.panopto.com/Panopto/Pages/Viewer.aspx?id=389fa23b-5aaa-471b-af76-b1d900d7414e&start=0>