

# **WHAT ARE SECONDARY CONDITIONS AS THEY RELATE TO DISABILITY**

**NOTE:** This is a non-medical and un-official explanation of Secondary Conditions as related to people with a disability.

**Simply stated, a SECONDARY CONDITION is the effect that the person's disability may have on their life. People with one or two main disabilities, may have other disabilities, too – and even more secondary conditions.**

Here's an example: Joey's main disability is a paralyzed leg with pain. Joey has fallen a lot as he has had this "bum leg" since he was a kid. He has a moderate hearing impairment. And he was just diagnosed with diabetes related to his weight.

As you go through this list, think about Joey and his secondary conditions, or your own situation. Here is a list of some of the most common Secondary Conditions related to disability that often threaten one's ability to be active at home and involved in the community.

## **A LIST OF SOME OF THE SECONDARY CONDITIONS**

- Depression – “the blues” – anxiety – feels as if “no one really understands”
- Loneliness – social isolation – “Disability Grief” and/or “Disability Anger”
- Experiencing discrimination – not getting the services and supports one needs – experiencing workplace discrimination
- Not able to maintain a healthy weight
  - Obesity – not able to lose weight
  - Inability to gain weight – being under weight
  - Difficulty doing exercise (aerobic for the heart or weight training for the muscles)
- Having Medication side effects (“adverse reactions”) – having prescription medications (“Rx”) that don't work
- “Self-medicating” – problems with substance abuse
  - Smoking – using snuff or other tobacco products
  - Drinking to excess – abuse of alcohol – alcoholism
  - Using street drugs (including “pot”) – addiction
  - Using prescription medications (“Rx's”) of others – misusing/abusing own Rx's – refusing to take your Rx's
  - Misusing or abusing Over-The-Counter meds (“OTC”)
  - Using caffeine and herbs (even some foods) that can interfere with some medications

- Not being able to sleep well at night – sleeping all the time
  - Having severe pain – consistent pain – chronic pain – pain that interferes with quality of life
  - Stiff and sore joints – arthritis
  - Muscle spasms – muscle weakness – muscle contractures – spasticity
  - Fatigue – low stamina – exhaustion with exertion – decreased energy
  - Falls – balance problems
  - Equipment injuries – injuries from not being able to feel
  - Unintended injuries by caregivers – abuse/neglect by caregivers
  - Bowel and/or bladder problems – incontinency – urinary track infections (UTI's)
  - Breathing problems – asthma – using oxygen – COPD – using a CPAP machine at night – recurring pneumonia
  - Problems with blood pressure (very low or very high) – light-headedness
  - Carpel tunnel syndrome – repetitive motion syndrome from using w/c or walker or other devices
  - Hip fractures – other bone fractures – Osteoporosis
  - **Other secondary conditions – list your own** – (Note: Two people of similar ages with the same disability may not have the same secondary conditions. This is due to differences in problem solving techniques, relationship building and social support systems, sense of self-confidence, etc.)
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**People with disabilities MUST play an active role in making their own lives better. Here are some ways to do that:**

- Taking control of your own health (lose weight, exercise, control diabetes, get flu shots, etc.)
- Taking control of your own addiction issues (quit smoking, quit drinking, quit using drugs, take control of your obesity, get a handle on your addiction issues whatever they are)
- Taking advantage of peer support programs and training opportunities
- Learning how to be a good self-advocate
- Seeing doctors or specialists when you need that kind of help
- Seeing mental health therapists or counselors when you need that help
- Becoming active in your community and in your local Disability Community