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[00:00:03] Colby D'Onofrio: Welcome to *Stocking the Pantry,* a CalFresh Healthy Living podcast from *Leah's Pantry* from Leah's Pantry. We'd like to acknowledge our funder, the CalFresh Healthy Living Program, an equal-opportunity employer and provider. On this show, we discuss any and all things community nutrition, food equity, and nutrition security. This is a space for thought leaders to share success stories and strategies for equity-centered and resilience-building initiatives.

We hope to foster collaboration and community, as well as leverage strengths among listeners, guests, and hosts as we share ideas and dreams of building a more equitable future where everyone has access to healthful nourishing food. Hello and welcome to *Stocking the Pantry*. I'm Colby.

[00:00:56] Tee Atwell: I'm Tee, and we're your hosts.

[00:00:59] Colby: On today's episode, we are excited to discuss universal design strategies in SNAP-Ed messaging and programming with Lindsey Mullis, inclusive health and wellness director at the University of Kentucky Human Development Institute, who is currently pursuing her PhD in health education sciences with a special focus on disability and sexuality.

[00:01:25] Tee: I would like to take a moment to highlight that Lindsey manages an inclusive health initiative of multiple projects at the Institute, which aims to address health disparities for people with disabilities by empowering support networks, leveraging community partners, and improving health education accessibility through public education on universal design strategies.

[00:01:51] Colby: Lindsey brings 15 years of experience working with the disability community and has a robust educational background in psychology, exercise science, and health promotion. Most importantly, she brings a personal lens as the mother to a daughter who experiences down syndrome and a vision disability. I love that Lindsey phrases her daughter's Down syndrome as something, Caroline, her daughter, experiences as opposed to something she has. It's a good reminder that disability is something a person lives with and experiences, but they are unique, creative, resilient individuals first.

[00:02:35] Tee: Lindsey has expertise in applying universal design strategies, which consist of principles and approaches that allow all individuals, regardless of ability, learning style, and culture to access programs and services without the need for adaptation or additional assistance.

[00:02:56] Colby: According to the Center for Disease Control and Prevention, one in four individuals in the United States has some type of disability, and this rate is even

higher for people living in Kentucky with over one-third of the adult population living with a disability. Universal design helps promote equitable access to the built environment in which a person lives, health programming, and information for the broadest of audiences. Universal design strategies not only help those with disabilities but truly everyone, as we all have different and unique learning considerations.

[00:03:37] Tee: It's in the same way that ADA-compliance sidewalks and curbed ramps benefit not only people using mobility devices, but also those who may be pushing strollers, bikes, or even carrying heavy bags. Or take a look at how ADA signage regulations help all travelers get around. High contrast colors, non-glare finishes, and readable fonts on signs help everyone easily and quickly understand information, not just those with visual disabilities.

Universal design strategies recognize that considerable variations exist in each person's ability and environments, products, and information should be designed with this in mind.

[00:04:25] Colby: With that, we are excited to introduce our guest, Lindsey Mullis. Thank you so much for joining us today.

[00:04:34] Lindsey Mullis: Thank you so much for having me. I'm really excited to be here.

[00:04:38] Tee: Wonderful. Thank you so much, Lindsey. Can you start by telling our listeners a little bit more about yourself, your career path, and how it led to your work now with universal design and inclusive health? Basically, what inspired you to do this work?

[00:04:56] Lindsey Mullis: Of course. I am a white woman, a tired mom with long blonde hair and a passion for health and helping others. I have always been interested in the intersectionality of health and disability. I started my career with implementing an evidence-based program called Health Matters, it's a nutrition and exercise program for individuals with intellectual and developmental disabilities. I went from doing individual programming to serving as the first statewide coordinator for a scale-up of Health Matters Kentucky.

As I struggled to recruit organizations for the program, I began facilitating community conversations to learn more about the barriers the disabled community was experiencing with gaining equitable access to health programming. It was from listening to these voices at those conversations that I started to develop an expertise in applying universal design. What I learned was that instead of segregated or specialized programming, communities needed to build on what was already successfully integrated.

There's a huge, huge benefit from enhancing existing programs and structures to be more inclusive and welcoming to people with disabilities, especially since disabled individuals are the largest minority population and unfortunately, experience really startling health disparities. That's why it's so important to ensure that the programs and services we offer are accessible and meaningfully inclusive. It's hard to not be inspired to do this work when you learn that those one in four Americans with disabilities are also twice as likely to smoke or have diabetes.

They're three times as likely to have heart disease, and roughly one out of two disabled adults are obese.

The more I did this work, the more I saw that health professionals are already serving people with disabilities and they're asking for more support and information on how to do so effectively, or they were missing out on a large part of their communities who needed to access the health programs, but lacked the support to successfully do so.

[00:06:49] Colby: Wow. Those are some really staggering statistics. I don't think a lot of people know how prevalent health complications and challenges are among the disability community and population. It makes so much sense that health providers are looking for resources and support to adequately meet the needs of the people they're serving.

Thank you so much for sharing that. That's really eye-opening and really speaks to the importance of your work. Now I'm wondering, Lindsey, could you tell us a bit about how the Human Development Institute at the University of Kentucky works and what services it offers to individuals, communities, and partners?

[00:07:33] Lindsey: Human Development Institute is the Kentucky UCED or University Center for Excellence and Disabilities. Every state has one, some states have two. There are 67 total, and UCEDs are a nationwide network of resources. They address issues, find solutions, or advance in research, all focused on people with disabilities.

Kentucky's Institute's mission is to build inclusive communities, address inequities, and improve the lives of all people who experience disabilities across the lifespan. There are many grant-funded projects that focus on a myriad of topics, including early childhood, employment, community supports, of course, health, and many, many more.

I would encourage anyone who's listening or someone who wants to connect more with their local disability networks and to learn more about resources to reach out to the UCED in their state or territory. The Association of UCEDs has a website @aucd.org, and that's where you can find those local contacts.

[00:08:29] Tee: Wow. Thank you so much for sharing and highlighting this phenomenal resource. You hear that, listeners? Every state has one so please, if you want to learn

more and get involved, visit that website @aucd.org. I know I'm intrigued to hear more about universal design, and I'm pretty sure our listeners are too. Lindsey, can you define universal design for us and give us some examples of what it might look like to include the principles or strategies involved with this framework and why it's so important to take this type of approach?

[00:09:13] Lindsey: Absolutely, Tee, I'll be delighted. A universal design includes the design of buildings, products, or environments to make them accessible, inclusive, and usable to everyone. That's the formal definition. Most people may be familiar with universal design as it applies to built environment or universally designed streets. There's also universally designed for learning that encompasses instructional goals, assessments, the methods that are in classrooms or educational settings.

I apply universal design to health in a broad context that combines both of those. Universal design should ensure and maximize meaningful access, understanding, and use of environments by all people. I think it's important to understand that when it comes to universal design, those environments include buildings, products, resources, programs and services like nutrition education programming.

When my team and I do training on universal design, we have a comic that demonstrates that curb cut, like you, Tee, mentioned where there's someone in a wheelchair, there's someone pushing a stroller, a delivery person with a dolly, someone riding a bike or a scooter using a cane. I think of how many of us have had to lug our suitcases up and over the curb at the airport. That curb cut benefits all of us.

There's another comic that represents universal design, that's our favorite, that shows a group of students waiting for someone to shovel snow off the stairs to get into the school. There's a kid in a wheelchair that asks, "Can you please clear the ramp?" The guy with the shovel replies, "All these other kids are waiting to use the stairs. When I get through shoveling them off, I will clear the ramp for you." The kid says, "But if you shovel the ramp, we can all get in." That is such a perfect example, because if we make something universally designed, then we all benefit.

I have seen programming with universal design principles not only broaden accessibility and engage individuals with disabilities but also participants with low literacy or who are unable to read and those who speak English as a second language. I've seen universal design accommodate for cultural differences within a participating group or as simple as someone who's a visual learner and not going to remember what you say to them or have them read, but they will respond to images and graphics or physically doing a task and kinesthetically learning. If you're in this health promotion field, it's likely because you want to help people, all people. Universal design promotes inclusion.

[00:11:33] Colby: I love that example about shoveling the ramp before shoveling the stairs, the idea that like a rising tide lifts all boats. It also, when we use universal design, provides a level of emotional safety where people don't have to necessarily share individual challenges that they're experiencing because that can be really private.

Not everyone wants to have everyone know that they're going through a challenge that's unique to them. If we just make everything accessible to everyone, then it creates a sense of, I can be here, I can succeed, I'm welcome here and I don't have to divulge parts of my personal or private life that I don't want to. Just like someone who doesn't have my disability or experience my disability wouldn't have to either. I'm feeling some feels. [laughs]

[00:12:25] Lindsey: That's so true though. That's a really good point. It makes me think about how not all disabilities are visible. Think through about how there's invisible disabilities. If we have that universal design from the beginning, then we are really addressing everybody and whatever barriers they might experience. We're negating that from the get-go.

[00:12:44] Colby: Absolutely. I think that people who don't have visible disabilities often get forgotten about because it's like, oh, well, "What's wrong with you?" I don't see anything wrong and I'm holding up my fingers and doing bunny quotes. There's a lot of challenges that people experience that aren't visible, but it doesn't mean that their challenges are any less legitimate or real just because it doesn't look a certain way to someone. I love that you brought that up.

I love too that you talked about how people who are doing health education. We, I think it's safe to say as someone with a background in health and nutrition education, we want to help people. We want to help all people, and we want to help people be their best selves. How can SNAP-Ed programming and other health programs be more inclusive and accommodating to the community needs? How can we address barriers for individuals trying to access health and nutrition information?

[00:13:43] Lindsey: That's a great question, Colby. The first thing to do is acknowledge disability. Let's not be afraid of that. Ask disability demographic questions on your intake forms to help identify participants with disabilities and allow for accommodation requests. The benefit to this is that we're not only gathering data and information and research that more accurately represents and advocates for the disability community but then as programmers, we are ensuring the success of our program for all participants by allowing that opportunity to identify and address barriers on the front end of the planning process.

In accordance with the 2010 Affordable Care Act, section 4302, the secretary of the US Department of Health and Human Services established data collection standards that

includes the Department of American Community Survey set of six yes or no disability demographic questions that identify disability according to functional tasks. It's hearing, vision, cognition, mobility, self care, and independent living.

Through practice, I have also learned that there's a benefit to asking a seventh question of, do you have a disability? Because the experience of disability is not constant. Someone might have a diagnosis of some kind, like my daughter Caroline with Down syndrome, but she might be having a really great day and answered no to all of those disability demographic questions while someone on the other hand who let's say fell and broke their arm, or I've said this before, when doing a class lecture on campus had an 8:00 AM class the morning after Halloween, they might answer yes to one or more of those disability functional questions.

This is actually referenced in the *Stocking the Pantry Podcast* on Season 1, Episode 6 where the planned activity break for class was a walking route, and several participants were not able to participate within that activity, and facilitator was able to be flexible, and adjust right before or during the session. If those disability questions are asked, and the accommodation requests are included on the intake, then that allows you the time you need to identify and address those barriers.

To apply universal design principles and overcome those barriers, I use the acronym JUST UD IT, JUST, so these key strategies are to, J, jazz it up. U, use multiple methods. S, simplify, and T test it out. The quick and dirty breakdown, we're going to present information in multiple ways. Thinking when it's written text with plain language that is short and concise with an easy to read font and format.

We're going to use bullets and lists, not just big long paragraphs. We're going to also use images and graphics, and make sure to seek input from diverse communities to ensure that you're accomplishing what you set out to do. The T can also stand for teach back method to check for understanding, and there's a handout I've shared with you all on your listeners. It gives examples of the JUST UD IT along with some resources and links to learn more about universal design.

The first universal design programmatic material I created was for a blood pressure awareness program that had concerns about including disabled individuals for fear of affecting the cognition rate. With my old school PowerPoint skills, I created a blood pressure awareness tool that looks like a thermometer with systolic on one side, diastolic on the other. There was color codes of green, yellow, and red with corresponding emoticons.

If someone who was colorblind from a different culture who didn't recognize that red means bad, or cognitively unable to abstractly identify that 140 is above 130, this universally designed tool helps everyone identify where their blood pressure falls on that

range. Then ironically, when we ran a pilot test of the program with this handoff for people with disabilities, the cognition rate was higher overall than their general program. UD doesn't have to be tedious or difficult to implement. Once you know the principles to include or look for, you can find existing resources, or make the adaptations and modifications to existing environments and programs.

[00:17:43] Tee: While listening to this, one phrase came to mind, if you stay ready, you ain't got to get ready. Way to really think outside the box, the circle, the triangle, and really apply an inclusive approach that really encompasses all unique diversities within individuals and what we live with. I have chills right now just hearing how you we're able to think about these multi-layers, these multiple ways in which you were able to present and provide this resource, and develop this into a universal design.

One thing that did strike me is, I started to think about is there something personally you do Lindsey, that helps you open up your mind and have that expansion for you to consider those types of approaches?

[00:18:53] Lindsey: It's a good question. There's an activity that we do during our training that would be difficult to do on a podcast, so just hang with me everybody. We're going to visually describe it, but essentially it's asking what type of learner are you? I mentioned earlier visual learner, because that's what I identify with is that I'm a a visual learner, but what we do in that activity is present different situations and scenarios.

Whether you're reading a book, or giving directions, or trying to remember a list of items at the grocery, and then give those examples of visual. I'm writing it down, or I'm an auditory, I'm going to say those things out loud over and over to myself to try to remember them, or kinesthetically, I'm going to use my fingers to think of the names that I'm trying to list out. What's interesting is that, depending on the situation, people's responses are different.

My favorite time doing this activity was when we presented to the Commission of the Deaf and Hard of Hearing at the state in Kentucky, because when we started to do the activity, we got a little bit of pushback of like, obviously, that's going to be visual for every situation. Even in that group of individuals that were using sign language interpreters, depending on the situation, their responses were different.

That to me is the best way to think through approaching whatever it is that you're doing, whether it's a built environment, a health messaging, an email that you're sending, how can we make sure that the main goal, the content, whatever it is that you're trying to convey or give access to, that we're having those multiple means of engagements. We're getting the broadest audience possible. That's really truly, I think, the best way to approach it.

[00:20:40] Tee: Well, I will definitely say that I absolutely agree. What a way to be able to highlight that without pinpointing, pointing a finger at people having to speak about things that they might not feel comfortable with just as Colby was saying. This is a great way for everyone to really hone in on their learning style and how that may look different in certain situations and environments. This is very inspiring.

Lindsey, how can our listeners learn more and educate themselves about universal design principles and strategies? What resources would you recommend for implementers, community health workers, or just anyone working in the SNAP-Ed space or other health education settings to help implement a universal design?

[00:21:33] Lindsey: The JUST UD IT handout that I mentioned, it includes links to information on universal design, plain language. There's program planning, presentations, and even graphic medicine, which is really cool. This handout is one of many resources that have been created over the years through partnerships and collaborations with the Institute. Those are all accessible at the website, www.wellness4ky.org. That's at the resource library page.

Specific to our nutrition and SNAP-Ed work, there are visual recipes, adaptive kitchen utensil resources, even nutrition demonstration videos with a SNAP-Ed educator teaching folks with disabilities, and then videos of adaptive exercises. There's a lot of great resources at that wellness4ky website, but really truly universal design is broadly out there. You could do some research and look on the internet. I encourage you to do so.

I just really want to plug the resources at this wellness website because what I've learned is there's so much focus on universal design and just the built environment or how is it applied to universal design for learning? When for us as programmers, we're really looking to make that connection with people, to encourage them to change their behaviors, to make healthy choices. It's so much more about that engagement and how do we universally design that so we can make that strong connection that really gets to the individual and how we're going to help them make those barriers, get busted down and really make those great healthy choices.

I think that's so important to think about. Then also, the right answer to the last question that you all asked was to make sure that you include a diverse audience, particularly people with disabilities and your planning process, your advisory committees, any research teams, wherever you can fit in that lived experience to provide critical insight. It's just so important. Whether it's to help with your recruitment and intentional inclusion of disabled communities, or to ensure that your resources, your products, your physical spaces are accessible, those voices matter so much and they're too often omitted.

[00:23:45] Colby: Thank you so much for sharing that. I think that there are definitely some great resources on that website. I loved that you pointed out that thinking about adaptations is often limited to the built environment or very specific learning environments. When we're implementing programs and providing services, there's a lot of things that we can do to reach all people of all populations, of all backgrounds and abilities that go just beyond curb cuts in sidewalks. If our listeners are interested in getting in touch with you, Lindsey, and learning more about your work with inclusive, health, and nutrition, how can they reach out to you?

[00:24:31] Lindsey: Yes, please do reach out. I love making new friends and sharing resources. My email is lindsey.c.mullis@uky.edu. Then our team email at the Human Development Institute matches the website at wellness4ky@uky.edu.

[00:24:54] Tee: Perfect. Also, we will have those links in our show notes. I want to say we are thrilled that we got to speak and learn from you today. Before you go, Lindsey, though, we have to ask, what do you stock your pantry with, either figuratively and or literally?

[00:25:19] Lindsey: What I always have on hand and way more than anyone would ever need to have in their pantry are cans of beans, tomatoes, and hominy for chili. It's versatile, you can make beef, chicken, venison or veggie chili. One of my favorites is jalapeño popper chili with cream cheese. So good. Then the cans also come in handy to add weights to our indoor obstacle course that Caroline and her sister set up on a rainy day or when it's a winter. We've got to stock the pantry with those. It's multiple means of engagement. Keeping it universal design in the pantry too.

[00:25:55] Colby: I love that. That is on point, on brand. Universal design anywhere, everywhere, the pantry included. I'm also someone who if I don't have beans in my pantry, it literally gives me a little anxiety. I'll go to the grocery store and I'll be like, "Do I have beans?" I'll probably grab two more cans of beans only to come home and realize that I already have three or four in the pantry. I love having beans on hand. They are so versatile. You can do so much with beans. Hominy is a great addition. I love that idea.

[00:26:30] Lindsey: Now that I think about it, hominy-- my kids don't like corn but they'll eat hominy because they like the bean texture. It's something different, which is good. We have our-- We call it the Harry Potter closet because it's under the stairs. That's also another way of when all of these beans come home, that's another part of the children labor for them to get some maximum effort exercises. Will you take these beans to the Harry Potter closet?

[00:26:55] Colby: I love that. That is so fun. It's better that the beans are living under the stairs than a human like Harry. Lindsey, I want to say a huge thank you for joining us today. It has been an absolute pleasure chatting with you. Your passion comes through.

You are such a powerhouse of a person and we are really grateful to have you on the show and have you working in this area of study and work. Our community nutrition and health services are definitely better having you in our corner. I want to say, again, thank you for joining us and highlighting how we can collectively improve accessibility in health programming.

[00:27:43] Tee: Yes. Thank you so much, Lindsey. We appreciate everything that you do and everything that you shared here. I'm really looking forward to learning more and also getting involved in my community with the universal design. I will say this, what time is jalapeño popper chili with cream cheese dinner happening? I am in.

[00:28:09] Lindsey: Oh, girl. We have so many jalapeño that are about to be ready to pick from the garden.

[00:28:14] Tee: Oh.

[00:28:15] Lindsey: You just come on over.

[00:28:15] Tee: Garden fresh. Oh, my God.

[00:28:17] Lindsey: We like it spicy around here. You all have been so amazing. This has been such an incredible opportunity. Thank you so much.

[00:28:25] Tee: Yes, thank you, Lindsey, as well as thank you listeners for tuning in. Make sure to join us next time. Ciao.

[music]

[00:28:37] Colby: Thank you for hanging with us. Do you know a thought leader or someone doing great work in your community? We would love to interview them and we would love to hear from you. Find us online at leahspantry.org, on Instagram at leahspantry.org, or email us at podcast @leahspantry.org.

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