



# FAST STATS ON INTERSECTIONALITY OF DISABILITIES & ADDICTION



People with disabilities are twice as likely to experience substance use disorders

Over 50% of people with co-occurring physical disabilities and chronic pain report misusing prescription medication



1 in 3 adults with disabilities report difficulty accessing treatment due to mobility, communication, or stigma barriers

## MYTH VS REALITY

Myth	Reality
People with disabilities don't develop addictions.	Disability can increase vulnerability to trauma, isolation, and pain.
They're just using pain meds as prescribed.	Medication misuse can go unnoticed- especially if symptoms overlap.
They wouldn't qualify for treatment anyway.	Everyone deserves access. Treatment should adapt- not exclude.
Addiction always looks like chaos or crisis.	Inaccessible environments often mask signs like fatigue, shutdowns, or silence.

## CLINICAL RED FLAGS TO WATCH FOR:

CLIENT IS MISSING APPOINTMENTS BUT REPORTS INCREASED FATIGUE OR MEDICATION NEEDS

FAMILY REPORTS CHANGES IN BEHAVIOR, BUT STAFF ATTRIBUTES IT TO "PROGRESSION OF DISABILITY"

CLIENT ASKS FOR EARLY REFILLS OR MEDICATION "JUST TO GET THROUGH THE DAY"

CHANGES IN MOOD, GROOMING, OR ENGAGEMENT GO UNEXPLORED DUE TO FOCUS ON DISABILITY-RELATED CARE

LACK OF DISCUSSION ABOUT SUBSTANCE USE DURING TREATMENT PLANNING OR CASE REVIEW