

EQUITABLE ACCESS TO HEALTH CARE

What do health care staff and providers need to know?

Why is provider training needed?

- The COVID-19 pandemic underscored the necessity of ensuring equitable access to health care. Individuals with disabilities encountered barriers in obtaining fair and equal access to COVID-19 testing, treatment, and vaccinations.
 - People with disabilities were specifically deprioritized for life-saving care.
- In health care, disability has traditionally been approached from the medical model perspective. This model views disability as a product of biology and a departure from a "normal" structure or functioning. This perspective assumes a need to "fix" or reduce the effects of a disability with a near exclusive focus on deficits and negative impacts on lives. These assumptions lead to bias, stigma, and the misconception that the lives of people with disabilities are lower in quality and less valuable.*
- A 2022 study showed that given the condition of anonymity, physicians will report concern, bias, and hesitancy to care for people with disabilities.**

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HEALTH CARE

MEDICINE

Clinical Knowledge



38% of survey respondents said doctors and medical staff are not properly trained to treat them.



Participants expressed the perception that providers hold pre-conceived notions about their bodies or health based on their disability.



Participants highlighted instances where their providers expressed a lack of knowledge about their condition or were unfamiliar with treatment options.



Participants often reported feeling like providers were talking down to them or not listening, not allocating time to listen to their needs and preferences, failing to present options, and disregarding their input into treatment decisions.



For people with psychiatric labels, there were repeated concerns that providers do not believe them or that their label was prioritized over any physical health issues they were experiencing.

“My PCP is good at listening, but they can’t answer a lot of questions because I have very specialized needs related to my injury. I’m scared about having a serious event happen where I need care and more generalist providers may not understand my very specific needs.”

SURVEY RESPONDENT

Cultural Competency



27% of survey respondents reported their providers do not respect them.



Focus group participants expressed the belief that providers and the health care system as a whole, do not view them as a “whole person.”



Participants felt their providers were uncomfortable providing a complete examination and were resistant to touching or moving their bodies.



For people with mental health labels and people with labels of intellectual and developmental disability, many people said providers used their diagnoses or labels to disregard their concerns.



There is a need for health care providers to adopt a trauma-informed approach.



Recognizing that many people with disabilities have experienced discrimination and trauma from health care providers is crucial to providing culturally competent care.

“I’ve faced such chronic shame that if I go to a medical professional and feel like they are shaming me in any way, I will not return. As a trans person [with a disability], I have to find care that is trauma-informed and competent.”

SURVEY RESPONDENT

Recommendations

1

Ensure individuals with disabilities are represented as decision-makers and subject matter experts in spaces where education and training curricula are established.

2

Train health care personnel to provide comprehensive and high-quality care to patients with all types of disabilities.

3

Increase the number of people with disabilities employed in health care settings.

4

Improve the quality of care for people with disabilities.

References:

**Healthcare as an Ally: A Critical Intersectional Approach to Addressing Health Disparities," HCA Healthcare Journal of Medicine, 2021, <https://scholarlycommons.hcahealthcare.com/cgi/viewcontent.cgi?article=1393&context=hcahealthcarejournal>.

**L. I. Iezzoni et al., "Physicians' Perceptions Of People With Disability And Their Health Care," Health Affairs (Project Hope) 40, no. 2 (2021): 297-306, doi:10.1377/hlthaff.2020.01452.

For more information:

www.drme.org/news/2022/health-equity-at-drm

“Most places have no idea what to do when a Deaf person walks in. Some places are compassionate, and some places have no idea. They need so much education. If the shoe was on the other foot, imagine how they would feel, relying on lip reading or writing everything out - especially with medical terminology.”

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