

# EQUITABLE ACCESS TO HEALTH CARE

## How do physical barriers impact health care?

### Why should we eliminate physical barriers?

Health care facilities are often not designed to accommodate people with physical disabilities.

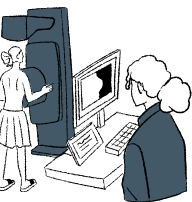
- Inaccessible entrances, narrow doorways, stairs without handrails, and a lack of accessible restrooms can impede someone's ability to safely navigate a facility.<sup>1</sup>

One study found that people with disabilities in rural areas have limited access to health care facilities that are equipped to meet their needs.

- Inaccessible medical equipment may be more prevalent in rural areas due to the lack of resources and infrastructure available in these regions.<sup>2</sup>
- Another study found that more than half of primary care clinics surveyed in the United States did not have accessible weight scales.<sup>3</sup>

Research has also shown that people with disabilities are less likely to receive diagnostic medical exams due to inaccessible medical equipment.<sup>4</sup>

- Reported cervical cancer screenings for women with disabilities ranged from 60-80%, compared to 80% for women without disabilities.
- Between 61% to 68% of women with disabilities between the ages of 50 and 74 had a mammogram, compared to 74% for women without disabilities.



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## What did we learn about physical barriers?



About **1** out of every **5** people who took our survey said the places where they go to get health care are not accessible or safe.



Many people said it is hard for them to get into buildings and find their way around different rooms and areas.



Some people in the focus groups shared that they could not get the tests and/or treatments they needed because the medical equipment was not made to be accessible for people with disabilities. This was especially true for people with physical disabilities.



People in the focus groups who have mental health diagnoses or labels or are blind or low vision talked about privacy issues. They said:

- The places where they have exams are not private.
- They have to fill out forms where others can see or hear their answers to questions while someone reads the questions.
- Their doctors talk to them in hallways instead of private spaces.



**“The ADA [Americans with Disabilities Act] scrapes the bottom of the barrel. Doors are always too narrow, getting through is hard; there are too many chairs to park a wheelchair. This includes parking lots and maintenance of pathways which aren’t safe or accessible. Exam rooms are usually too small to move my chair around.”**

FOCUS GROUP  
PARTICIPANT

## Recommendations

- 1 Create, implement, and improve mechanisms for notifying providers and staff of patient accommodations and needs.
- 2 Equip all health care organizations with tools, assistive devices, medical equipment, and personnel that allow for universal access to all recommended screenings and diagnostic tests and treatments.
- 3 Create accessibility guidelines that go beyond the basic minimum requirements that provide additional access whenever the needs of the population go beyond those minimum standards.
- 4 Ensure that patients are fully aware of the accessibility-related services available to them.

## References:

1. "Disability Access and Medical Facilities" by the United States Access Board – <https://www.access-board.gov/guidelines-and-standards/background/disability-access-and-medical-facilities> Center for American Progress, "Advancing Economic Security for People with Disabilities," <https://www.americanprogress.org/article/advancing-economic-security-people-disabilities/>
2. Lindgren, S., Wigginton, K., & Janzen, H. (2018). Accessibility of Rural Health Care Facilities: Results from a Community-Based Study in Coastal North Carolina. *International Journal of Environmental Research and Public Health*, 15(9), 1839. <https://doi.org/10.3390/ijerph15091839>
3. Eichner, J., & Timmons, J. C. (2019). Inaccessible weight scales: A missed opportunity to improve the care of patients with obesity. *Journal of General Internal Medicine*, 34(5), 665-666.
4. Centers for Disease Control and Prevention. "Prevalence of Cancer Screening Among Adults With Disabilities, United States, 2013." *Preventing Chronic Disease*, vol. 14, no. 160312, 2017, [https://www.cdc.gov/pcd/issues/2017/16\\_0312.htm](https://www.cdc.gov/pcd/issues/2017/16_0312.htm).

## For more information:

[www.drme.org/news/2022/health-equity-at-drm](http://www.drme.org/news/2022/health-equity-at-drm)

**“The front desk staff who assist with filling out forms want to do it in the waiting area surrounded by other patients who can easily hear the whole thing.”**

**SURVEY  
RESPONDENT**