



Inaccessibility of Physicians' Offices and Healthcare Facilities a Problem for Women with Disabilities

Background: Approximately 20% of U.S. females aged 18–64 live with at least one disabling condition.ⁱ According to the Center for Disease Control and Prevention, the Americans with Disabilities Act (ADA) has made a positive difference in the lives of those who have disabilities, providing better access to buildings, transportation, and employment. However, health disparities (differences in health) between people with and without disability are still presentⁱⁱ. The Commission on Women, Children and Seniors encourages the Legislature to consider the following gender-specific information when drafting legislation aimed at increasing access to the healthcare system for people with disabilities.

Women with Disabilities

Women with disabilities have the same needs as women without disabilities in accessing reproductive health care including pap smears, pelvic exams and mammograms. However, according to the Center for Research on Women with Disabilities,ⁱⁱⁱ women with major long-term mobility impairments are less likely to have these important examinations.

The physical environment can affect access to cervical cancer screenings, as one example, among women with disabilities insofar as it impedes their physical access to, into or within buildings in which screening is conducted^{iv}. For example, buildings that lack elevators or ramps, or that have halls or doors that are too narrow to permit easy passage, may limit physical access. In addition, medical equipment and technologies—especially examination tables and diagnostic tools—that do not fit or measure “nonstandard” bodies can limit access.^v This includes mammography equipment.

Unfortunately this means that;

- Women with extensive functional limitations are less likely to receive breast and cervical cancer; screening according to recommended guidelines than non-disabled women.
- Women with disabilities are sometimes told that a pelvic exam is unnecessary when the real reason is it would be too difficult to perform;
- Women with disabilities are more likely to be diagnosed at later stages of breast cancer;
- Treatment is likely to be less successful when begun at a late stage, resulting in increased mortality rates; and
- Pregnant women with physical disabilities may have difficulty accessing quality prenatal care.

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ⁱ Altman B and Bernstein A, Disability and Health in the United States, 2001–2005, Hyattsville, MD: National Center for Health Statistics (NCHS), 2008.

ⁱⁱ The Center for Disease Control and Prevention, Key Findings: Prevalence of Disability and Disability Type among Adults, United States – 2013 < <https://www.cdc.gov/ncbddd/disabilityandhealth/features/key-findings-community-prevalence.html>>

ⁱⁱⁱ < <https://www.bcm.edu/research/centers/research-on-women-with-disabilities/topics/health-care/reproductive-health-care>>

^{iv} Guttmacher Institute, Disability and Pap Smear Receipt Among U.S. Women, 2000 and 2005, Barriers to Screening < <https://www.guttmacher.org/journals/psrh/2010/11/disability-and-pap-smear-receipt-among-us-women-2000-and-2005>>

^v *ibid*