

# Healthcare for Women with Disabilities



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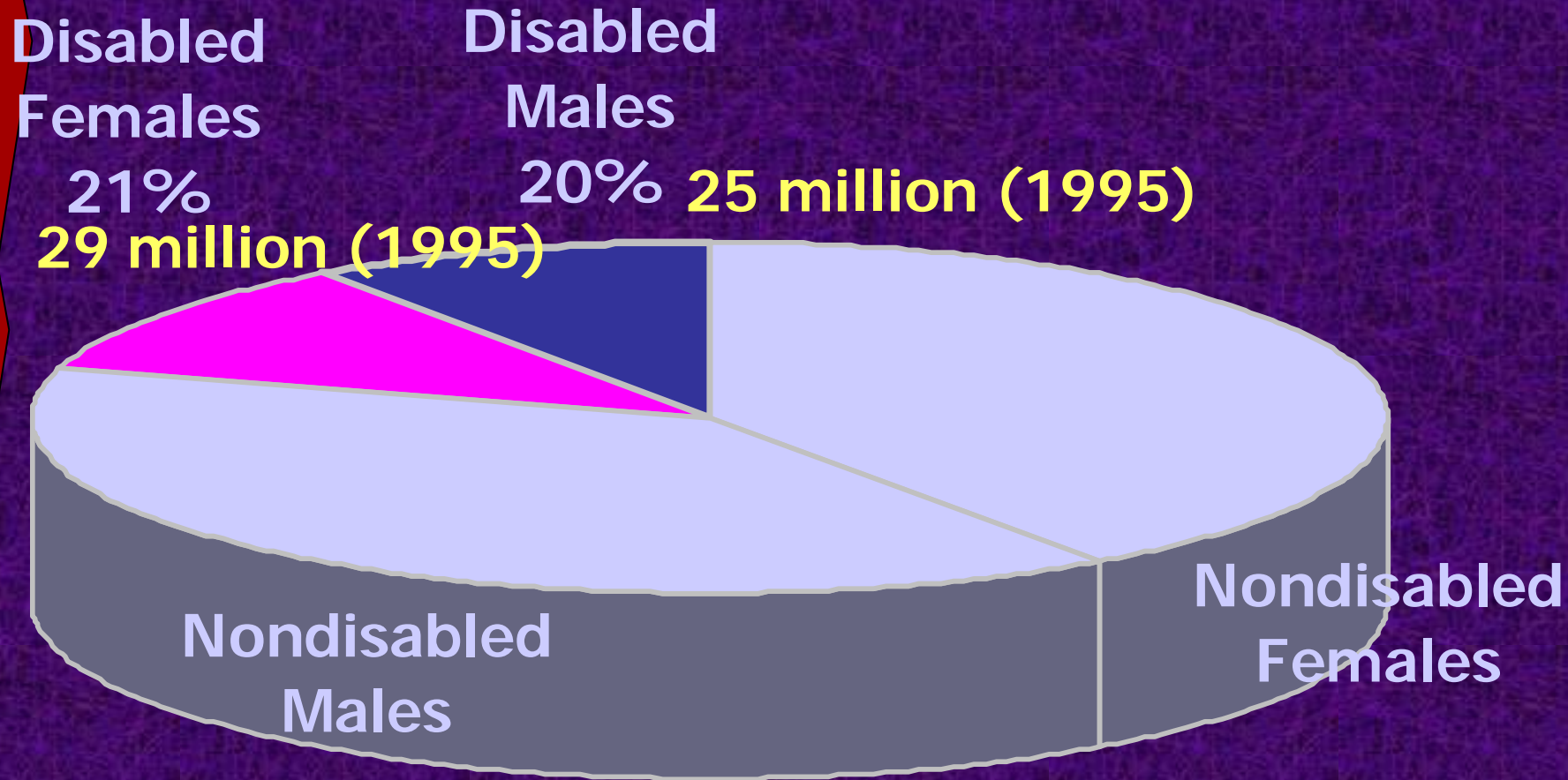
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# Prevalence of Disability by Gender



# Healthcare of People with Disabilities

- Paucity of research
- People with disabilities identify numerous barriers to receipt of care
  - Accessibility
  - Pejorative physician attitudes
  - Inadequate physician knowledge of disabling conditions

# Data Source

- National Survey of America's Families (NSAF)
- Telephone & area sampling of >42,000 households in 1997 & 1999
- Area sampling to obtain representation of households without telephones
- Data collected on well-being of families
- Data weighted for undercoverage & non-response, probability of selection, age, sex, and ethnic/racial distribution of the census estimates

# Study Methods

- Pooled estimates for 1997 & 1999 NSAF (cross-sectional) data
- Logistic regression with weighted data, adjusted for age & household income
- SUDAAN to accommodate complexity of survey design
- Disability measure: "Do you have a health condition or disability which limits your employment?"
- n=54,243 women; 8,721 women with disabilities

# Health Care Access Measures

- Has a usual source of healthcare
- Has health insurance
- Postponed needed medical care in last 12 months
- Postponed needed medication in last 12 months
- Had Papanicolaou smear test in the previous 12 months
- Had a breast exam in the previous 12 months

# Results

Usual Source of Care	Insured	Postponed Care	Postponed Drugs	Pap Test	Breast Exam
<b>1.38</b> (1.14, 1.68)	<b>NS</b>	<b>3.41</b> (2.61, 3.54)	<b>3.78</b> (3.18, 4.49)	<b>.82</b> (.73, .91)	<b>NS</b>

Odds Ratios (95% Confidence Intervals), with non-disabled women as referents, adjusted for age and household income



# Study Limitations

- Imperfect measure of disability, albeit widely used
- Variation among women with different impairment types could not be analyzed



# What does it all mean?

- Some serious deficits exist in the healthcare of women with disabilities, despite similar likelihoods of having a usual source of care and having insurance
- Rates of postponement of care may signal particularly dire consequences related to secondary conditions
- Entry-level access is similar or better, but care outcomes are much worse for women with disabilities – clinical encounter might be best intervention target



# Need for Future Research

- Investigate experiences of women with different impairment types
- Investigate the underlying causes of postponement of care
- Investigate the health care experiences of minority and low-income women with disabilities

# Thank you!

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