Healthcare for Women with Disabilities

Susan Parish, MSW, PhD
Jungwon Huh, MA, MSW
University of North Carolina at Chapel Hill
School of Social Work
2004 UNC Women’s Health Research Day
Prevalence of Disability by Gender

- Disabled Males: 20% (25 million, 1995)
- Disabled Females: 21% (29 million, 1995)
- Nondisabled Males
- Nondisabled Females

Source: Jans & Stoddard (1999)
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
<table>
<thead>
<tr>
<th>Usual Source of Care</th>
<th>Insured</th>
<th>Postponed Care</th>
<th>Postponed Drugs</th>
<th>Pap Test</th>
<th>Breast Exam</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1.38</strong> <em>(1.14, 1.68)</em></td>
<td>NS</td>
<td><strong>3.41</strong> <em>(2.61, 3.54)</em></td>
<td><strong>3.78</strong> <em>(3.18, 4.49)</em></td>
<td>.82 <em>(.73, .91)</em></td>
<td>NS</td>
</tr>
</tbody>
</table>

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!

• Adam Safir & colleagues at the Urban Institute
• Jungwon Huh, PhD student at UNC’S School of Social Work