

2007 Women's Health Policy Summit  
Work Group # 9

*Disability and Access:  
Issues for Consideration*

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# Mental Health Care

- Frequent marginalization of persons with disabilities
- Community mental health resources are stretched to the breaking point
- Care at the sub acute level is limited
- Infrequent follow up care – limited availability of case management services
- Lack of social networks and support systems

# Reproductive Health Care

## **Failings in the Healthcare System Infrastructure**

- Lack of accessible reproductive healthcare facilities
- Vague and or complicated healthcare material (brochures, medical instructions, pharmacological inserts)
- Lack of access to information in alternative format such as Braille and alternative communication methods such as American Sign Language

# Reproductive Health Care

## **Failings of Professionals' Training/Mindset**

- General fear and discomfort communicating with disabled women
- Refusal to recognize the ability to have healthy disabled sexual experiences
- View patients as immature or not in control
- Lack of exposure to specific health issues of women with disabilities

# Reproductive Health Care

## Other Concerns

- Lack of confidentiality when visiting reproductive healthcare settings due to limited transportation options, inability to communicate, limited mobility, etc.
- Interactions with medications may impact reproductive system
- Emotional component of losing or lacking a complete sense of identity as a person

# Assistive Technology

- Has the potential to increase independence and maintain personal dignity in health care settings
- Opens up the world of mainstream technology and health information
- May allow women with disabilities to age in place
- Funding is an issue – policy makers may not understand that technology may be more cost efficient than other care models
- User abandonment can be an issue due to complexity of technology – keeping it as simple as possible is extremely important