Including People with Disabilities in Reproductive Health Programs and Services

Introduction

The National Association of County and City Health Officials’ (NACCHO’s) Health and Disability program works with local health departments (LHDs) to increase the inclusion and engagement of people with disabilities into all public health programs, products, outreach, and services. Findings from a recent national survey of LHDs (Table 1) suggest that many LHDs provide reproductive health services to members of the general population; however, very few specifically include people with disabilities in these services. The purpose of this fact sheet is to educate and raise awareness of LHDs about the importance of including men and women with disabilities in existing reproductive health programs and services offered by LHDs.

The Importance of Including People with Disabilities in Reproductive Health Programs and Services

Approximately 56 million people in the United States, or 20% of Americans, live with a disability, and this number is expected to rise as the baby boomer population ages. People may experience many types of disabilities, including difficulties with hearing, seeing, moving, thinking, learning, and communicating. A disability can be temporary (e.g., broken leg) or lifelong (e.g., Down syndrome), and people may develop a disability at any point in their lifetime. People with disabilities have the same sexual and reproductive health needs as people without disabilities. However, people with disabilities historically have been denied access to information on sexual and reproductive health and often experience barriers when trying to receive reproductive health services and screenings. Often, healthcare providers lack the knowledge and skills needed to provide care to people with disabilities and sometimes may hold negative attitudes toward people with disabilities.

LHDs offer many types of reproductive health screenings to the general population including mammography, pap smears, family planning, STD and sexually transmitted infection (STI) screenings, yearly physical exams, and prostate, penile, and testicular cancer screenings; these screenings can help to detect diseases earlier and save lives. LHDs should start including people with disabilities in existing reproductive health screenings and educational outreach programs to reduce the disparities in reproductive health experienced by the population of people with disabilities.

### TABLE 1. REPRODUCTIVE HEALTH PROGRAMS OFFERED BY LHDS

<table>
<thead>
<tr>
<th>Program Offered by Health Department</th>
<th>Program Inclusive of People with Disabilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family planning services</td>
<td>48%</td>
</tr>
<tr>
<td>Violence prevention</td>
<td>28%</td>
</tr>
<tr>
<td>Education about mammograms</td>
<td>51%</td>
</tr>
<tr>
<td>HIV/STI screening services</td>
<td>64%</td>
</tr>
<tr>
<td>Education about pap smears</td>
<td>54%</td>
</tr>
<tr>
<td>Teen pregnancy prevention</td>
<td>57%</td>
</tr>
</tbody>
</table>

N=159

Notable Disparities

People with disabilities are four times more likely to report fair or poor health when compared to those without disabilities. For instance, people with disabilities are more likely to experience physical, emotional, or sexual abuse, experience sexual assault, or become infected with HIV and other STIs. In addition, women with disabilities are less likely to receive breast and cervical cancer screenings.

Possible explanations for these disparities in reproductive health for people with disabilities include lack of physical access, such as transportation barriers or poor proximity to clinics, lack of access to information and communication materials, and lack of health insurance.
Recommendations

LHDs do not need to create specific programs and services for people with disabilities. Instead, making existing programs and services accessible to people with disabilities should be the goal. LHDs can better include people with disabilities in reproductive health prevention and screening efforts in the following ways:

- Make necessary accommodations to existing reproductive health programs (e.g., hold programs in accessible facilities) and provide educational materials in Braille, large print, audio, etc.;
- Raise awareness and educate staff about providing reproductive health programs/services to people with disabilities; and
- Engage people with disabilities and community-based organizations representing the interests of people with disabilities in program planning.

References


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The mission of the National Association of County and City Health Officials (NACCHO) is to be a leader, partner, catalyst, and voice with local health departments.

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