How to Make Healthcare Accessible for All

Healthcare access is important for all individuals, especially for people with disabilities. However, people with disabilities don’t always receive the healthcare they need. Several barriers can make it harder for them to access critical healthcare services or build optimal working relationships with their providers. Fortunately, by being aware of these barriers, we can overcome them with changes in design, training, and policy.

What are some of the health gaps for Americans with disabilities?

People with disabilities face a number of disparities when it comes to getting healthcare, including:

- **Lack of preventative care** – People with disabilities are less likely to get regular screening tests, such as cholesterol tests and mammograms, compared to their peers without disabilities.

- **Lack of specialty care** – People with disabilities who are living in rural communities may not have access to providers who understand their condition and can identify the early signs of a problem that needs special care or facilities.

- **Difficulty paying for care** – American adults with disabilities are about twice as likely to report delaying a healthcare appointment or prescription refill because of cost, compared to their peers without disabilities.

- **Health risk factors** – People with disabilities may have more health risk factors such as being overweight, having high blood pressure, or being physically inactive.

What barriers do people with disabilities face in getting healthcare?

In surveys and focus groups, people with disabilities have described several barriers that make it difficult for them to get care. Barriers may be physical, attitudinal, or financial.

**Physical Barriers**

- Scales and exam tables that are not height adjustable, making it difficult to transfer from a wheelchair to the scale or table

- Dental offices with chairs that are not accessible for wheelchair users

- X-rays or mammography machines that are not accessible
Steps or doorways in medical office buildings that are too narrow for wheelchair users, or manual doors that are too heavy to open.

Attitudinal Barriers

Some people with disabilities report that their providers talk to them in a patronizing way or discount their need for preventive care, focusing on the disability as the main reason for their visit. Patients with rare disability conditions may also feel that their providers don’t know enough about their specific needs. Sometimes, disabilities are invisible. People with invisible disabilities may feel that their experiences are downplayed or not taken seriously enough. People with speech or hearing disabilities may experience trouble communicating with providers and may not feel that their concerns are understood.

Financial Barriers

People with disabilities may have multiple ongoing needs for medications, medical procedures, or equipment which can become expensive and are not always fully covered by insurance. People with disabilities may have trouble accessing private health insurance. Individuals with disabilities may no longer have paid employment due to their disability, or they may be receiving public benefits or coverage which limits their financial capacity to cover healthcare costs.

How can you remove barriers and improve access?

Understanding the barriers is the first step toward removing them. There are other steps you and your colleagues can take to promote full access for patients with disabilities. These include:

- Obtain accessible office equipment, such as height-adjustable exam tables, scales, and X-ray machines.
- Ensure that your office building complies with modern accessibility guidelines, such as having doorways wide enough for wheelchair access, appropriate ramps and elevators, and accessible restrooms. Information on accessible healthcare facilities may be found at http://adata.org/factsheet/accessible-health-care
- Check that your office’s electronic patient portals and online materials comply with modern web accessibility guidelines. A great training resource is at http://www.w3.org/WAI/WCAG20/quickref/
- Provide alternative communication when requested, such as a sign language interpreter or written communication.
- Recognize that patients are permitted to bring their working service animals into clinic waiting rooms, exam rooms, and other non-sterile areas. Under current
law, it is legal to ask what function the animal performs, but not to ask for ID or documentation.

- Provide ongoing training to your staff on how to interact appropriately with patients who have disabilities. Include topics on respectful communication, disability culture, sexual and reproductive healthcare, and the importance of preventive care.

- Connect with local and national disability organizations so your staff can learn more about rare conditions and ask people with disabilities about their preferences for communication and access. Some national groups include:
  - United Spinal Association ([www.unitedspinal.org](http://www.unitedspinal.org))
  - National Multiple Sclerosis Society ([www.nationalmssociety.org](http://www.nationalmssociety.org))
  - Post-Polio Health International ([www.post-polio.org](http://www.post-polio.org))
  - Muscular Dystrophy Association ([www.mda.org](http://www.mda.org))

- Recognize that some patients with disabilities may have trouble paying for all of their care, even if they have insurance. Help patients to understand all of their prevention and treatment options, including relative costs. This may include comparing different treatment options, or allowing for payment plans.

**Additional Resources:**

- List of national disability advocacy and support organizations ([www.ncdj.org/resources/organizations](http://www.ncdj.org/resources/organizations))
- ADA Knowledge Translation Center ([https://adata.org/ADAKTC](https://adata.org/ADAKTC))

**References**


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**Disclaimer:** This information is not meant to replace the advice from a medical professional. You should consult your health care provider regarding specific medical concerns or treatment.