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Gynecologic Preventative Care of Women with Disabilities: What Are We Missing?

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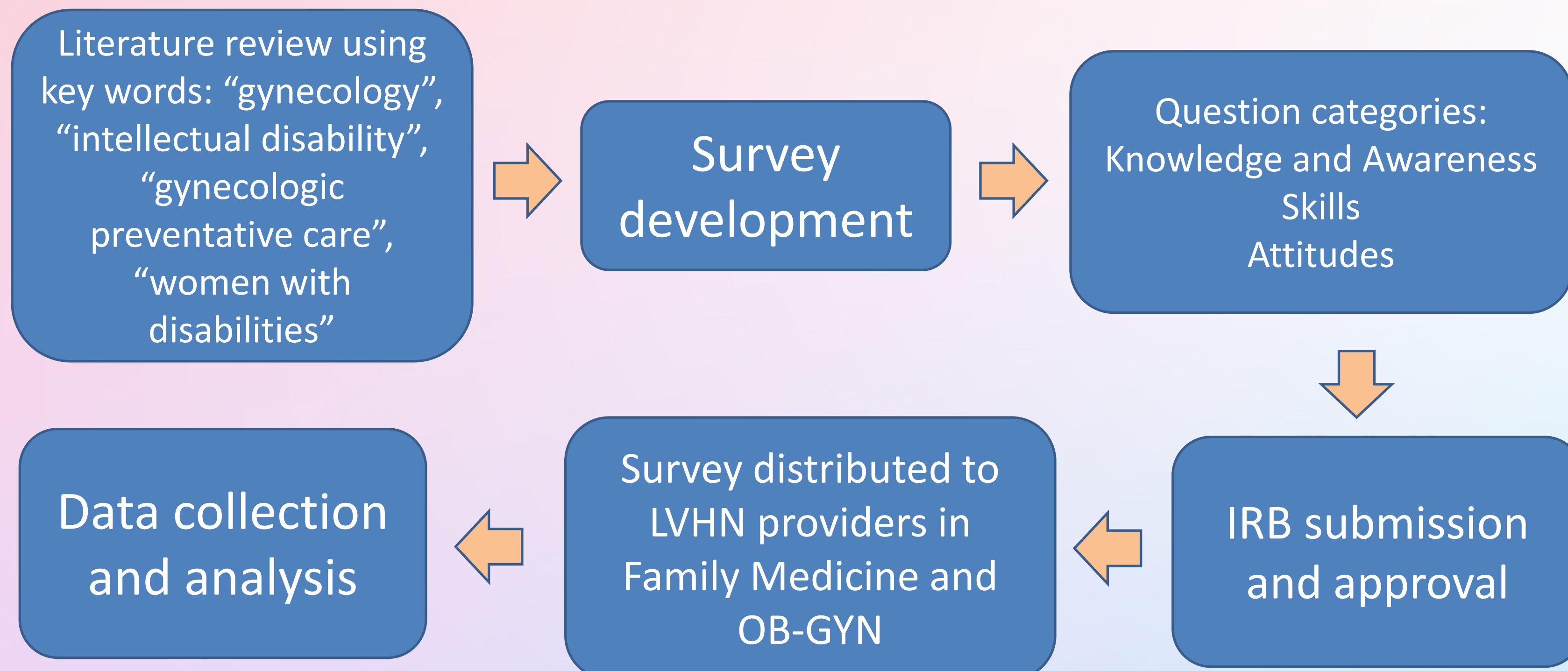
BACKGROUND

- Women with disabilities receive preventative gynecologic care, such as pap smears and mammograms at lower rates than women without disabilities¹
- This can lead to higher incidences of breast and cervical cancer¹
- Women with disabilities often do not receive or receive little information about reproductive healthcare, limiting their awareness of its importance²
- According one national study, women with intellectual disabilities were 72% less likely than women without disabilities to receive screening for cervical cancer³
- In previous studies, physicians have reported barriers to care such as inadequate training or insufficient facilities to provide proper care⁴

OBJECTIVE

To determine physician and APC-perceived barriers to providing adequate preventative gynecologic care to women with disabilities within LVHN

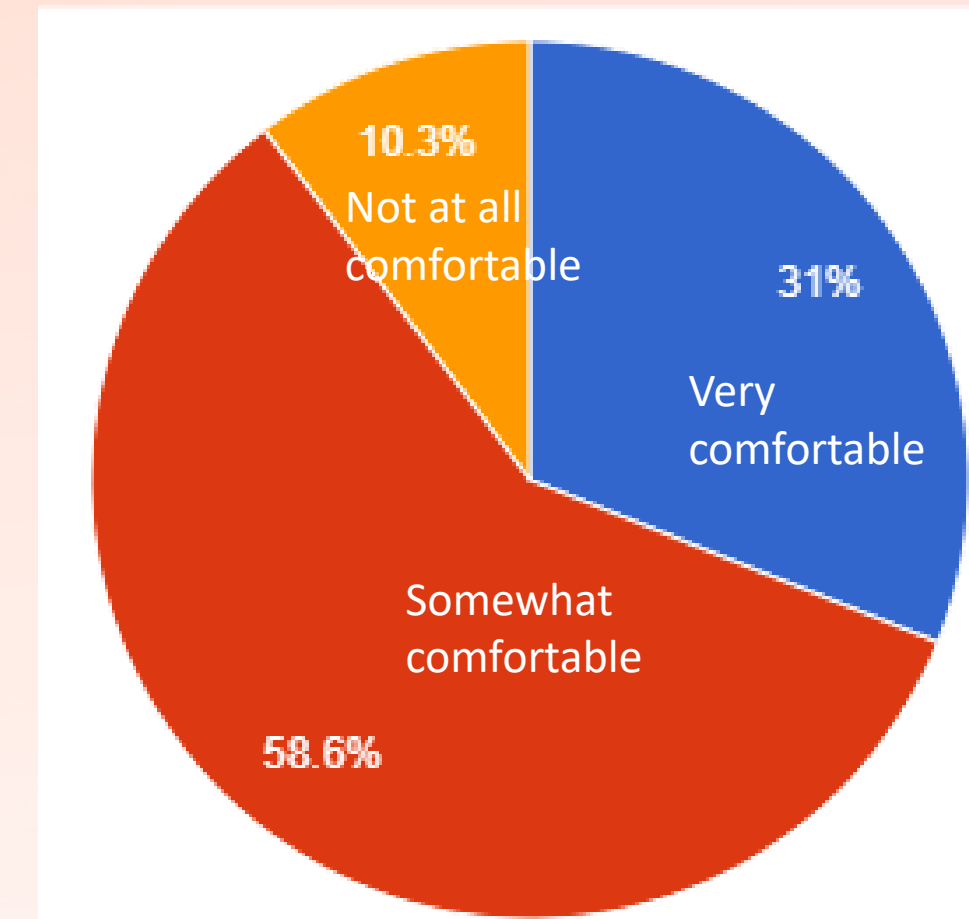
METHODS



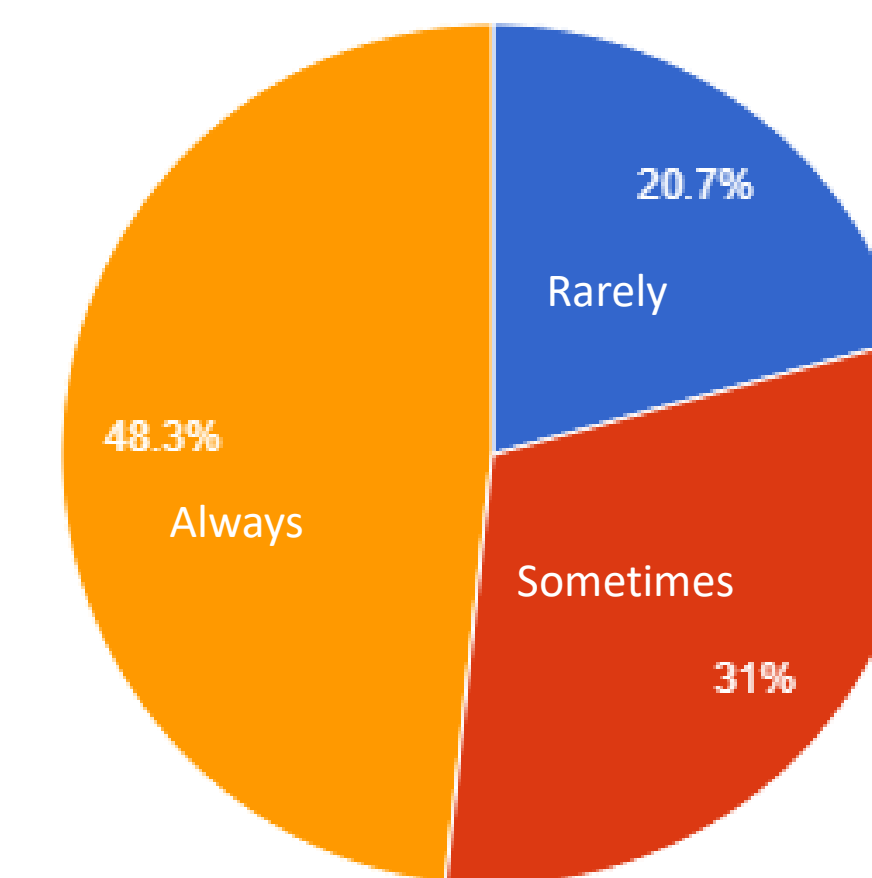
RESULTS

N = 29

How comfortable are you in performing gynecologic care on a woman with a disability?



How often do you initiate conversations about contraceptive care to women with a disability?

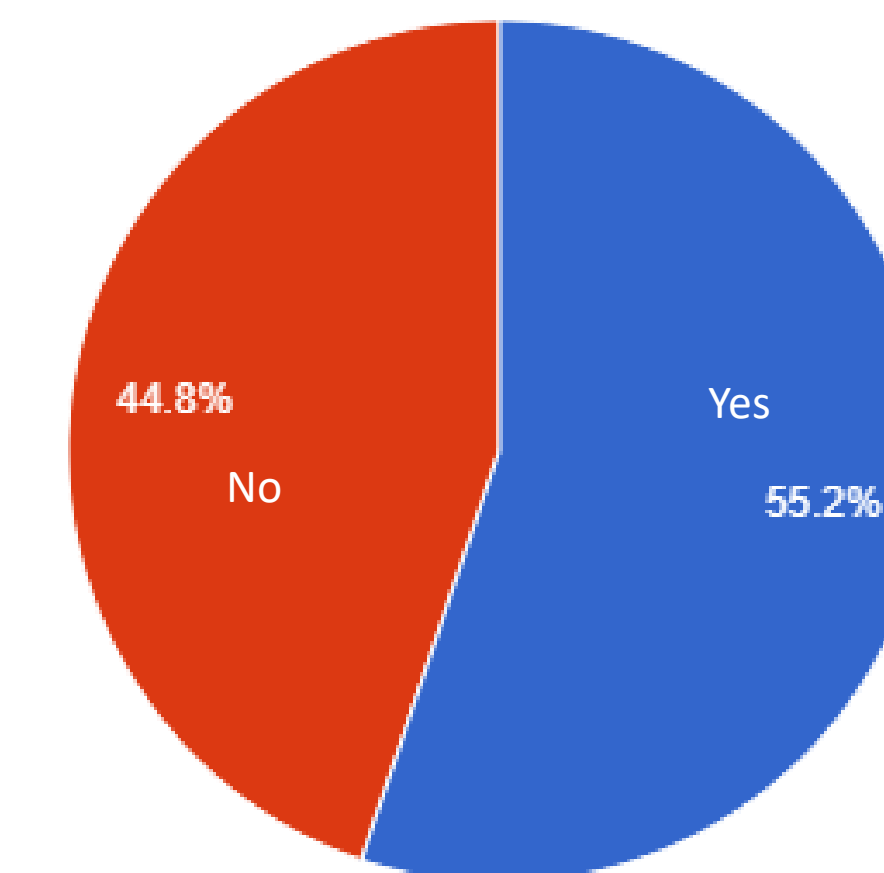


All survey responses



SCAN ME

Do you have the equipment necessary to perform gynecologic care for women with disabilities, both intellectual and physical?



What do you believe is the biggest barrier in care for women with disabilities?

"Allotting enough time for appointment in a routine schedule. Having staff know how to assist to keep patient safe in an efficient, kind manner"

"Lack of knowledge regarding equipment/needs for exam, better understanding of word choice around sexual history taking and best contraception practices for these folks"

CONCLUSION AND FURTHER DIRECTIONS

- Providers were aware that women with disabilities face disparities when receiving preventative gynecologic care, but do deserve quality care and need additional accommodations to do so
- The biggest barriers in care of women with disabilities from a provider perspective were
 - Lack of training/knowledge
 - Lack of time within an appointment to provide adequate care
 - Provider attitudes
 - Patient communication
 - Patient discomfort
 - Lack of equipment
- In the future, providers and staff should go through training and education surrounding providing preventative gynecologic care to women with disabilities to make them more comfortable when seeing these patients
- Equipment necessary should be made available to providers (e.g. small size or pediatric speculum, Hoyer lift, adjustable tables in exam rooms, etc.)
- Trainings should be available in medical school during Gynecology rotations, Gynecology and Family Medicine Residencies, and Continuing Medical Education sessions for practicing providers

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