

# People with disabilities face major hurdles accessing health care in UK

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People with disabilities in the UK face major hurdles accessing healthcare, reveals research published in the online journal *BMJ Open*. Disabled women are particularly disadvantaged, the findings show.

Around one in five (19%) [people](#) in the UK is thought to live with a disability, but little is known about their access to healthcare services and what barriers they might face.

In a bid to rectify this, the researchers analysed nearly 13,000 anonymised responses from the European Health Interview Survey (2013 and 2014) to assess use of services and any unmet healthcare need.

From among this sample, more than 5,200 adults (aged 16+) had disabilities, defined as a health problem which limited routine activities and had lasted for more than six months.

Depending on the severity of their disability, they were classified as 'mild' or 'severe.' The remaining 7,500 people in the sample were classified as having no disability.

The researchers then applied five different variables to assess unmet healthcare need over the previous 12 months. These were: long waiting list(s); distance or transport issues; cost of medical examination or treatment; cost of prescribed medicines; cost of mental healthcare.

The analysis showed that those who were severely disabled made up the largest proportion of those with an unmet healthcare need. By far the biggest obstacle they faced was a long wait for treatment, which affected more than one in four living with a severe disability.

A comparison of unmet healthcare needs in people with and without a disability, showed that those who were severely disabled were most likely to be affected, followed by those who were mildly disabled.

The largest difference in unmet healthcare needs between the two groups was generated by the cost of mental healthcare: those with a mild or severe disability were between 4.5 and more than 7 times as likely to face hurdles in accessing this as were those without a disability.

Similarly, those with a mild disability were 3.6 times, and those with a severe disability nearly 5.5 times, more likely to experience difficulties accessing healthcare because of the cost of prescribed drugs.

Transport was another barrier: people with a mild or severe disability were between 2 and more than 4 times as likely to say this hindered their access as people without a disability.

The smallest difference in unmet healthcare needs between those with and without a disability was generated by long waiting lists, although people with a mild or severe disability were still up to 2.4 times as likely to face access problems because of this.

Disabled women were the most badly affected across all five domains.

They were more than 7 times as likely to have an unmet healthcare need because of the cost of treatment, and more than 5 times as likely to face a problem because of the cost of prescribed medicines as were men with no disability.

Men without a disability were the least likely to experience access problems.

Women's lower income and caring responsibilities - factors that health services tend to ignore - may help explain this gender divide, explain the researchers.

This is an observational study, so no firm conclusions can be drawn about cause and effect. There was also no information available on the type of disability people had, while disability was self-assessed, a fact which might have introduced response bias, say the researchers.

But the study's strengths lie in the nationally representative sample and the focus on several factors that might affect healthcare access, say the researchers, who describe the findings as "alarming" on several counts.

"People with [disabilities](#) often have greater healthcare needs and therefore may need to access healthcare services more than the general population," they write. "The existence of barriers in their access may further compromise their health, leading to a vicious cycle: poorer access to healthcare can lead to even poorer health."

And they conclude: "The fact that these results come from the UK, a country with a national, public and free at the point of access [healthcare](#) system (apart from prescriptions), is particularly worrying."

**More information:** Access to healthcare for men and women with disabilities in the UK: secondary analysis of cross-sectional data, *BMJ Open* (2017). [DOI: 10.1136/bmjopen-2017-016614](https://doi.org/10.1136/bmjopen-2017-016614)

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