Module 2

Video 2: Addressing attitudinal barriers in your health service
Contributors to attitudinal barriers in health care

1. Poor knowledge and awareness by health service staff
   - Health workers lack skills and confidence when seeing patients with disability
   - Disability not included in curriculum for training of health-care workers
   - Continuing professional development (CPD) and capacity-building on disability is rare

2. Health services policies and procedures
   - Many health services do not have policies or budget allocations to support disability-inclusive practices
   - Policies around cost, timing, or duration of appointments can create barriers for people with disability
How can we address attitudinal barriers in health care?

1. Integrating training on disability into training curriculum for health workers

2. **In-service training** and **capacity-building** for health service staff at all levels (e.g. non-clinical staff)

3. Make service policies and procedures **disability inclusive**

*Health services can advocate for #1 while #2 & #3 can be addressed at the service level.*
How to implement training on disability inclusion

1. Assess current knowledge, awareness and attitudes to disability.
2. Identify the gaps in disability knowledge and awareness that need to be addressed.
3. Develop training materials and activities. Partner with DPOs or local people with disability.
How to implement training on disability inclusion

4. Deliver training. Include all staff – administration, security, cleaners, management, health workers.

5. Evaluate your disability-inclusion training.

6. Repeat on a regular basis.
Training topics to include

- **Disability concepts** – definitions, how disability impacts access to health, different impairment types and needs
- Why **disability inclusion** is important in health care
- **Disability rights**, including relevant legal and policy frameworks
- **First-hand experience** of people with disability in accessing health care
Training topics to include

- How to communicate with people with different types of disability
- Identifying disability – screening and referral processes
- Making your clinic/health programme physically accessible
Inclusive policies and procedures

All organizations should have a disability-inclusion policy

See pages 35–36 in the Disability-Inclusive Health Services Toolkit for an example
Review **health service policies** and procedures to ensure they are disability inclusive

- All areas – for example, clinical services, human resources, child protection, finance, administration
- Consider policies and practices relating to transport, payment of services, health service hours, location and scheduling of appointments
- Do these include reasonable accommodations for people with disability?
- Use checklist on page 34 of the Disability-Inclusive Health Services Toolkit to audit your service
Impact of disability-inclusive attitudes

For people with disability:
- Positive experience of accessing health care
- More likely to attend follow-ups and seek health care when needed
- Improved health and well-being
- Less demand on caregivers or other supports

For health-care workers:
- Increased confidence and satisfaction when interacting with patients with diverse needs
- Deliver a higher quality of care
- Experience reduced demand in the longer term
Up next:

**Step 5:** Activity: Replacing negative attitudes with disability-inclusive approaches

**Step 6:** Activity: Responding to attitudinal barriers at the policy level