

SEPTEMBER 2022

FACTSHEET

HEALTH CARE PROVISION FOR PERSONS WITH DISABILITY



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Introduction

The fact sheet brings to light irregularities and challenges faced by persons with disabilities (PWDs) in accessing medical healthcare services and facilities in government hospitals in Zimbabwe. When persons with disability access health care, they often experience stigma and discrimination and receive poor-quality care. There is an urgent need to scale up disability inclusion at all health system levels, mainly primary health care. ZPP is concerned that the decline in social services in the health sector has continued to infringe on the rights of persons with disabilities. Persons with disabilities are in the vulnerable groups category, yet they fail to access medical health services in most government institutions. There is no medication, and if available is out of reach for many. There is inadequate expertise when dealing with disability issues, case in point is the unavailability of sign language interpreters or resources and amenities to cater to disability issues. In line with the National Disability Policy, the Ministry of Health and Child Care has done much but not enough to ensure that persons with disability have access to free healthcare services in public health institutions, including in sexual and reproductive health and population-based public health programmes.



The issue

ZPP working with young persons with disabilities from Harare, Midlands, and Bulawayo, monitored the provision of health care for persons with disability at Parirenyatwa Group of Hospitals, Sally Mugabe Hospital, Mpilo Hospital, UBH, and other government hospitals. The exercise noted that PWDs still had no access to gender-receptive health facilities and health-related therapy and material in suitable formats at all levels (prevention, treatment, care, and support), as highlighted in the National Disability Policy (Section 3.71). On health, the National Disability Policy recommends that government ensure that persons with disabilities have access to gender-responsive healthcare services, health-related rehabilitation, and information in appropriate formats at all levels. The absence of free health care services, medicines, disability-friendly facilities, sign language interpretation, and large print and braille materials demonstrates that the Ministry of Health and Child Care has not introduced inclusive health services to cater to persons with disabilities. From the findings, persons with disabilities often face four significant barriers in the quest to access health rights:

1

Financial barrier

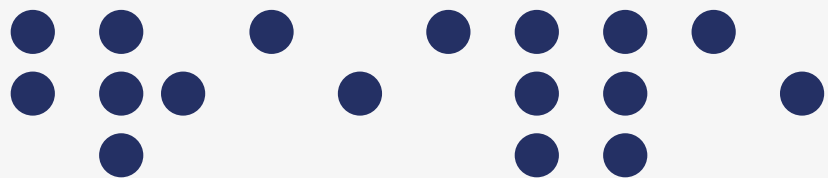
- ▶ Many persons with disability cannot afford proper health care because of the increased health care fees. Admission fees at Gweru hospital cost USD9.00 before paying to access full medical services. At Claybank private hospital, admission is USD20.00 which is not affordable for persons with disabilities.
- ▶ Persons with disability also reported being unable to afford the costs associated with traveling to health services facilities and medicine, let alone the fees to see a health service provider.



2

Communication barriers

- ▶ One of the critical barriers for persons with disability in accessing health care services is communication for those with hard of hearing. There is limited availability of written material or sign language interpreters at public health care services.
- ▶ Health care information or prescriptions are not provided in accessible formats, including Braille or large print, which presents a barrier for persons with visual impairments.
- ▶ Health care information is often presented in complicated ways or with a lot of jargon. Making health care information available in easy-to-follow formats is not a privilege but a right.



3

Physical barriers

- ▶ Health care services and institutions are often located far away from most people's homes or in areas not serviced by accessible transport options.
- ▶ Stairs to access buildings, services, and facilities located on upper floors which do not have elevator access are inaccessible for persons with physical disabilities. At Gweru hospital, most times, the elevator is not functional. The reception entrance has steps that are a barrier to persons using wheelchairs. There are also stormwater drains which are also a barrier.
- ▶ Toilets, passages, doorways, and rooms do not accommodate wheelchair users or are challenging to navigate for persons with physical impairments.
- ▶ Fixed-height furniture, including examination beds and chairs, can be difficult for persons with disability to use.

4

Attitudinal barriers

- ▶ Many healthcare workers often misconstrue disability as a disease rather than being seen as an impairment. It only becomes a disability because society makes them navigate barriers, resulting in negative attitudes by healthcare workers when assisting persons with disability.
- ▶ Persons with disabilities commonly report experiences of prejudice, stigma, and discrimination by health service providers and other staff at health facilities.
- ▶ Many service providers have limited knowledge and understanding of the rights of persons with disability and their health needs and have inadequate training and professional development about disability.
- ▶ Many health services do not have policies to accommodate the needs of people with disability. Such procedures could include allowing longer and flexible appointment times, providing outreach services, and reducing costs for persons with disability.
- ▶ Women with disability face particular barriers to sexual and reproductive health services and information. Healthcare workers often assume that women with a disability should not engage in sex acts or are unfit to be mothers.

ZPP also had an interface with persons with disabilities. They raised significant concerns about the unavailability of skilled healthcare workers trained to assist and interact with people with special needs, which resulted in harassment and ignoring of persons with disabilities when they go to hospitals for treatment.



Recommendations

In the interest of contributing towards policy implementation, ZPP recommends the Ministry of Health and Child Care to:

1

Work closely with the Ministry of Labour and Social Welfare for coordination and collaboration to ensure that persons with disabilities have access to healthcare services that are disability sensitive, including appropriate interventions and services designed to minimize physical and attitudinal barriers.

2

Train all health care professionals (students and in-service staff) on how to interact with PWDs, respecting the human rights of all citizens regardless, dignity, and reasonable accommodation for persons with disabilities.

3

Ensure sign language interpretation services are available in all public health care facilities. Some healthcare students and professionals are trained to use Sign Language.

4

The curriculum of all health care students and allied health professional courses must include the subject of disability as an examinable subject, including ensuring accessible information and communication and the rights of persons with disabilities in health care settings.



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