

Addressing the intersectionality of disability and women's health through student-led interprofessional service learning

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Background

Women with disabilities make up a large percentage of the people and patients in this country, and the number is growing:

- **36 million** women in the US have disabilities, and the number is increasing.
- **44%** of those aged 65+ are living with a disability.
- **390,600** of the 3,546,300 residents in CT identified as having a disability.

Women with disabilities are at greater risk for developing many health conditions, including diabetes, obesity and high blood pressure. Additionally, they face unique barriers in accessing healthcare such as:

- Women with disabilities **get screened less** for breast cancer less often.
- Screening equipment may be unaccommodating.
- Women with disabilities are **2x more** likely to experience violent crimes than able-bodied women.
- Women with disabilities are at **higher risk** for challenges with their pregnancy (e.g. blood clots, reduced sensation of fetal movements, stigma).

Objectives

- Explore the unique experiences of those living with disabilities in the US reproductive healthcare system.
- Explore barriers and facilitators to gynecologic and sexual healthcare access.
- Pursue various advocacy initiatives, and evaluate how to create an intersectional approach to supporting individuals with disabilities.

Methods

Clinical skills development:
breast cancer screening for
patients with disabilities

Clinical skills development:
Parenting and pregnancy for people with disabilities

Community engagement:
Legislative advocacy session through
PPVotes

Guest Speaker: Dr. DiVietro
presentation on sexual health
and IPV for patients with
disabilities

Service learning:
Assembled over 500 safe sex kits

Final Women's Health IG
Meeting: reflections

First Women's Health IG
Meeting: year-planning and
role assignment

Doctors with disabilities panel
through UConn DIG

IG Kickoff
Meeting

October January April

Results

The group heard from an expert speaker from Connecticut Children's Medical Center, Dr. Susan DiVietro, who came to talk about intimate partner violence, and how it uniquely impacts female patients, patients with disabilities, LGBTQ+ patients, and BIPOC patients. Some interesting things the group discussed regarding how IPV impacts people with disabilities:

- **70%** of people with disabilities experiences some form of abuse.
- Police are less likely to respond to complaints, and **70-85%** of cases go unreported.
- **99%** of IPV in the United States is financial abuse (women with disabilities are particularly vulnerable to this).

Two skills-based training sessions were held on:

- **Breast cancer screening**
 - Discussed safety considerations, screening disparities, communication and positioning of patients.
- **Pregnancy and parenthood**
 - Discussed increased risk for complications such as blood clots, and decreased sensation of fetal movements.

Two service learning opportunities were organized:

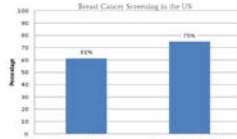
- **Legislative advocacy workshop** with Planned Parenthood Votes
 - Discussed upcoming reproductive health/rights bills in the CT legislature, opportunities to testify.
- **Service opportunity at Planned Parenthood** of Southern New England.
 - More than 500 safe sex kits were assembled by students.

LIFETIME EXPERIENCE

People who have experienced violence since they were 15.



Breast Cancer Screening in the US



Discussion

Each of these trainings introduced valuable new knowledge and employable skills conducive to create a more equitable space for patients with disabilities to access healthcare, not only as future providers, but as current advocates.

Feedback from group members highlighted the strengths of this program, including the creation of a safe space to discuss sensitive issues, and the provision of opportunities to facilitate the development of real life skills to provide inclusive care, and impactful outreach opportunities, as well as strong participation and investment, both of time and energy, of each group member. Some reflections from students included:

"As a team, I think we had great participation in discussions and created a safe environment to share thoughts and ideas."

"This group was an incredible outlet to further our understanding of the intersectionality of accessing reproductive/gynecological care as a person with a disability. I learned so much from the content and the experience!"

Some limitations included scheduling meeting times that were accommodating across all disciplines' schools.

Conclusion

This opportunity provided students with new perspectives and engaging service opportunities, all while approaching and learning through an interprofessional lens. The student led nature of the interest group allowed for meaningful and unique discussions with high engagement. Due to this opportunity, these students are more aware of the issues and intersectionality of women with disabilities, and are thus better suited to serve and advocate for their future patients.

References

All citations can be viewed here:



Acknowledgments

This group would like to acknowledge our mentors Candice Quarella, MD, Maggie Manning, PsyD, Susan DiVietro, PhD, and the UST staff for their support throughout this year.