

BACKGROUND

Women with neurological disabilities face persistent barriers in accessing adequate gynecological, obstetric, and sexual health care.

BARRIERS LEADING TO HEALTH DISPARITIES

- Structural Inaccessibility**
Architectural and equipment barriers limit access to care
 - Lack of Professional Training**
Healthcare staff unprepared for disability-inclusive care
 - Informational Deficits**
Limited counseling and poor patient education
- These factors contribute to disparities in preventive screenings and reproductive health services.

Study Aim

The aim of this study was to assess current care provision in a specialized spinal unit offering autonomic dysfunction services. The goal was to identify specific gaps in care and propose targeted strategies to improve gynecological and sexual health services for women with neurological disabilities.

MATERIALS & METHODS

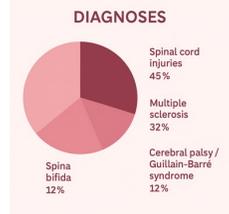


VALIDITY AND QUALITY
The survey was reviewed by a multidisciplinary team of healthcare professionals with expertise in autonomic dysfunction
Objective. ensure clarity/ reduce bias

RESULTS

60 women participated in the study, average age 45

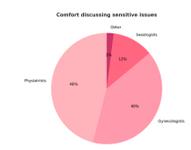
- 40%** had never had a Pap smear
- 20%** had never had a mammogram.



70% reported architectural obstacles limiting access to care. Among those without a Pap test, 98% cited inaccessible examination tables as the main barrier.

- 80% felt poorly informed about their sexuality, and **only 5%** had received information on STIs, fertility, or pregnancy planning.
- **84%** reported sexual dysfunctions

When asked with whom they would feel comfortable discussing sexual well being →



Interestingly, **30%** first raised the issue with a nurse.

INTERPRETATION OF RESULTS

These findings highlight the **urgent need to:**

- embed sexual and reproductive health into rehabilitation programs
- remove access barriers
- adopt patient-centered and interdisciplinary care models, that support the sexual rights and wellbeing of women with disabilities.

CONCLUSION

To address these disparities, we recommended three key strategies :

- 1. Training healthcare professionals** to deliver competent, inclusive care
- 2. Creating barrier-free, accessible care pathways**
- 3. Utilizing telemedicine tools** to extend support and continuity of care.

BRIDGING THE GAP: A CROSS-SECTIONAL STUDY ON GYNECOLOGICAL, OBSTETRIC, AND SEXUAL HEALTH NEEDS IN WOMEN WITH NEUROLOGICAL DISABILITIES IN ITALY

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