

Review Article

# Clinical preventive service use disparities among subgroups of people with disabilities: A scoping review

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## Abstract

**Background:** Recommended use of clinical preventive services (CPS) reduces morbidity and mortality from preventable conditions. Disparities in CPS utilization between individuals with and without disabilities have been shown, but a greater understanding of the disability subpopulations with lowest utilization is needed to better inform research, policy, and practice.

**Objective:** The objective was to conduct a scoping review of the literature to identify relevant studies on disparities in receipt of CPS among subgroups of individuals with disabilities.

**Methods:** In July 2010, electronic and manual literature searches were conducted for years 2000–2009. Review for inclusion/exclusion and data analysis occurred in 2010 and 2011. In 2012, the review was updated to cover abstracts published in 2010 and 2011. Identified abstracts, and then full-text articles of included abstracts, were reviewed according to inclusion/exclusion criteria by multiple reviewers. For articles meeting all criteria, two reviewers performed independent data extraction. A gap analysis was performed to identify areas of concentration and gaps in the literature.

**Results:** Twenty-seven articles met inclusion criteria for this review. Studies varied substantially in sample composition and research methods. CPS examined most often were cervical cancer screening (14 studies) and mammography (13 studies). Potential disparity factors studied most often were disability factors (i.e., disabling condition in 12 studies, disability severity in 10 studies). Stratification of CPS by disparity factors revealed substantial gaps in the literature.

**Conclusions:** The literature gaps point to a need for high quality research on access disparities among subgroups of individuals with disabilities. © 2014 Elsevier Inc. All rights reserved.

**Keywords:** Scoping review; Clinical preventive services; Disparity; Disability; Health

The vision of *Healthy People 2020* is a society where all people live long, healthy lives.<sup>1</sup> To attain this vision, the *Healthy People* framework advocates for implementation

of evidence-based preventive strategies, including clinical preventive services (CPS). Access to CPS – which include routinely offered screenings, diagnostic tests, physician

The results of the review for years 2000–2009 were presented at the American Public Health Association Annual Meeting in 2011. The results of the review for years 2010–2011 were presented at the 2013 Research and Training Center on Community Living Bridging Meeting. The combined results for 2000–2011 have not been presented previously.

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counseling, and immunizations — is of critical importance, because receipt of these services prevent disease or detect diseases in early stages.

Additionally, *Healthy People 2020* has an overarching goal to achieve health equity, eliminate disparities, and improve the health of all groups.<sup>1</sup> Individuals with various disabilities face a range of health and health care access disparities compared to those without disabilities, including decreased access to preventive services.<sup>2–13</sup> Individuals with disabilities make up nearly 19% of the U.S. population or approximately 56.7 million Americans, according to the U.S. Census Bureau.<sup>14</sup> The large size of this population makes access disparities for this group an important public health problem.

To more fully understand health disparities experienced by individuals with disabilities, populations most at risk must be identified. While disability (including functional limitation itself, accessibility issues, and other factors including discrimination or disablement) is a risk factor for unequal access to many services, people with disabilities are not immune to other phenomena that produce disparity. It is unlikely, for example, that reduced access to health care is evenly distributed throughout the varied disability populations. Factors related to health care access disparities among socially distinct vulnerable populations such as underserved racial and ethnic groups, low socioeconomic groups, and rural residents<sup>15</sup> are also expected to affect access for people with disabilities. In addition to disparities between people with and without disabilities, therefore, one might expect to observe disparities within the population of individuals with disabilities for individuals who are members of underserved racial and ethnic groups, of low income or education, rural dwelling, uninsured, and lacking a usual source of health care.

Health care access disparities related to certain disability factors are also expected. The disability population includes substantial diversity in disability type and severity. Groups with different disability characteristics experience a range of environmental and systems-level barriers to health care, such as inaccessible facilities or the absence of policies on alternative communication,<sup>16</sup> which likely translate into larger disparities for specific subpopulations. Research has indicated that people with intellectual disabilities<sup>17,18</sup> and people with greater degree of functional limitation experience substantial barriers to health care,<sup>19</sup> so these groups would be expected to experience disparities in health care utilization in greater proportions than other disability subgroups.

A better understanding of the prevalence and dimensionality of disparities among particular subgroups of the disability population is needed. This will facilitate development of evidence-based policies and programs targeted to individuals with the greatest degree of need. While reviews have examined disparities between people with and without disabilities,<sup>13</sup> no previous review has examined disability subgroup differences.

The scoping review is a useful methodology for assessing the breadth and depth of literature on a topic.<sup>20,21</sup> Scoping

reviews use systematic methods of evidence acquisition to ‘map’ the literature in an area of interest.<sup>21,22</sup> Scoping studies may be undertaken for various purposes, from determining the feasibility of conducting a full systematic review to identifying gaps in the literature.<sup>20,21</sup> These reviews are similar to systematic reviews in that they use systematic methods to locate and assess literature, but they differ from systematic reviews in that they have broader key questions, include research with a range of study designs, and do not assess quality of included studies.<sup>21</sup>

The current study conducted a scoping review of the literature to identify relevant studies on disparities in receipt of CPS among subgroups of individuals with disabilities, defined by individual, environmental, and system-level characteristics. The purpose of this scoping review was to highlight research gaps and concentrations in the published literature. Results will describe population subgroups that have been studied, CPS of focus in the literature, potential disparity factors that have been examined, and significance of those findings. Because this is a broad scoping review, the summary of the significance of findings from included studies is intended as an initial analysis, highlighting areas where disparities may exist that may therefore warrant further research.

## Methods

A scoping review was conducted. The stages of a scoping review, as described by Arksey and O’Malley,<sup>21</sup> are 1) identifying the research question (and clearly defining key terms), 2) identifying relevant studies, 3) selecting studies according to inclusion and exclusion criteria, 4) extracting data from each study, 5) collating, summarizing, and reporting results (focusing on the breadth of the literature), and 6) consultation (optional). Rigorous systematic methods were used in the present study for evidence acquisition and study inclusion. These early stages of review, during which scoping and systematic methods align, were informed by guidelines outlined by Petticrew and Roberts,<sup>22</sup> the Cochrane Collaboration,<sup>23</sup> and the PRISMA statement on reporting systematic reviews.<sup>24</sup>

The Expert Panel on Health Disparities among Individuals with Disabilities was created to oversee the scoping review and provide consultation. The Expert Panel was composed of seven scholars from various universities and the Centers for Disease Control and Prevention. Its members were experts in disability and health services or health disparities research. The Expert Panel guided formation of the key question, definitions of concepts relevant to the question, and inclusion and exclusion criteria for the review. They also oversaw extraction and interpreted results. The key question guiding the review was: What English-language studies, conducted in the U.S. and presenting original analyses, have been published in the peer-reviewed literature from 2000 to 2009 that examine CPS use

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