

ACCESS TO REPRODUCTIVE OPTIONS FOR WOMEN WITH INTELLECTUAL DISABILITIES

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Background: Women with intellectual disabilities have long been recognized as a disparity population in need of public health interventions to increase access to care. However, the reproductive health care needs of this population remains understudied, with conversations related to sexual health often considered taboo. Little is known about the reproductive health care needs and experiences of women with ID, and we lack data regarding the specific barriers to and facilitators of reproductive health care for this population.

Methods: This participatory, qualitative study explores the reproductive health care experiences and needs of women with ID. We conducted interviews with self-advocates, as well as a photo voice project. Photo voice is a participatory research method where participants are given cameras and become co-researchers on the project as they photographically document their perspectives. Data was analyzed using grounded coded theory.

Results: Important themes include lack of access, information and privacy as barriers to care, lack of conversation with physicians/health care providers, varying levels of desire for romantic and sexual relationships, importance of belonging and acceptance, and engagement with womanhood.

Discussion: This research is preliminary, but shows a need for comprehensive research and advocacy related to reproductive health care access and shared decision making surrounding sexual health. In addition, women with ID often received shame-based or minimal sexual health education, and were not aware of their options regarding contraception, an important barrier.

Implications: These results suggest that women with intellectual disabilities need comprehensive sexual health education and non-judgmental information about their contraceptive options and sexual health. Many women with ID are sexually active, though this information was not readily shared with health care providers. Therefore, health care providers should give women with ID accessible counseling regarding their contraceptive options, and ask about contraceptive needs.