ABSTRACT

Introduction

Physical Disability is a major health and socioeconomic problem. Global burden of disability is increasing. Persons with Physical Disabilities (PWDs) attend routine hospital ambulatory services and the needs, context and problems are diverse and equity shall be ensured.

Objective

To assess the readiness of providing ambulatory curative care services to PWDs attending selected government healthcare institutions in Colombo district was the objective of this study.

Methodology

The study was conducted at outpatient setting in selected hospitals (divisional to district general) hospitals and consisted of a cross sectional descriptive component and a qualitative component.

Results

Majority of PWDs belonged to 57-69 yrs age group (33.8%) and mean income of Rs. 12,697.30 (SD 10,092). There was poor family support in transport and medical related components. A 60.8% (n=90) had multiple disabilities in which Lower limb disabilities were the commonest (27.7%, n= 41). Co-existing non mobility disabilities were high and visual disabilities were the commonest

among them especially in 57-69 age group (20.3%). Most had disbailities due to acquired reasons mainly by accidents (28.4%, n=21). Lack of exposure to physotherapy and psychological support were significant (38.5%, n=57).

The mean readiness score (MRS) was higher in PWDs with multiple disabilities (9.3, 95% CI 8.5-12.1), in the category with acquired reason for disability (13.3, 95% CI 12.1-14.5) and observed affecting daily living. The highest MRS was given for the accessibility component (17.08, SD 5.8). overall MRS had significance in staff who were aware of a national policy and available hospital plan. The FGDs developed themes describing existing situation for PWDs, its gravity, taken measures, challenges and way forward.

Conclusion

The PWDs are important component in the hospital amubulatory settings in Colombo District. Multiple mobility and non-mobility physical disabilities and shown gaps in certain rehabilitation components. Variations in readiness status were observed with gaps in institutional plan and special training for staff.

Recommendations

More insight and recognition on PWDs concerns is required at ambulatory care setting. Identified factors in readiness dimensions require improvements based on an institutional plan with competency development in staff.

Key words:

Physical Disability, Ambulatory, Outpatient, Readiness, Healthcare