

National Accessibility Audit of Primary Health Care Facilities in Brazil

Location & scale

Brazil; National

Type of disability

All type of disabilities

Involved actors

- Brazilian Ministry of Health
- Researchers from 11 universities
- Primary health care facilities

1. Description

In 2012, Brazil undertook the first national assessment of the accessibility of 38 812 primary healthcare centres of the public health system across 5.543 cities (99% of Brazilian municipalities).

The Ministry of Health (MoH) designed an accessibility questionnaire in consultation with experts. The questionnaire was based on the National Policy for Persons with Disabilities, the Primary Care Policy and the principles of the Unified Health System.

Researchers from 11 universities received 20 hours of training on primary care, the accessibility questionnaire and fieldwork issues. The trained researchers used the questionnaire on-site to assess the accessibility of healthcare facilities for people with disabilities, including:

- Exterior building accessibility (e.g., sidewalks, carpets, floors, ramps, handrails, entrance doors, etc.)
- Internal building accessibility (e.g., toilets, grab bars, corridors, waiting rooms, etc.)
- Information accessibility (e.g., international disability symbols, Braille, use of signage, etc.)
- Availability of healthcare staff trained in disability issues.

The assessments were repeated in 2015 and 2018 in a subset of health facilities covered in 2012. The data collected are publicly available online.

2. Origin

- Accessibility of healthcare facilities is rarely audited even when it is a major barrier for people with disabilities.
- In 2011, Brazil introduced the National Program for Access and Quality Improvement of Primary Care (PMAQ-AB) under the scope of the National Primary Care Policy.

3. Impact

- Some studies have shown an improvement in the physical infrastructure of primary health units. For example: the accessibility of health facilities for wheelchair users has improved from 34% in 2012 to 54% in 2015 and 68% in 2018.

4. Critical success factors

- Strong political commitment of the Ministry of Health with accessibility, and data collection over the last decades.

5. Lessons learned

- Large-scale accessibility audits are feasible.
- The general accessibility of healthcare facilities needs to be improved, especially for people with visual or hearing impairments.
- The accessibility of healthcare facilities varies according to the size of municipalities and regions in Brazil.
- Remote areas, such as those in the Amazon regions, found it difficult to join and participate in the PMAQ.
- The northern regions have the most precarious primary health units and need more investment than the PMAQ offered.
- Accessibility of equipment and transportation must also be assessed.

6. Limitations

- People with disabilities were not involved in the design and implementation of the accessibility audit.
- Changes in primary care policies and funding mechanisms in the previous federal administration led to the discontinuation of PMAQ in 2018.

Sources & links

Pinto, A.; Köptcke, L.S.; David, R.; Kuper, H. A National Accessibility Audit of Primary Health Care Facilities in Brazil—Are People with Disabilities Being Denied Their Right to Health?. *Int. J. Environ. Res. Public Health* **2021**, *18*, 2953. <https://doi.org/10.3390/ijerph18062953>

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