Inequalities and Multiple Discrimination in Access to Health Care

Article 35 of the Charter of Fundamental Rights of the European Union guarantees to everyone the right of access to preventive health care and the right to benefit from medical treatment under the conditions established by national laws and practices.

Did you know?

In August 2010, a general practitioner in a small town in Hesse, Germany decided not to treat Muslim women with a headscarf, patients without basic German skills and ‘Islamic families with more than five children’. These new rules were presented in his medical practice.

Women with disabilities experience unequal access to reproductive health care. For example, health professionals do not always talk to the women themselves, but with their carers. Reproductive rights may also be denied – there is evidence of women with intellectual and psychosocial disabilities being victims of forced sterilisation in some EU countries.

These are examples of multiple discrimination in access to health care. Multiple discrimination in a broad sense describes a situation where discrimination takes place on the basis of more than one ground.

Uneven access to health care

Evidence has shown that both how healthy a person is and whether they have access to health care, can depend heavily on the class, ethnicity, age, gender, disability and migration status of that individual.

Elderly people from minority ethnic backgrounds and women and children with disabilities are examples of vulnerable groups that are particularly susceptible to unequal treatment in access to health care.

Uneven legal protection from discrimination

The European Union is committed to fighting discrimination on grounds of gender, age, race and ethnic origin, religion, disability and sexual orientation.

EU-level protection from discrimination on each of these grounds currently only exists in the employment context, and not, for example, in access to health care.

Protection from multiple discrimination is not provided at EU level, nor, in the majority of cases, at national level.

The situation on the ground

Against this background, the European Union Agency for Fundamental Rights (FRA) has launched a study on inequality, multiple and intersectional discrimination in access to health care in the EU.

Based on the findings of the research, the FRA will formulate advice to the EU institutions and to EU Member States about how to tackle multiple discrimination in access to health care in the EU.

The research will contribute to discussions on the adoption of the proposed EU “horizontal directive,” a piece of legislation that would extend protection from discrimination on the grounds of age, disability, sexual orientation and religion or belief beyond the area of employment.
Asking health professionals and service users

In order to gain a better understanding of the particular vulnerabilities of persons at the intersection of ethnic origin, age and gender in access to health care, fieldwork will be carried out in five EU-Member States:

- Austria,
- the Czech Republic,
- Italy,
- Sweden and
- the United Kingdom.

Interviews will be conducted with 125 health professionals – such as doctors, nurses and other care workers – and with policy-makers.

Interviews will also be conducted with 180 health service-users susceptible to multiple or intersectional discrimination, including persons with disabilities.

Mapping law and policy developments

The research will cover the analysis of existing literature and statistical evidence about inequalities in access to health care, including the legal context and a mapping of policy initiatives in the five EU Member States and at the EU level.

The research will look particularly at health conditions that have a disproportionate effect on individuals who may face discrimination at the intersection of the grounds of age, ethnic origin and gender, such as diabetes and cancer.

Identifying barriers to accessing health care and initiatives that effectively remove them

The specific objectives of the study are to:

1. Identify barriers of access to health care services, that is the ease with which health care can be obtained at the intersection of gender, age and ethnic origin;

2. Map policies in Member States designed to improve health services and quality of health for persons belonging to vulnerable groups at the intersection of gender, age and ethnic origin;

3. Identify the ways in which health professionals address the care needs of persons belonging to vulnerable groups at the intersection of gender, age and ethnic origin.

The findings of the study

The results of the desk research and the qualitative fieldwork will be analysed and presented in a comparative report and five thematic factsheets for each of the Member States where fieldwork will take place. A factsheet analysing the situation at EU level will also be published.

The study team

Project Coordination: Middlesex University UK

Project Partners: International Centre for Migration Policy Development (ICMPD) and Research Institute of the Red Cross (case study Austria), Gender Studies o.p.s (case study Czech Republic), the Research and Development Centre for Care of Older People (FOU äldre nor, case study Sweden) and the University of Bologna (case study Italy)

For more information
Please visit the FRA website: www.fra.europa.eu
Or contact: [insert name and email of national team leader of the project]