Chapter 36
The Reality of Accessibility in the Public Health Systems

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ABSTRACT
This chapter deals with accessibility, a relevant and important concept for every citizen in the improvement of their quality of life in any environment or daily situation. Specifically, an empirical study about accessibility in the public health centers of a Basic Health Area (BHA) of Jaén is carried out. From this study, accessibility deficiencies in health buildings are revealed, and explicit proposals are provided with the aim of improving accessibility in different scopes such as information and communications. The improvement plans based on the use of Technology, Information, and Communication (TIC) tools help sensory disabled users that attend to the Health Center.

INTRODUCTION
Accessibility is a term related to the facility of people’s access to any place, in other words, we can talk about accessibility in urban planning, transport, buildings and housing, communications and in any situation, from going to a theatre with some type of disability physical, mental or sensorial, or just being old, or a foreigner person who does not understand the language completely. Accessibility is a basic characteristic of the built environment. It is the condition that makes it possible to arrive, enter, go out, and use the houses, shops, theatres, parks and workplaces. Accessibility allows people to participate in the social and economic activities for which the built environment has been designed (European Union, 1996).

It is evident that, where there is a lack of accessibility as, for example, due to physical
barriers, that people may suffer a situation of marginalization and, logically, a loss of quality of life and opportunities with respect to the others, disabled people suffering this situation in a higher degree. In some cases, the lack of accessibility can lead to situations of stigmatization, vulnerability and social exclusion, in addition to psychological problems for those affected (Helios Expert Group, 1995).

There exist technical aids to promote accessibility and suit individual needs. This means that a place with good accessibility has to be able to receive all kinds of people without any prejudice, discrimination or difficulty for anyone.

What is the use of a comprehensive service portfolio and an ideal health center, with excellent professionals, when it is not possible to provide a quality service to a person with a hearing impairment or that a person with a physical disability cannot gain access to the doctor’s consulting room with his/her wheelchair unless he/she is constantly helped to get round obstacles existing in the way.

The term accessibility is nowadays accompanied by new concepts such as Universal Design (UD), launched by the North Carolina State University in USA (The Center for Universal Design, 1997), that understands the design of environments and products which are suitable for the use of more people without adaptations or very specialized designs. The basic principles of UD are: flexible use for everyone; flexibility in the use according to individual skills; simple and intuitive use; information perceptible to everyone; tolerance for error or bad use, minimizing damage; little physical effort required and size and space suitable for approaching, handling and use of all users.

Lately, the accessibility concept has been applied in Europe under the framework of the European project “INCLUDE”, which has been channeled in Spain through the CEAPAT (State Reference Center for Personal Autonomy and Technical Aids: http://www.ceapat.org). Note that INCLUDE is a Project promoted by the European Union, whose objective is to provide supports that guarantee the accessibility of the equipment and Telematics services.

In our opinion, we believe that knowledge of the reality of the accessibility levels for users of the Public Health System in Andalusia is important, in particular with respect to the Decree 293/2009 of July 7, which approves the regulation of the standards for accessibility in infrastructure, town planning, building and transport in Andalusia.

Precisely, our purpose in this chapter has been to study the accessibility in the public centers of a Basic Health Area (BHA) in the city of Jaén, a provincial capital of Andalusia, in the south of Spain. In this study, we aim to observe if a large number of items elaborated from the Andalusia current laws, are fulfilled or not and provide a set of conclusions, proposals and suggestions about accessibility in health buildings, without prejudice to any other actions, contributions and proposals to a social and administrative level, and all the above in a constructive and committed way with the veracity of the data.

THE CONCEPT OF ACCESSIBILITY

By 1974, at the “Expert Group Meeting on Barrier-Free Design” held in New York City, we find the first background to the interest in removing physical obstacles for people with disabilities so that they can participate fully in the life of society.

Here the first requirements were established in the training of architects, engineers, urban planners and landscape architects about the significance of accessibility and the design for all and hence, the first documents about the elimination of physical barriers appeared.

From this moment, tearing the barriers down was not suggested but building without barriers which led to the concepts of accessibility to public buildings, transport, etc. All of this has been brought up in the World Program of Action (WPA) Concerning Disabled Persons that was