



Evidence of the impacts on and risks to people with disabilities from the COVID-19 pandemic, May – July 2020

- People with disabilities are at greater risk of contracting COVID-19 due to barriers such as inaccessible
 public health information, inaccessible WASH facilities, unfeasible social distancing and self-isolation
 measures, and living in institutions in close proximity to large numbers of people.
- People with disabilities are also at greater risk of developing serious illness or dying from COVID-19, in some cases due to underlying health conditions, but also because of barriers such as physically inaccessible healthcare facilities, a lack of capacity amongst health workers to treat people with disabilities, and stigma and discrimination against people with disabilities in healthcare.
 - International evidence indicates that people in institutional settings (i.e. care homes, group homes for people with disabilities, and psychiatric wards) are experiencing the highest rates of infection and mortality from COVID-19.
 - Data from the UK shows that <u>22,000 people with disabilities died from COVID-19 in the UK from 2 March</u> to <u>15 May</u>, making up two-thirds of all deaths. Women with disabilities were more than 11 times more likely to die from COVID-19 than women without disabilities.
 - Research from the USA showed that people with intellectual or developmental disabilities, particularly autism, died after contracting COVID-19 at nearly twice the rate of people without intellectual or developmental disabilities.
 - Nepal: A rapid assessment conducted in April by Humanity & Inclusion (HI) with people with disabilities found that almost half of respondents had no protective materials such as masks or soap.
 - Philippines: A 19 year old man with autism died in Manila after three hospitals refused to accommodate him during the pandemic.

Examples of government responses:

- <u>Tanzania</u>: Sense International reported that the government in Tanzania has established a platform for DPOs to share information with each other and across government and to link beneficiaries to services.
- <u>Canada</u>: The COVID-19 Disability Advisory Group was established with the participation of persons with disabilities and their representative organisations to advise the government on disability-specific issues, challenges and systemic gaps and strategies, measures and actions to be taken.
- <u>Uganda:</u> The Ministry of Gender, Labour and Social Development and the office of the Prime Minister
 are part of a Persons with Specific Needs sub working group, coordinating with UN agencies, NGOs,
 DPOs to discuss and address issues relevant to refugees with specific needs, particularly people with
 disabilities and older people.
- <u>Switzerland and Spain</u>: Given the high risk of contracting COVID-19 in social care institutions, people
 with disabilities in institutions were moved out to live with their families where possible.
- <u>Colombia</u> and <u>Argentina</u>: People with disabilities have been prioritised for early release from prisons to mitigate the risk of them contracting COVID-19.
- Information about COVID-19 is still not being provided in accessible formats in many countries.
 People with disabilities are also experiencing barriers to communication more generally, particularly people with hearing impairments:
 - Kenya, India: People with hearing impairments have reported that the masks being widely distributed are
 a significant barrier to communication for people who rely on lip-reading for communication. In some
 countries the use of such masks is compulsory.
 - India: Research with 82 women with disabilities found that 91% of participants, and all participants who
 identified as deaf, deafblind or having hearing impairments, experienced barriers to accessing
 information. Blind participants reported that not all applications and websites were accessible.
 - <u>Philippines:</u> An HI survey of youth with disabilities found that half of respondents required more accessible information about COVID-19.
 - Zambia: Disabled people's organisations (DPOs) are reporting that public communications are still not
 accessible to people with disabilities, and not enough information is not being provided.

Examples of government responses:

- Many governments are providing public health information in accessible formats including through the use of Braille, sign language interpreters, and easy read formats.
- Philippines: The Commission on Human Rights has published information to support health agencies





- tailor public messages for vulnerable groups including children and people with disabilities.
- Middle East and North Africa region: Some governments in the region have provided free internet services to citizens, which DPOs have highlighted as an enabler for people with disabilities to openly communicate with each other and with DPOs, even if they have lost income or financial support.
- Pre-existing mental health conditions and psychosocial disabilities are being exacerbated, and the
 risk of suicide may be increasing during the pandemic. COVID-19 is also increasingly associated with
 mental and neurological manifestations including delirium, anxiety, sleep disorders and depression.
 - Prior to the pandemic it was recognised that <u>one in four people will develop a mental health condition in their lifetime</u> and that common mental health conditions such as depression and anxiety are approximately twice as common in women.
 - USA: A <u>study</u> from the Well Being Trust estimates that COVID-19 may lead to 27,644 to 154,037 additional U.S. deaths of despair, as mass unemployment, social isolation, depression and anxiety drive increases in suicides and drug overdoses.
 - <u>China:</u> A survey of 285 residents in Wuhan one month after the first COVID-19 outbreak found that 7% of respondents had Post Traumatic Stress (PTS) symptoms, and women reported significantly higher PTS symptoms of re-experiencing trauma, negative alterations in cognition or mood and hyper-arousal.
 - <u>UK</u>: Women with pre-existing mental health conditions are reporting that their conditions are being made worse by the lockdown; for example, women report: "I am having flashbacks from the past"; "the voices have come back even though I know I am safe at the moment" (from a woman in prison); "it is really difficult managing my OCD with all this handwashing I have to do".
 - <u>UK</u>: A study found that child suicide deaths may have increased during the first 56 days of lockdown, and that children with autism or attention deficit hyperactivity disorder (ADHD) may be at particular risk, although the study noted that the numbers of deaths were too small to reach definitive conclusions. In Kent, five children with special educational needs (including children with autism and ADHD) died by suicide in five months over the lockdown period. In comparison, ordinarily 2 to 3 children die by suicide over 12 months.

Examples of government responses:

- <u>China</u>, <u>India</u> and <u>Australia</u> are providing helplines and tele-consultations for mental health. The National Institute of Mental Health and Neurosciences in India is offering online training for thousands of doctors, counsellors, nurses and other professionals to provide psychosocial support during the pandemic.
- UK: Virtual mental health consultation platforms were introduced for young people during the COVID-19 lockdown. In the first month of the lockdown 5000 virtual consultations were carried out via the Attend Anywhere platform, and, as of June 2020, 730 young people had registered for the e-Clinics app.

People with disabilities are experiencing barriers to accessing healthcare, social services, food and essential items.

- Kenya: People with disabilities have reported they are struggling to access food and other essential items, to complete household chores and to access public transport because their personal assistants are not available.
- Jordan: A survey by HI shows that 88% of survey respondents with a physical impairment and current medical needs reported that they could not go to the hospital for regular checks or additional medical needs due to the pandemic. 79% of households of people with disabilities have not received external support in the last 3 months.
- UK: Qualitative research found that women with disabilities from Black, Asian and other minority ethnic groups are experiencing multiple forms of discrimination when trying to access healthcare. Some women with disabilities said they were less willing to register as shielding or seek medical help due to fears about rationing of treatment and 'do not resuscitate' orders. One woman reported that she fears she would not be safe in hospital because most NHS staff are not trained in how to use her equipment or how to safely move her, but COVID-19 guidance at the time of the research did not allow for someone to accompany her in hospital.
- India: Research with 82 women with disabilities found that many of them are anxious that quarantine
 centres and health facilities are inaccessible, and that the use of PPE creates barriers to women with
 hearing impairments who rely on lip reading to communicate. Some women reported that essential
 health services unrelated to COVID-19 are now not available.
- Nepal: In a rapid assessment conducted in April by HI with people with disabilities, 32% of respondents mentioned that services usually provided by caregivers had to stop because of the lockdown, and in





- 50% of cases caregivers could not be replaced.
- Netherlands: A survey of 532 people (80% people with disabilities and 20% people completing the survey on behalf of a person with disabilities) conducted in April found that 60% of respondents had their professional care reduced, changed or stopped during the pandemic.
- Pakistan: One woman with paralysis reported that when Pakistan went in to lockdown the residents of the rehab facility where she lived were asked by management to leave to prevent the spread of COVID-19, but she had nowhere else to go and relied on an NGO to find accommodation for her.

Examples of government responses:

- San Marino Republic: The Bioethics Committee of the San Marino Republic produced guidance on triage in health care during the pandemic, which explicitly prohibits discrimination on the basis of disability, age, gender, or social or ethnic affiliation.
- New Zealand: The government developed a Health and Disability System Response Plan that included actions to encourage public health services to recognise and address disability access issues and to establish a workforce and coordination system that can provide surge capacity and respond where there is ill health within the disability services workforce.
- <u>UAE</u>: The United Arab Emirates has launched a national program to test persons with disabilities for COVID-19 in their homes. As of mid-April they had conducted 650,000 COVID-19 tests of persons with disabilities
- <u>Luxembourg, Algeria, Egypt, Norway, Latvia, and Romania</u> have extended leave provisions for people to take care of adults with disabilities and older people.
- Argentina and Slovenia: Carers of people with disabilities are exempt from restrictions of movement to provide support to people with disabilities.
- People with disabilities are experiencing loss of employment and income, and financial hardship. In most countries, people with disabilities are more likely to be employed in the informal sector and to be self-employed. Therefore, they are more likely to lose work and less likely to be supported by labour protections. Prior to the pandemic, people with disabilities were already commonly excluded from employment, and there were significantly lower rates of employment amongst people with disabilities around the world.
 - Bangladesh: In a rapid needs assessment conducted with 91 people with disabilities, 93% of respondents reported that their livelihood activities have been impacted by the pandemic. Some households have started reducing costs on food, reducing food consumption and changing their diets.
 - Egypt: In a survey conducted in April 2020, of 240 households including or headed by people with disabilities, 95% of respondents stated that their overall income was negatively impacted as a result of the pandemic. 84% of those in informal work lost their work, compared to 28% of those in formal employment. 93% of households surveyed did not have savings, 49% were in debt, and 65% were at risk of being evicted for not paying rent.
 - Uganda: A survey of people with disabilities and their families found that 45% of people with disabilities worried about how they would feed their family, compared to 14% who worried that they might get infected by COVID-19.
 - USA: A report based on the Bureau of Labor Statistics Labor Report shows that nearly one million working-age people with disabilities lost their jobs in the USA in the month of April. That represents a 20% reduction of the number of workers with disabilities in the USA. (Kessler Foundation, 2020).
 - Viet Nam: A survey of 986 people with disabilities found that 96% of respondents were concerned for their financial security, 30% of respondents became unemployed due to COVID-19, and 28% of respondents saw their income decrease in March 2020.
 - Nepal: A rapid assessment conducted in April by HI with people with disabilities found that the lockdown had negatively affected 76% of respondents' family income, and more than 40% reported food insecurity, with many borrowing money to buy food, buying cheaper food, and eating less.

Examples of government and business responses:

- International: According to a survey conducted by the ILO Global Business and Disability Network (GBDN) in May 2020, the most frequent company practices to prevent COVID-19 infections among employees with disabilities are telework, flexible working hours and paid leave.
- Bangladesh: the Bangladesh Business and Disability Network is facilitating job matching services during the pandemic for people with disabilities who have lost work or are looking for their first job.
- Philippines: the Philippine Business and Disability Network is launching a reskilling initiative to help workers with disabilities acquire skills for post-crisis work.





- <u>Canada</u>: Canadian unions have been coordinating with Disabled Women's Network Canada (DAWN), to hold employers accountable and enable them to continue hiring, retaining and promoting persons with disabilities within their businesses, including by providing a fund to support small and medium sized to provide reasonable accommodations for people with disabilities.
- People with disabilities are experiencing barriers to social protection. Prior to the pandemic it was already common for people with disabilities to have limited access to social protection, for example in low-income countries it is estimated that only 1% of people with severe disabilities have access to disability benefits. Social protection schemes are also often insufficient to cover the higher costs of living for people with disabilities.
 - Bangladesh: Interviews with seven DPO leaders in Bangladesh noted that local governments are
 disqualifying people with disabilities who receive a disability allowance from receiving other forms of
 relief, and that the allowance is insufficient.
 - India: Research with 82 women with disabilities found that those who do not have disability certificates
 and ration cards cannot access support, and many have experienced delays in receiving payments,
 reduced pensions, or have not been able to access them because they had to be collected in person at
 banks that are far away.
 - Nepal: A rapid assessment conducted in April by HI with people with disabilities found that 78% of respondents did not have access to information about relief packages distribution by the government and NGOs.
 - <u>Viet Nam</u>: A survey of 986 people with disabilities found that 24% of respondents do not have a disability certificate, which might limit their access to services and assistance they need. 71% of the respondents who were working had seasonal/informal jobs or were informal business owners, and are thus at risk of being ineligible to receive allowances from the social welfare package announced by the Government. Currently, only persons certified as having severe and extremely severe disabilities are automatically entitled to receive from the package, leaving out those with mild disabilities. Only 16% of respondents have been supported with food and 13% with different forms of financial support. 20% have received masks and hand sanitizers.
 - Philippines and Indonesia: A survey of young people with disabilities found that 37% of respondents said the process to receive goods, quarantine passes, and other forms of aid is too difficult, and 34% said they are not included in the list of beneficiaries for support. in Manila, 79% of respondents had received assistance from local government, compared to Jakarta, where only 6% of respondents had received support.
 - Zimbabwe, <u>Uganda</u>, <u>Kenya</u> and <u>Mali</u>: People with disabilities have reported that communications about food distribution have been inaccessible, that food distribution processes are physically inaccessible, that they receive very little food from distributions, and that the cost of travelling to distribution points and compensating personal assistants is high.

Examples of government responses:

- South Africa: Government has increased the value of a range of social grants including the Old Age Grant and the Disability Grant for 6 months and advanced payment of these grants.
- Sierra Leone: Distributed 25kg bags of rice and a cash payment of \$25 to people with disabilities in coordination with the National Commission for Persons with Disabilities. The expectation is support will be provided to 10,000 people with disabilities.
- <u>Rwanda:</u> Expanded coverage of cash transfers to increased numbers of households with older people, people with disabilities and those with serious medical conditions.
- France, Kyrgyz Republic, and Saudi Arabia have ensured continued access to disability benefits by relaxing administrative requirements.
- <u>Bulgaria</u>, <u>Malta and Lithuania</u> have increased funding to their social protection systems to cover more beneficiaries, including people with disabilities.
- <u>Pakistan</u>: The government is disaggregating data by disability status in cash transfer programmes, allowing for monitoring of disability inclusion.
- Children with disabilities have been excluded from remote education efforts while schools are closed:
 - In <u>Kenya</u>, <u>India</u>, <u>Zambia</u>, <u>Mongolia</u> it has been reported that provisions for home schooling through elearning or television have often not been accessible to children with disabilities. Children with disabilities who use assistive devices no longer have access to these out of school. Parents of children





with disabilities who are not trained on inclusive education are struggling to provide support to children at home while also looking for income. Teaching staff with disabilities in India have not received training on how to facilitate online education, and in many cases the technologies they are required to teach with are not accessible.

o In India, qualitative research found that teachers who work with children with disabilities are concerned for their welfare. One teacher of children with disabilities noted, "... if there was any abuse, children shared it with teachers as trusted adults, but in these times they are inhibited since parents are around. Even when counselling is required, it became impossible to do it using virtual medium and also there is no confidentiality" (a teacher of children with disabilities in Tamil Nadu). Research from before the COVID-19 pandemic shows that children and adolescents with disabilities are nearly three times more likely to experience sexual violence than their peers without disabilities.

Examples of government responses:

- <u>UK</u>: The government provided advice for parents and carers of children with disabilities to support them to continue education during the pandemic.
- <u>Tanzania</u>: Sense International reported that the government provided guidelines for ensuring children
 can safely return to school and that students with disabilities are not left behind. The guidelines
 recommend using transparent face masks so that children with hearing impairments who rely on lipreading are included. The guidelines were developed in consultation with DPOs.
- People with disabilities are experiencing heightened stigma and discrimination, and women and girls with disabilities are at heightened risk of domestic violence:
 - Kenya: People with disabilities have reported that they are experiencing heightened discrimination due
 to false rumours that people with disabilities are more likely to have COVID-19. Reports of violence
 against women and girls with disabilities have also increased.
 - <u>Nigeria:</u> A blind man reported that he was beaten by police while he was providing support to peers through his DPO during lockdown.
 - Zambia: People with albinism have reported being attacked during the pandemic, and that some
 people with albinism are being blamed for bringing COVID-19 to Africa because some people associate
 the disease with white people and believe that people with albinism are related to white people.
 - o <u>India</u>: Women with disabilities are reporting a lack of privacy and accessibility of gender-based violence services, and the families of some women with disabilities who are experiencing intimate partner violence have not been willing to support them due to the financial strains of the lockdown.
 - <u>Mexico</u>: In June 2020, Human Rights Watch published research conducted in 2018 and 2019 that documents family violence against 24 women with disabilities and 14 men with disabilities. The report notes that as of 2015, 80 percent of Mexico's domestic violence shelters were physically inaccessible, and that the current guidelines for operating domestic violence shelters allow shelter staff to deny women with perceived or real psychosocial disabilities access to shelters, and instead refer them to a psychiatric hospital. Though the research was conducted prior to the pandemic, Human Rights Watch has highlighted that the barriers to accessing protection services are likely to be significantly heightened during the pandemic. Human Rights Watch has published similar reports of neglect and abuse of women and children with disabilities in Brazil, Croatia, Kazakhstan, India, Russia, and Serbia.

Examples of government responses:

- Peru: Guidelines were issued for local governments to reach out to people with disabilities by phone and report situations of violence to the relevant authorities.
- Jordan: The government has provided smartphones to people who require sign language interpreters to communicate, and established a hotline with video conferencing for people who have questions about medical issues and people needing to escape violence and abuse.