

## **COVID-19 disability-inclusive response**

The COVID-19 was first confirmed in China in December 2019. It has since spread to over 100 countries, leading to the declaration of a COVID-19 pandemic by the World Health Organization (WHO). In addition to regular COVID-19 updates and preventive measures, UNRWA COVID-19 Preparedness and Response Plan was released recently.

Information on the vulnerability and impact of the coronavirus infection on persons with disabilities is sparse. However, old age and existing chronic illnesses, which are known causes of disability, have been documented to increase people's susceptibility to the COVID-19. In addition, persons with disabilities may have limited access to COVID-19 information, hygiene measures, quarantine and treatment services / facilities, which can worsen their vulnerability.

When crises occur, persons with disabilities are mostly affected. For example, they may get separated from caregivers, find themselves in inaccessible/unfamiliar environments, and unable to access the essential medications and assistive devices. This is also true of the current COVID-19 outbreak which could mean many things for persons with disabilities, such as:

- Separation from caregivers: for example, an infected caregiver may have to go on quarantine or unable to care for a person with disabilities who is infected with the coronavirus
- Difficulty in getting to work: a persons with disabilities who depend on a particular person for transportation to work may find it difficult to quickly make an alternative arrangement
- Stigmatization: disability is associated with stigma. A person with disability who gets infected with coronavirus may be subjected to more stigma that can worsen the impact of the virus

Therefore, to ensure the availability of UNRWA COVID-19 preparation and response measures to persons with disabilities, the following approaches should be adopted:

### ***Making communication accessible***

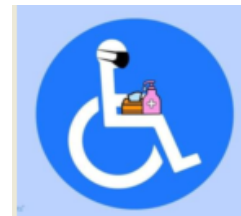
- Provide updates/information in alternative formats (e.g., radio, television, sign language, flyers)
- Post information within the eye level of a wheelchair-user (1.1-1.3 m from the ground)
- Present information in plain language and in an easy-to-read format
- Share accessible information with Organizations of Persons with Disabilities

### ***Ensuring access to hygiene measures and facilities***

- Mount or place hygiene items (e.g., hand sanitizers) between 0.9-1.2 m from the ground
- Disinfect railings along ramps regularly
- Disinfect grab rails in accessible toilets / bathrooms regularly

### ***Making quarantine and health centres accessible***

- Provide physically accessible entrances, accessible vertical and horizontal movements, and ensure the usability of quarantine facilities by persons of different abilities



- Ensure the physical accessibility of health centres – entrance, vertical and horizontal movements and usability of health centres facilities by all, including persons with disabilities
- Provide sign language interpretation for accessible information to Deaf persons

#### ***How to help parents / caregivers of persons with disabilities***

- Explore the possibility of arranging somebody else to care for children / adults with disabilities in case the parents / caregivers need to go on quarantine or need to be hospitalized
- Observe recommended hygiene practices to prevent coronavirus infection

#### ***How to help persons with disabilities***

- Discuss reasonable accommodation with employees and students with disabilities. This may include the possibility of working from home
- If applicable, provide personalized information and hygiene materials to employees and students with disabilities
- Prioritize services related to the provision and repair of assistive devices, food distribution and cash transfer, when observing isolation and social-distancing
- Ensure active participation of persons with disabilities and their representative organizations in needs assessment, preparation, planning and implementation of COVID-19 response

***Adopt positive attitudes:*** Do not stigmatize persons with disabilities whose conditions are normally associated with respiratory symptoms e.g., difficulty in breathing and cough

***Monitor the response:*** Disaggregate COVID-19 health information and data by age, sex and disability

#### **Specific things that persons with disabilities need to do**

***Communication:*** Communicate your specific needs to people in charge of COVID-19 preparation and response or disability focal points

***Follow instructions:*** Follow UNRWA instructions on COVID-19 prevention, and on how to seek help if you experience any related symptoms

#### ***Wheelchair-users and people who use crutches, guide canes and frequently-touched assistive devices***

- Hand-wash and/or hand-rub frequently: As a wheelchair-user, you rely heavily on your hands to roll yourself. Be careful to avoid touching the tyres of your wheelchair.
- Disinfect your wheelchair hand-rims and push handles, crutches and other frequently-touched assistive devices regularly

#### ***Deaf persons and sign language interpreters***

- Hand-wash and/or hand-rub regularly: Some signs require that you touch your face. Therefore, ensure that your hands are always clean