The International Disability and Development Consortium (IDDC) and the International Disability Alliance (IDA) represent disability-focused civil society organisations and Organizations of Persons with Disabilities worldwide. Together, we are monitoring the impact of COVID-19 on persons with disabilities and using this evidence to strengthen the COVID-19 response and recovery.

IDA and IDDC commend WHO’s leadership on the COVID-19 response and welcome the launch of WHO’s Brief on Disability Considerations During the COVID-19 Outbreak, as well as recent steps to make WHO’s public briefings accessible via live captioning. We are ready to cooperate to ensure inclusive access to health information and services, in line with the Convention on the Rights of Persons with Disabilities.

Some groups of persons with disabilities are at higher risk of contracting COVID-19 and developing more severe symptoms. This is much due to existing health conditions, inaccessible information, and lack of disability perspective in designing and implementing protective measures.

By adding pressure on health systems, COVID-19 leads to reduced capacity or unavailability of services and medicines, including rehabilitation and assistive technologies, resulting in reduced level of functioning and increased morbidity and mortality. Persons with disabilities face significant barriers in accessing health information and services, especially in low and middle income countries. This is often due to stigma and discrimination, lack of accessibility, limited awareness and training of health staff. These barriers are exacerbated during crisis.

Intersectional and multiple discrimination are experienced by under-represented groups including persons with disabilities living in institutions, deaf, hard-of-hearing and deaf-blind persons, women, girls and indigenous persons with disabilities, persons with intellectual and/or psychosocial disabilities.

We are deeply concerned about protocols and practices attaching less value to lives and wellbeing of persons with disabilities including triage protocols and practices. Mental health is a challenge for everyone because of stress, anxiety and uncertainties; even more so for the most marginalised people, including victims of gender based-violence, as well as some older persons and persons with disabilities, who are at risk of further isolation and exclusion.

We call on governments, health providers, United Nations agencies, and all actors to ensure:

• Any policy, program, action or omission amounting to direct or indirect discrimination in accessing health care is prohibited, ended and remedied immediately. Efforts must be well coordinated to ensure that no one is left behind;
• Communication on the COVID-19 outbreak, prevention measures and services, is truthful and provided in accessible formats reaching to all including girls, boys, women and men with disabilities;
• Essential health services, including rehabilitation, psychosocial support and interpretation services in medical centers, are adapted to prevent the spread of the virus and continue to operate;
• Healthcare personnel are trained on the rights and needs of persons with disabilities as well as on inclusive communication, and strict prohibition of disability-based discrimination in providing medical care including triage decisions. Free and informed consent to treatment must be ensured for everyone;
• Persons living in institutions have equal access to testing, medical treatment, protective and preventative measures;
• Appropriate measures are taken to ensure continued access of women and girls with disabilities to sexual and reproductive health information and services;
• Persons with disabilities and their organizations are consulted meaningfully in designing and implementing recovery plans and programs
• Collection and dissemination of disability disaggregated data, including data on the number of deaths in institutions, to monitor the impact of COVID-19 on persons with disabilities.

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