



Statement

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Death Knocked on the Door of Institutions First; The History of Segregation Should be Stopped

-The Bare Face of Institutionalization unveiled by COVID-19

The novel Coronavirus(COVID-19), which began to spread around the Asian countries since December 2019, now is spread all around the globe just in 5 months. Damages caused by COVID-19 appeared to be similar regardless of the borders. The virus attacked us without discrimination, but our responses were discriminatory.

Persons with disabilities are one of the vulnerable groups to COVID-19. However, most of the COVID-19 responses of the governments around the world have not been sufficient to take into account of health and daily support of persons with disabilities. Persons with disabilities, to whom the person-to-person services are essential on a daily basis, had to face greater suffering than others in the era of self-quarantine and social-distancing.

In some countries around the world, biased perception toward the life of disabled people was blatantly revealed in the allocation of limited medical resources, and persons with disabilities were often dropped down on the treatment list. Information on COVID-19 and emergency/preventive measures taken by governments were not fully accessible. Prolonged self-quarantine led to increased domestic violence against women, especially women with disabilities. Remote education systems were insufficient to guarantee the education right of children with disabilities. Having witnessed disproportionate impact on persons with disabilities, disability organizations all around the world raised voices calling for disability-inclusive disaster(including COVID-19) responses.





However, there are still people unseen even when we recognize discrimination. The forgotten; people living in institutions.

Institutions are inherently vulnerable to infectious diseases for the overcrowded space, lack of personal space, difficulty in managing personal hygiene of every residents, collective activities, and uniform control. And this vulnerabilities have sadly proven through numerous cases in residential facilities(institutions, smaller sized of group homes, nursing homes, and psychiatric hospitals)all around the world.

According to the study implemented by the 'New York Disability Advocates', a consortium of private service providers, residents of group homes and similar institutions in New York City and nearby areas are 5.34 times more likely to be infected with COVID-19 and 4.86 times more likely to die from infection than the total population. As of March 8, 4,260 people in care homes died of COVID-19 in Madrid, Spain. And as of April 7, one third of the deaths from the novel coronavirus in France were found in care homes. In Indonesia, there are increasing concerns over the spread of COVID-19 infection in psychiatric Institutions because of overcrowding in a ward which bars social distancing and lack of appropriate information provided to the people with psychosocial disabilities as the institutions do not consider them to be "capable of thinking".

This was not an exception in South Korea, which has been applauded world-widely for its effective COVID-19 response. Despite the COVID-19 response of Korean government was fast and thorough, there was still a big gap for persons with disabilities living in institutions. They were excluded from the response by the government to 'protect life and health of the people', just as they were expelled from the community into the institutions.

The death from the virus first knocked on the door of institutions. The first dead by the COVID-19 in South Korea was a patient in psychiatric ward of Cheongdo-daenam Hospital. The victim, lived in that hospital for 20 years, weighed 42kg(92lbs) only at the time of death. Only after the death, the government belatedly figured out that 101 out of 102 patients of the ward





were infected. 7 of them were dead. The fatality rate of the hospital is 7%, which is more than three times higher than the Korean total rate of 2.27%.

Since the shocking findings, Korean government announced what to do next for the persons in institutions. However, the measure taken was 'preventive cohort isolation', which was rather irresponsible collective quarantine. As UN Special Rapporteur on the rights of persons with disabilities Catalina Devandas worried, "Limiting their contact with loved ones leaves people with disabilities totally unprotected from any form of abuse or neglect in institutions."

COVID-19 threw various tasks and concerns to us. If we neglect them, it will draw us other numerous upcoming threats. COVID-19 raised the fundamental question of the life of human being. During the time of isolation, we deeply appreciated the value of social connection. Then we have to ask ourselves; why is the social-distancing required to the non-disabled people only under emergency, in a limited way, while it is taken for granted for disabled people for the whole lifetime? For whose sake does the segregation keep going under the name of 'care and welfare'?

We all already know what to do. The Article 19 of UN Convention on the Rights of Persons with Disabilities, ratified by 181 countries as of April 2020, declares the equal right of all persons with disabilities to live in the community and that the state parties shall take effective and appropriate measures to facilitate full enjoyment by persons with disabilities of this right and their full inclusion and participation in the community.

We assure that the international community made up and ratified the convention not to just leave ideal sentences. Promise is to be kept. And it is time for the governments to step ahead to keep the promise. International community declared to make a world, 'leaving no one behind' by 2030, and in order to the declaration does not stop at a hollow echo, we must break the walls across the institutions and communities. We are now standing at the great crossroads turning away from the long history of classification and separation between the 'normal and abnormal'.





Korean Disability Forum urges all governments around the world, including South Korea, to introduce deinstitutionalization policy. In the cooperations with the colleagues in and out of the country, we have learned that institutions have undermined human dignity regardless of the borders, same as COVID-19 does. Countless people have been abused, neglected, forced to work and died inside the walls of institutions separated from society just because they have disabilities. For a very long time, people with disabilities have not genuinely belonged to the society and it is still ongoing.

This long history of segregation should be cut off. A world 'no one left behind' that the international community promised will not be realized gratis. Close the institutions and establish infrastructure in the communities such as housing, income, personal assistance, mobility, etc. for the full inclusion of the disabled people. It is inevitable to make a decision of shift from institution to community, toward the inclusion and dignity, not the exclusion and violence. Again, we call for the international community to end the anachronistic practice and pile up the actions heading for the world that 'no one left behind'.



Corporation "Nodeul"

Cultural Welfare "Gong-gam"

Disability and Human Rights in Action("FootAct")

Disability Discrimination Act of Solidarity in Korea

Korea Association of Blind Women

Korea Council of Centers for Independent Living

Korea Differently Abled Federation

Korea Solidarity for Human rights of disability people with Brain lesion

Korean Alliance for Mobilizing Inclusion

Korean Parents' Network for the People with Disabilities

Nodeul Independent Living Centre for the Disabled

Open Network

Rehabilitation International Korea

Research Institute for Disability Rights

Solidarity Against Disability Discrimination

Women with Disabilities Empathy





References

1. <https://discoversociety.org/2020/03/28/covid-19-and-the-protection-of-people-with-disabilities-in-institutional-settings/>
2. <http://www.internationaldisabilityalliance.org/covid19-indonesia>
3. <https://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=25725&LangID=E>
4. <https://www.cdc.gov/mmwr/volumes/69/wr/mm6912e1.htm>
5. <https://www.hrw.org/news/2020/03/26/uk-covid-19-law-puts-rights-people-disabilities-risk>
6. <https://www.nytimes.com/2020/04/08/nyregion/coronavirus-disabilities-group-homes.html?referringSource=articleShare&fbclid=IwAR1CdD1uSOIQGIOE89mPzzV6XK5p7EK1abqdSihuAeOY2Ugi3zm2yNjF1UU>
7. https://apnews.com/73d91ce94a17a94eba4373ebb9c60724?utm_medium=AP&utm_campaign=SocialFlow&utm_source=Facebook&fbclid=IwAR00ejhMMhshmor46oAVryfe14wCI7o7BxFLI1zszl78P8urXPGPdEIO_ac

