

COVID-19 and Disability: Recommendations to the Canadian Government from Disability Related Organizations in Canada – March 24, 2020

It is imperative that the Government of Canada urgently address the unique vulnerabilities of people with disabilities and their families during the COVID-19 crisis. People with disabilities represent 22% of the Canadian population. Many are at extreme risk and require additional support to ensure their health and safety at this time.

Some people with disabilities are vulnerable to COVID-19 because of the nature of their disability and related health challenges. Many others are at risk because of the measures put in place in response to COVID-19 which require people with disabilities and their families to distance themselves from their communities and support systems and to invest funds up front for supplies needed to maintain wellbeing during an extended period of isolation.

If Canada's healthcare system becomes overburdened by COVID-19, most triaging guidelines will result in people with disabilities being denied care, *triaged out* of care solely on the basis of having a disability. This was the case during the SARS and H1N1 pandemics and we have no reason to believe that guidelines have changed. Canadians with disabilities may be refused ventilators or life support in a moment of crisis because they have a disability. This discriminatory policy is of great concern.

Family stress and reduced staff support is already proving to be a challenge as schools, daycares, and recreational activities close and children and adults with disabilities must stay home and rely on family or staff. As lifestyles shift to promote social distancing, people with disabilities require support in navigating alternative approaches to maintaining their independence, health, and safety in everyday life. For some, this shift is not only difficult to manage but impossible to negotiate alone.

Indeed, family members are having to step up and step away from other priorities and sources of income to fill gaps in disability support for their loved ones. They are absorbing the costs of COVID-19 personally and out of necessity; and they are terrified of what will happen if they themselves become infected and must self-quarantine. People with disabilities and their families need immediate financial support.

People living in group arrangements also have evolving needs which now must largely be met from within their residences, on the fly, and with very little guidance or resourcing from public health agencies or governments. We know that there are now staffing shortages because of this concentration of need and as staff self-isolate for their own protection. Further, staff may be anxious about getting sick or being vectors of COVID-19 transmission both inside and outside the workplace.

Canada must step up to the challenge set by the UN Special Rapporteur on the Rights of Persons with Disabilities, to provide for continuity of care, financial aid, and reassurance that the survival of people with disabilities is a priority (endnote 1).

We therefore recommend that the Canadian government*:

- Agreed upon top seven priorities of the disability community -

- 1) Issue an explicit national values statement affirming the equal rights of people with disabilities to available medical treatment and care including in circumstances of pandemic triage, and - more broadly - reaffirming Canada's commitment to the rights of persons with disabilities to equality and inclusion, as enshrined in the *Charter*, provincial/federal/territorial human rights law, and in Canada's international obligations under the UN Convention of the Rights of Persons with Disabilities.
- 2) Ensure that all announcements made by the Prime Minister and the Public Health Agency are fully accessible and in plain language, and that all networks publicly broadcasting these announcements are mandated to capture these accessibility features. (endnote 2)
- 3) Release guidelines for service providers and people with disabilities who must continue to interact with service providers, to keep everyone safe and to ensure that necessary support continues. Provide protective equipment such as gloves and masks and prioritize the screening of support staff and personal caregivers in private homes and care centers. (endnote 3) Encourage the provinces and territories to recognize caregivers and disability support staff as essential service providers.
- 4) Establish a Citizen Task Force inclusive of people with disabilities, their families, and relevant civil society organizations to monitor evolving needs and advise on remedial strategies in real time, as adverse policy impacts affecting the provision of essential disability related care and support become apparent. Long term, following the COVID-19 pandemic, this group could help to inform a disability inclusive Federal emergency response plan for pandemics and other nation-wide emergency situations.
- 5) Protect the income of people with disabilities and their families. Support businesses who have hired people with disabilities by offering them education in how best to provide accommodations and accessible work-from-home measures for their employees. Extend EI Caregiver Benefits to those who are stepping into a caregiver role due to illness or isolation from COVID-19.
- 6) Connect with individual Indigenous communities across Canada to assess the current state of their operations and identify the critical health and disability related needs of their members with a disability and the best way to meet those needs. Implement a comprehensive communications plan to ensure that Indigenous communities and their members are receiving information in a timely and accessible manner.
- 7) Transfer funds to the provinces and territories that are marked for the health and support needs of people with a disability. Work with the provinces and territories to encourage considered approaches to disability inclusion throughout the country.

- Other actions that would be extremely beneficial -

- 8) Regulate the insurance industry to prohibit exclusion from health benefits for reasons that adversely impact Canadians with disabilities during a pandemic. (endnote 4)
- 9) Provide additional crisis funding to not-for-profit organizations that provide services to people with disabilities, appreciating that their fundraising revenue will be severely compromised.
- 10) Establish an accessible hotline with alternatives for text and email to help Canadians with disabilities and their families navigate emergent concerns and innovative supports during the COVID-19 pandemic.

And that the Federal government take on a leadership role in working with the provinces and territories, and relevant regulatory bodies to:

- 1) Ensure that any provincially applied triage methods do not discriminate against people with disabilities. Every Canadian, regardless of where they live, must have access to all support required to live through COVID-19.
- 2) Ensure that all pandemic related communications released by provincial and territorial governments and health authorities are fully accessible and in plain language, and that all networks publicly broadcasting these announcements are mandated to capture these accessibility features.
- 3) Legislate job protection for individuals with disabilities who are unable to fulfill their work duties due to heightened risk of infection and/or other societal barriers (gaps in transportation for example) and for family members and others who have to step away from work to provide care during the COVID-19 crisis.
- 4) Ensure that hospitals make an exception to any blanket prohibition of visitors when a person with a disability requires assistance with vital services like communication, caregiving, or supported decision making.
- 5) Consider those who provide disability supports and services and/or work in fields like wheelchair maintenance and augmentative communication support for people who use communication devices to be engaged in essential services so that they remain accessible.
- 6) Prevent the retraction of any unclaimed funding administered for services such as personal assistance or therapy when they are cancelled by either party due to COVID-19 (illness or illness prevention). Potential solutions may include rolling these funds forward, and/or relaxing reporting obligations so that people with disabilities and their families may use their discretion in re-allocating these funds during a time of crisis.

- 7) Provide COVID-19 testing sites that are physically accessible – including to persons who require mobility aids and those who do not drive or have access to a vehicle.
- 8) Provide advances on all disability payments in order to allow for people with disabilities and their families to stock up on food and medical supplies, make required changes to disability supports and relevant assistive technologies, and continue to pay routine bills.
- 9) Temporarily relax regulations pertaining to refilling prescription medications including controlled substances. Solutions may include empowering pharmacists to renew prescriptions during the COVID-19 crisis or mandating medical practitioners to refill prescriptions over the phone.
- 10) Support people with disabilities in accessing community-based mental health services during the COVID-19 pandemic.

Additional resources and information can be found at:

The International Disability Alliance at: <http://www.internationaldisabilityalliance.org/covid-19> (International)

The Partnership for Inclusive Disaster Strategies: <https://mailchi.mp/disasterstrategies/covid19-national-call-to-action-org-support150> (US)

Centre for Research Excellence in Disability and Health: <https://credh.org.au/news-events/covid-19-and-people-with-disabilities/> (Aus)

And Disability organizations in Australia have endorsed : https://mcusercontent.com/9b4dc5c4cde2d6162dcb52396/files/d314e3a2-38d0-4e7c-8953-5e149ea6ffc8/Urgent_actions_needed_for_people_with_disability_to_respond_to_COVID_19.pdf (Aus)

UN News: <https://news.un.org/en/story/2020/03/1059762> (International)

Presented By:

Abilities Centre
Active Living Alliance for Canadians with a Disability
Alliance for Equality of Blind Canadians
ARCH Disability Law Centre
Barrier free Canada – Canada sans barrières
British Columbia Aboriginal Network on Disability Society
Canadian Association for Community Living
Canadian Association of the Deaf-Association des Sourds du Canada
Canadian Autism Spectrum Disorder Alliance
Canadian Council of the Blind
Canadian Council Rehabilitation Work
Canadian Disability Participation Project
Canadian Hard of Hearing Association

CNIB Foundation
Communication Disabilities Access Canada
Council of Canadians with Disabilities
DisAbled Women's Network of Canada / Réseau d'Action des Femmes Handicapées du Canada (DAWN-RAFH Canada)
Empower, The Disability Resource Centre
Every Canadian Counts Coalition
Family Support Institute of BC
Independent Living Canada
Independent Living Nova Scotia
L'Arche Canada
March of Dimes Canada
Muscular Dystrophy Canada
National Network of Mental Health
People First of Canada
Pooran Law
Quebec Accessible
Realize
Rick Hansen Foundation
Spinal Cord Injury BC
Spinal Cord Injury Canada

ENDNOTES:

1. UN Special Rapporteur on the Rights of Persons with Disabilities: <https://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=25725&LangID=E>

* This is not an exhaustive list of all that can or should be done to support people with disabilities in Canada during the COVID-19 pandemic. It is intended to be used as a starting point for government to build upon in collaboration with people with disabilities as the pandemic responses unfold and new needs become apparent.

2. The United Nations recommends that during the COVID-19 pandemic “public advice campaigns and information from national health authorities must be made available to the public in **sign language and accessible means, modes and formats, including accessible digital technology, captioning, relay services, text messages, easy-to-read and plain language.**” If uncertainty arises, Canada can connect with the disability community for guidance and support in best practices in accessible communication and information sharing.

3. As a best practice, these guidelines should be developed in consultation with the community care sector.

4. For example, some people with disabilities who are currently abroad do not feel that they can travel home without risking exposing themselves to COVID-19. These individuals must not lose their health insurance at this time.