NOTES from IPA MEETING

30 March 2020

Contributors Roshan Galvaan, Sharon Kleintjes& Harsha Kathard

Strategies to promote inclusion of people with disabilities COVID-19

- Provide strategies/information which support the M &E division of the Department of Women, Youth and People with Disabilities in the Presidency to make disability inclusion more visible in/ improve the uptake of disability related issues into national efforts at responding to COVID-19 (national command centre)
- Recommendations on population level strategies, within a public health approach, leveraging other key sectors (eg social development, health, transport GCIS)
- Impress the importance of high level action on the inclusion of people with disabilities in national strategies due to the fact that (a)people with disabilities are at higher risk for contracting and having negative outcomes from the virus, particularly immune compromised, multi-disabled persons, (b) disabled persons are made vulnerable to the virus due to the fact that most people with disabilities need the help of others- fear of infection could result in family/carers neglecting the care needs of covid-positive relatives with adverse outcomes, and lack of knowledge of prevention methods can result in either carer or disabled person becoming infected, stigma, and (c) lower prioritisation of people with disabilities is likely to impact on their inclusion/access to supports available as covid-19 supports with higher likelihood of mortality.
- Current efforts impacted by lack knowledge about the specific needs of people with longterm physical, mental, intellectual or sensory impairments (good policies, but implementation strategies lack specificity to address "real world "critical needs of people with various disabilities in communities

Strategies should:

- Focus on inclusion of disability strategies into *existing initiatives for COVID-19*, rather than suggesting new initiatives which cannot be implemented due to stressors of current crisis on available resources. As initial step document strategies already in place
- Targeting various *commonly available platforms* to improve access to information to reach communities to address above:
 - Street level communication via loudhailers, radio, television programmes
 public announcements, protocols and programmes to include messaging
 about people with disabilities; current messaging on vulnerable groups such
 as immune-suppressed and elderly persons to be extended to include
 people with disabilities in all instances
 - President must emphasise the INCLUSIVE nature of the strategy for ALL vulnerable people
 - mobile phones are accessible to many South Africans, with Whatsapp a common means of relatively inexpensive communication: platform for

- communicating messages about prevention, access to treatment etc, could be used for general population, and be inclusive of messaging about the care, support and non-stigmatisation of people with disabilities.
- Utilise community action networks/organisational coalitions to distribute information/strategies/implementation protocols through their existing databases (these are already available to the M&E division, and can be updated with additional resource organisations not yet on their database)
- Mobilising additional human resources to assist during the pandemic should include (a) the use of community workers and homebased care workers, (b) a call for therapists to include addressing the medical, rehabilitation and and psychosocial needs of disabled people, (c) for specialist therapists who can provide support to generalists in these services, and
- Identification of specialist from all disciplines to serve on a *Disaster Implementation Team* to assist the M &E unit
- Strategies/activities must should be suitable for use by people living in impoverished contexts (e.g. one room homes, without utilities and basic amenities within which families may be caring for multi-disabled relatives, with difficulty accessing district health resources)
- Communication should be assessable (Braille, sign language, easy –to read/listen formats etc).
- Psychosocial supports for people in the general population is needed with stressors of selfisolation: information, messaging to be included for these (using therapists from all disaplines, and including attention to people with severe mental illness who may need additional support)
- Assistance to parents for facilitation of occupation/play for children during selfisolation/lockdown:- (provision of play packs).
- Given resource constraints in poorer communities and limits on accessing materials for play packs, resources provided might also focus on information for parents, families to use to help their children make toys from readily available recyclable waste:

http://www.streetplay.com/playfulworld/recycledtoys.shtml

https://za.pinterest.com/pin/437201076299523156/

https://bulungulaincubator.org/2017/10/02/making-toys-from-recycled-materials/

http://www.singakwenza.co.za/waste-to-toys-and-a-whole-lot-more-by-amy-rand-north-dakota/

https://www.thesprucecrafts.com/recycled-toys-your-kids-can-make-2086523