

Youth Webinar Report

Issues of Persons with Disabilities Related to COVID-19

14 August 2020

Prepared by:

Electoral Support Project, UNDP



1. Executive Summary

A fourth youth webinar, which is part of a larger youth webinar series, took place on 14 August 2020 to discuss the issues of persons with disabilities in context of COVID-19. Moreover, the webinar also sought to provide recommendations on the ways to address these issues.

The youth webinar was attended by over 90 participants, including youth volunteers, representatives from UNDP, representatives from the communities of people living with disabilities, experts from the academia. In the webinar, youth volunteers from all seven provinces in Nepal and 67 districts conducted surveys of the people in their community. A total of 109 youth volunteers surveyed a total of 530 respondents for the survey spread across Nepal. The survey respondents were either persons with disabilities (PWD) themselves or had someone in their household who was a PWD. All types of persons with disabilities were represented in the survey, including physical disabilities, hearing and speech impairment, visual impairments and psychosocial disabilities. More specifically, it included people with intellectual, physical, blindness, hard of hearing, speech disability, deaf blindness, intellectual disability, autism, haemophilia, down syndrome and multiple disabilities. All efforts were made to gather responses from varied groups and locations.

The volunteers asked the survey respondents questions relating to the availability of food stock, their economic transactions in the context of the pandemic and the associated challenges, health and psychosocial counselling, availability of clean drinking water, issues on religious, caste-based and gender-based violence, their access to information during the COVID-19 and their opinion on the social accountability and transparency in handling the process, the ease of accessing education and learning for the children in their community, along with their access to relief materials that were provided by the government and various other agencies to support the testing times. The survey respondents answered these questions from a PWD perspective, thereby providing insights into the core problems in the current context for them.

A questionnaire was designed with inputs from PWDs organizations in a consultative manner. The questionnaire included questions covering the personal status, changes in personal income before and during COVID-19, the employment situation, main challenges during COVID-19 for PWDs, including on health and socio-economic issues, coping mechanisms and their main needs. The questionnaire was posted on the survey KOBO tools.

The webinar helped identify some trends that highlighted the problems that the respondents faced. They include: The survey respondents felt that there were limited disability friendly infrastructures in place, the quarantine facilities were also not PWD friendly, the information disseminated on the pandemic was not accessible and they did not know what the proper complaint mechanisms to report this was, which was recognized by the local government. Moreover, they also noted the lack of structural representation from PWD people and organization in different committees and sub-committees, also formed specifically to address the challenges posed by the novel coronavirus. Furthermore, other common themes included a loss of income source during the pandemic, increase in various forms of discrimination and violence, limited access to proper education.

Therefore, the ensuing recommendation was to make the fight against COVID-19 PWD friendly by ensuring their access. Majority of the youth volunteers, speaking on behalf of the respondents of the survey, shared that there is need for proper and coordinated collaboration among all tiers of the government as well as the development actors. They further shared that the youth volunteers can be mobilized as a catalyst to facilitate this process.



2. Introduction

2.1 Background & Rationale

The UNDP Electoral Support Project (ESP) and the Country Office (CO) collaborated to join forces in the fight against the COVID-19 pandemic. A joint analysis from the team concluded that a webinar conducted by and for the youth from across the seven provinces in Nepal would play a key role in informing about the ground realities. These would then also inform the five pillars for socio-economic framework including putting health first, protecting people, economic response and recovery, macro-economic response and multilateral collaboration and social cohesion and community resilience.

The fourth webinar was on issues of persons with disabilities in context of the COVID-19. The webinar saw participation from youth volunteers, organizations working for the welfare of persons with disabilities, development actors, academia.

The event started with welcome remarks from Mr. Bishnu Bahadur Nepali, the Capacity Building Officer at UNDP's Electoral Support Project. Extending a warm welcome to the participants, he informed that the recommendations and findings of the event will inform the future programming for UNDP's work.

2.2 Objectives

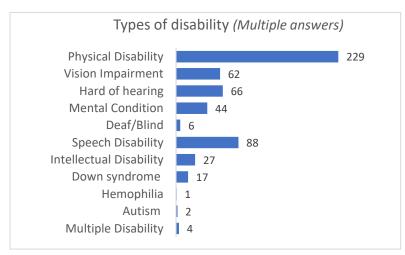
- To bring issues of inclusion to the forefront.
- To engage the youth and capacitate them to get important information in the fight against COVID-19.
- To use the learnings from the youth webinars to inform future UNDP programming.

3. Key Findings

The webinar then included a presentation from Mr. Mohammad Shahid Reza, Civic and Voter Education Officer with UNDP's Electoral Support Project. In the presentation, he presented the key findings from the survey conducted across the seven provinces of Nepal, providing a general trend of the responses.

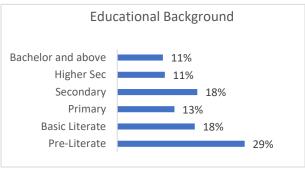
• Respondents Demography

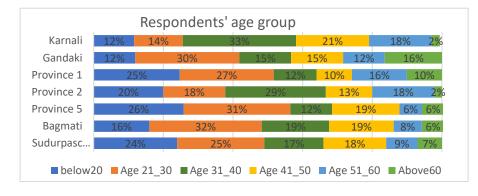




There were a total of 530 respondents for the survey, with high participation of male respondents at 66%. Moreover, there were ten types of PWDs represented in the survey. This includes: persons with intellectual, physical, blindness, hard of hearing, speech disability, deaf blindness, intellectual disability, autism, haemophilia, down syndrome and multiple disabilities, multiple forms of disabilities.

The educational background of the respondents of the survey varied. Overall, the participants ranged from those who were not literate (29%) to those with a Bachelor's Degree or higher (11%). Those who were not literate represented the majority of the respondents. The details in terms of educational background is presented in the adjacent graph.

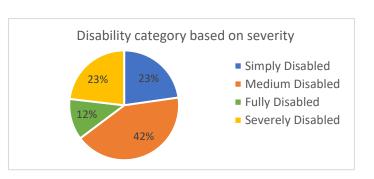




In terms of age, most of the respondents were between 21-30 years of age (27%). There were 8% respondents who were above 60 years of age and 19% who were below 20 years of age. The province-wise information is provided in the adjacent figure. It was found that respondents who were educated above higher

secondary level were mostly from the age group 21-30 (accounting 11% of the total respondents).

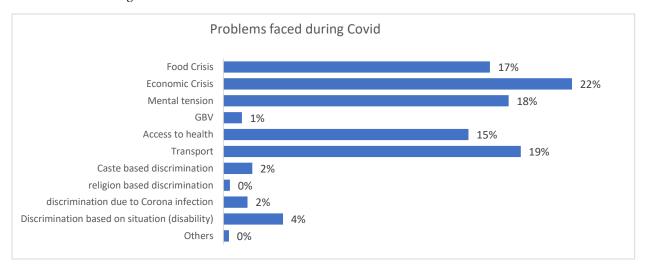
The survey respondents were asked to rate, on their own, in terms of the severity of the PWD in their home. These included: Most severe category-complete disability – holds red card; Severe Disability – holds blue card; Moderate Disability-holds yellow card; and Mild Disability – holds





white card. The following chart represents the findings, with 42% of the respondents reporting "medium disability."

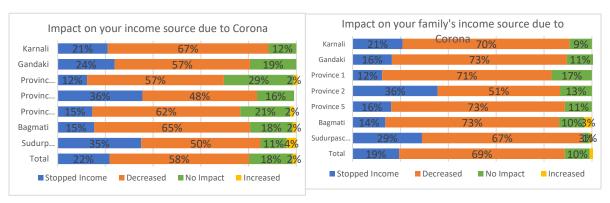
General Findings



The respondents were asked what kinds of problems they encountered in the current context. From their responses, majority of them faced economic hardships, at 22%, followed by problems related to transportation and mental stress during this period. Among the respondents, very few reported experiences with any sort of discrimination.

• Economic Activities

Of the respondents, 64% did not engage in any income generation activities. Ones who were involved in such activities belong to the age group 21-40 (20% of the all respondents). However, when asked what the main source of income for their family was, 46% reported it was agriculture. This was followed by 18% who were engaged in daily wage, 16% in the service industry, 6% were self-empowered, 4% relied on remittance and 2% on small and cottage industries.

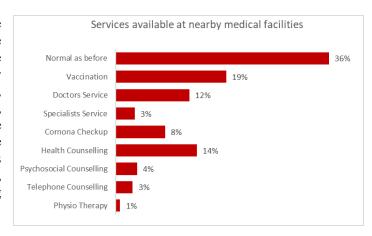




When the respondents were asked about the impact of COVID-19 on their and their family's income source, more than half of them stated that their family's income had decreased (69%) as well as their own income had also decreased (58%). Whereas, 19% reported that source of their family's income had stopped and 22% reported that their own income had also stopped. On the contrary, 18% reported no impact on their livelihood. Moreover, 32% of the respondents said that someone in their family lost their job because of the pandemic.

• Health Facilities and Sanitation

The respondents were also asked about the kind of facilities that were available at the nearest health post. They were asked if the services were available as before, and if they had vaccination services, doctor services, specialist services, COVID-19 testing, psycho-social health, and telephone counselling were available. From the respondents, 36% said the services were as before. However, the services such as health, psycho-social and telephone counselling were not available to a large degree.



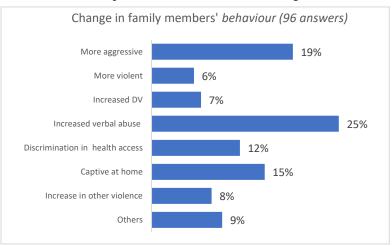
The respondents were accessing water through various means: 71% of them had access to private water taps. Moreover, 42% drank boiled water, 18% filtered water and 39% did not use any of the precautions. What is interesting to note is that 69% of the respondents noted that they did not have a PWD friendly toilet even in their homes.

• Social Protection

When asked if there were any forms of gender-based violence in their communities, 90% said that there were none whereas 10% said that there were. Among them 37% were female and 2% were gender/sexual minorities. The majority of them identified the prevalence of social pressure and mental forms of violence at 39% (41% female), and 20% (25% female). From the respondents, 3% (all female and gender/sexual

minority) also reported the prevalence of sexual violence.

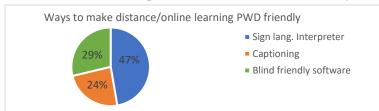
The respondents were also asked if there were any changes in the family members' behaviour the current context of the pandemic. From among them, 82% reported no changes. And of the 18% who identified changes reported that there was increase in verbal abuse, 25%; the family members were generally more aggressive, 19%; and 12% felt that there was discrimination in access to health.





Education

Access to education was a cause for concern among the respondents: 55% said that education had not started for children with disabilities in their community; 29% said that there are no children with disabilities in their household. And a very few of them reported having access to online classes, at 6%; or using the classes conducted on television programmes as means of accessing education, at 4%. For those who reported to the latter two, when further probed if these were PWD friendly, 88% said that it was not.

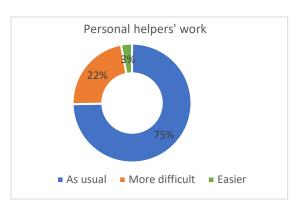


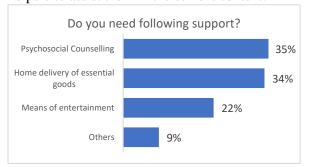
In order to better understand this issue, the respondents were asked how to make these classes PWD friendly: 47% reported the need for sign language interpreters.

• Relief Distribution

The respondents were asked what sort of social support they needed at the moment: Majority of them reported needing economic support, at 24%. This was closely followed by support for health services at 22%, need for relief packages and PWD-friendly appliances at 18% each, psychosocial counselling at 17% and 1% reported needing other forms of support such as capacity development trainings, information related to self-care and personal hygiene, access to schooling.

Furthermore, the person assigned to assist the respondents were separately asked how the working environment for them in the current context: 75% reported it was as usual, whereas 22% reported that it was more difficult for these helpers to support them. The cited reasons for this difficulty including being bored at home (55%), lack of health appliances (28%), unavailability of sanitary materials (14%) and other difficulties such as not having an income, lack of a person to look after them (3%). Moreover, 3% also reported that the it was easier for their helpers to assist them in the current context.

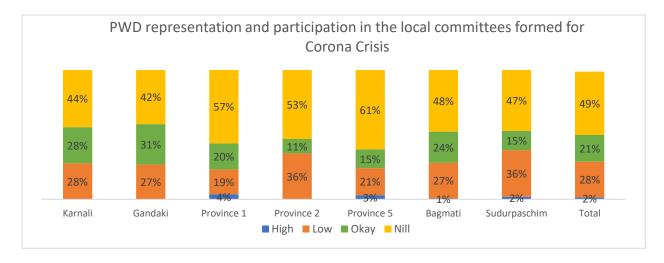




The respondents further noted needing support on matters such as psychosocial counselling, and home delivery of essential services. The graph on the left presents the findings in detail. For the 9% who reported needing other forms of support, they further elaborated they needed support such as technology to assist with disability, financial support, wheelchairs,



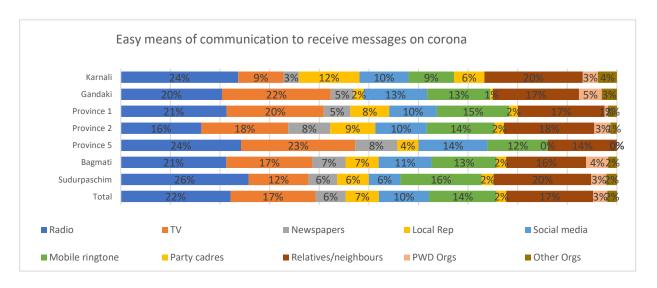
delivery of incentives at home instead for them to commute to the concerned offices. Some of the respondents also noted needing no support.



When the respondents were asked if PWD were part of any of the local committees formed to tackle the impact of COVID-19, 49% reported no such representation, 28% reported low representation, 21% reported an okay representation whereas 2% reported high representation.

• Access to information

The respondents were also asked what an easy means for them to receive COVID-19 messages were. To this, the majority (22%) said the radio. Other popular choices included the television (17%), information from relatives and neighbours (17%), social media (10%). More details are presented on the graph in the right.



4. Observations from the field



- PWD people still face difficulties in accessing the welfare allowance allocated to them. Different types of disabilities are treated differently by local authorities, depending on the colour of their disability identification card. This affects how they access their welfare. Red and blue card holders are most vulnerable and discriminated in the situation of disaster and emergency and also in the current pandemic. Also people without disability ID card are also not well captured or did not get proper welfare services.
- There is a need to monitor whether or not the issues for the welfare of the PWD materialize at the local grassroots level. Many respondents at the grassroots shared that there are organizations and government bodies that collect data and information from them, but development projects hardly materialize. Furthermore, whether or not the government has accurate data on PWDs in their communities is also questionable. This only adds to their plight.
- The survey respondents felt that there were limited disability friendly infrastructures in place in their respective communities, and the quarantine facilities were also not PWD friendly.
- The information disseminated on the pandemic was not accessible for PWD and they did not know what the proper government complaint mechanisms to report such cases were.
- Moreover, they also noted the lack of representation from PWD people and organization in different committees and sub-committees, also formed specifically to address the challenges posed by the novel coronavirus.
- Other common observations included a loss of income source during the pandemic, increase in various forms of discrimination and violence, limited access to proper education.
- Respondents have shared that the relief distribution was not always transparent and impartial.
- The education of the children has greatly been impacted with many having no access to any form of education. Although the government has initiated alternate forms of education following the pandemic, these are online systems and not disable friendly.
- Some of the respondents also felt that the civil society bodies were not doing enough to support their needs.

5. Best Practices/Lessons Learned

Province 1:

- The survey provided the volunteers with the opportunity to understand the issues of PWD better. It also depicted that many of the respondents were not able to access their basic rights.
- It was a learning that PWD need to be included in the decision making to better cater to their own needs. Many of the PWD population were not represented in the committees formed to



- address the impact of COVID-19. This risked their needs being left behind.
- The needs of the PWD is different and these differences must acknowledge accordingly.
- In Province 1, civil society bodies like Karuna Foundation was engaged in provided skills-based training to PWDs, which was extremely effective. The trainings included doll making, sewing cutting.
- Private sector employers and local level should approach programmes in line with laws on PWD to make materials accessible to this group.

Province 2:

- Although the local authorities acknowledge that there is work being done to include PWD in all
 matters at the local level, the respondents felt that there were still many things to do. For example,
 there is a need to make the infrastructures PWD-friendly to ensure it is accessible. Moreover, some
 of the local authorities also admitted to not being able to utilize the resources that comes for the
 welfare of the PWDs.
- A lot of the times, PWD population were not aware of what the state is doing for them. This is also one of the results of poor access to information. And the civil society bodies are also not playing an effective role to facilitate this.
- In general, PWD were also less interested in matters of how the government sought their engagement because of a general limited access to information.
- The information disseminated against COVID-19 should also highlight precautionary measures so that PWD and the rest of the community can seek to protect themselves.
- Education should be made accessible to PWDs. The use of technology, orientation to caregivers or guardians of the PWDs and including PWD in the decision-making process can help ensure they are included on matters that concern their welfare.

Bagmati Province:

- Matters of accessibility and inclusion for PWD is difficult event in normal situations, and during pandemics, the issue is particularly heightened.
- The infrastructures in the community are also now PWD friendly.
- PWDs access to information must be enhanced. A lot of respondents reported that they could not access much of the information as it was not PWD friendly.
- The differences within PWD should be taken into account while designing information material for them
- There must be various means of ensuring accessible information for the PWD: sign language interpretation, pictures, captioning, information combined with sound and text.
- There is lack of inclusion of PWD in local committees and it is due to lack of access to right information through PWD friendly manner. Their representation must be boosted by ensure accessibility.

Gandaki Province:

- A well-managed quarantine facility, separate for male and female, must be managed. Females who have stayed in a same-sex quarantine have faced a host of problems and have reported to not feel safe in them.
- PWD with intellectual disabilities live in a more dire state.



- There is an added burden of earning for the family at a time when jobs are difficult to come by. The limited economic activities and opportunities to earn sometimes translates to increased violence at home. This is also perpetuated by limited transportation.
- In parts of the province, there is work going on with schools to raise awareness and advocacy on the issue.
- To ensure PWD accessibility and inclusion, there needs to be a provision of ensuring there are caretakers for them. This can include sign language interpreters, escorts, having PWD friendly transportation and targeted education.

Province 5:

- In interacting with local representatives, there is no representation of PWD in committees against COVID-19. This may be because they are less active and can't participate even when they want to. To address this, there is a need to capacitate them, provide them with incentives so their voices are heard. This will also serve as an encouragement to them.
- To facilitate their access, the concerned authorities must focus on manging transport facilities and proper health care access for them.
- To be able to deliver better, there is also a need to coordinate with other agencies.

Karnali Province:

The following information is based on the survey data collected, as the presenter from the province was unable to present during the webinar.

- Based on the survey, the respondents said that 22% of them faced economic harships, followed by 19% who experienced mental stress.
- 67% of the respondents also reported to have decreased income post COVID-19.
- In terms of accessing information on the pandemic, 70% of the respondents from Karnali felt that it was not PWD friendly.

Sudurpaschim Province:

- There are a lot of health difficulties for PWD in Surdurpaschim, because of the geography, lack of big hospitals, lack of medicines. To address this, the youth volunteers coordinated at the local level, however any action remains to be taken.
- PWD do not have a fair access to relief distribution; often times they are not aware of when and where relief material is being distributed.
- The lives of PWD in Sudurpaschim is very difficult even access to clean drinking water, particularly during monsoons, is a problem.
- There is a need to provide job creating opportunities for PWD. This way, their livelihoods and more sustainable and they do not have to be reliant on anyone.
- Young PWD should have access to accessible schools. This can be supported by international development partners and the youth.
- The governments also need to be wary of the fact that a lot of relief that is coming specifically for the PWD is not reaching them.



• Support that comes for PWD also doesn't reach them. The government needs to be aware of this.

6. Recommendations:

- The fact that many PWD respondents did not have PWD friendly bathroom in their house is reflective of the associated health risks and concerns. There is therefore scope to enhance engagement on this work.
- The respondents shared that the government as well as various bodies had collected data and information from PWDs, but no concrete actions or follow-ups were made. There was therefore a clear request for proper monitoring, evaluation at the field level to ensure that the information provided in the data gathering phase materialized at the local level.
- The youth can play a role to aid the PWD community have better access to information by ensuring their access to factual information.
- A way in which the government can be sensitive towards the needs to the PWD is by ensuring that their locality is accessible by the PWD; that PWD have access to income generating opportunities and have access to skills-training so that they can work at their own homes and earn a living. Moreover, the family members of PWD can also be provided with job opportunities to ensure a steady access to income.
- There is a lot of scope to introduce mental health counselling and health counselling in the provinces.
- There was a call to capacitate organisations that are working for the welfare of the PWDs so that they can meaningfully impact their lives. This is especially true in the current COVID-19 context, where there is a knowledge gap on how best to include PWDs in the process.
- Those present requested for emergency relief for the urgent needs of persons with disabilities, especially for persons with disabilities in urgent need of medical care and service. In addition, relief materials including food, personal protective equipment, financial allowances should also be provided to ensure PWDs access to relief materials.
- It is imperative to ensure that the government's support package is disability inclusive and provides information on the relief packages accessible to PWDs in simple and easy formats.
- While considering PWD's employment and educational opportunity, it is important to consider virtual platforms too. There is a need to promote new online employment opportunities for persons with disabilities in the private sector.
- Conducting sensitization campaigns on issues of PWDs for the general public would prove to be very effective. The local government should initiate support activities to the PWD of their areas. Special targeted budge should be allocated to PWD.
- Persons with disabilities, who are homeless, should be provided with water, food, shelter and health care on an equal basis with others and so as to be able to exercise basic human rights and protect them from the risk of contracting COVID-19.
- Caregivers of the PWDs should be considered as essential workers and should be provided with basic education and awareness on how to provide care. Their mental health should be taken care of during pandemic. Moreover, home based treatment options should be considered for the PWD.
- The local government should keep a record of the PWD of their locality and should take the responsibility to provide essential medical kits, medicines to them during any emergency situation.
- Monitoring and complaint mechanisms should be conducted and implemented effectively. The learning and education materials prepared by educational institutions should also be periodically reviewed, revised and updated so that PWD can access them.



- Regular interactions and meetings with PWD people need to be conducted to provide necessary support for their welfare.
- Health workers working for the COVID 19 are not aware, familiar and sensitized about PWD issues. Many of them do not know how to communicate with deaf and there is no availability of sign language interpreters at hospitals and health centres. Therefore, particular attention needs to be paid to ensure that the health workers are trained and can ensure PWD's right to health.
- The Government run hotlines on COVID 19 need to be made disability friendly.

7. Conclusion

The event was filled with enriching insights from the presenters of the seven provinces as well as the experts for the webinar. All those present lauded the effort of the volunteers who led the webinar. The experts also shared how they were working to address the myriad issues caused by the pandemic. The presentations underscored that the economic independence of PWD needs to be boosted. And there are many things that can be done to boost the economic independence of PWD at the community level: improve infrastructures; collect and manage data on PWD; provide skills development trainings; collaboration with various agencies for the upliftment of PWDs.

Moreover, various kinds of programmes can be formulated focusing on PWD at the local level and the youth can play an active role to support this. For example: home-based work can help in income generation; providing employment to a family member of the PWD; psychosocial counselling. And the youth can work on awareness raising on stigma associated with PWD, social stigma on COVID-19 to bridge the gap between PWD and local level.

A. ANNEX

Annex 1: List of Experts and Presenters

Experts: The following experts provide their input in the webinar:

• Dr. Basu Dev Kafle, Professor of Inclusive Education, Tribhuvan University

Professor Kafle highlighted the plight that PWD face in every sector, including health, education and security. Questioning if this is okay, he emphasized that it is not. Moreover, he pointed to the survey findings to share his concern. He then echoed that PWD do not have the access and very few have been able to benefit from the services provided for their welfare. In order to address this, he suggested that the local government should have budget allocated for this task, terming it disability inclusive budget, and said that PWD should be included in the decision-making process. He suggested the government should reduce tax on technology imported for the welfare of PWD and said that there needs to be a unified policy at the national level for the welfare of the PWD which should acknowledge the 4 Rs – rights; responsibilities; relations; responsiveness.

• Simrika Sharma, Public Information/Information Manager, UNRC

Ms. Sharma spoke to the participants about UN75, sharing that this is a survey that ensures the voice from maximum people as the UN marks its 75th birthday. The survey form can be accessed here:



https://un75.online/. She informed the participants that the responses to the survey will inform where the UN advances in the future and acknowledged the importance of including all voices in a consultative manner in the process. In Nepal, 5367 people have already filled the survey form and Nepal aims to fill 100,000 forms by reaching closed groups, educational institutions and different clubs. The findings from the survey will help to design a road map for UN for next 25 years with a concrete development goal. She further informed that UN wants to be as representative and inclusive and make people aware, educate them and engage them. The findings from the survey will be presented to the Secretary General.

Volunteers: The following volunteers presented the major issues from their provinces:

Province	District	Name of the volunteers	Remarks
1	Ilam	Safalta Rai	Indigenous
2	Dhanusha	Saroj Kumar Mahato	Indigenous
Bagmati	Dolakha	Kusum Ghimire	PWD
Gandaki	Myagdi	Rashmi Shrestha	
Province 5	Palpa	Barun Bashyal	Dalit
Karnali	Humla	Bidhya Budha	Indigenous
Sudurpashchim	Darchula	Mahesh Singh Karki	