



नेपाल अपाङ्ग महिला संघ

NEPAL DISABLED WOMEN ASSOCIATION

Recommendations for an Inclusive and Accessible COVID-19 Response

The COVID-19 pandemic has particularly affected women with disabilities, who have largely been left out of meaningful participation in decision-making processes in the global pandemic response. To advocate for inclusion of women with disabilities in the Nepal government's COVID-19 response and decision-making during the pandemic, the Nepal Disabled Women Association (NDWA) developed a series of recommendations which NDWA will use to advocate to all three levels of government for disability and gender-inclusive COVID-19 policies and plans.

With support from the International Foundation for Electoral Systems (IFES), NDWA has formulated these recommendations through virtual discussions with its women advocates with disabilities from all of its five "Power to Persuade: Empowering Women with Disabilities to Influence Public Policy" program districts, Kavrepalanchowk, Gorkha, Dhading, Kanchapur and Morang. These recommendations represent the voices of women advocates with disabilities, who urge the government to prioritize an inclusive and accessible COVID-19 response at all levels of government. NDWA women advocates with disabilities identified unprecedented barriers faced by women with disabilities during the COVID-19 pandemic and puts forth its recommendations as follows:

1. **Prioritize psychosocial counseling programs for women with disabilities.** Women with disabilities, who are unable to leave their homes due to government-imposed movement restrictions and barriers such as inaccessible transportation and restrictions from family members are at increased risk of experiencing depression, anxiety or other forms of adversity. Therefore, community-level psychosocial counseling support programs, supported by local government, for women with disabilities is needed.

2. **Advance employment opportunities for women with disabilities during COVID-19 pandemic.** Many women with disabilities have either lost their jobs or have no access to employment opportunities during this pandemic. Following health and safety measures, all three tiers of government should provide skills enhancement trainings to women with disabilities so they can seek employment opportunities.
3. **Provide training to women with disabilities to make face masks and hand sanitizers.** Local governments should provide training to women with disabilities to make face masks and hand sanitizers and facilitate the marketing of such products in their communities.
4. **Ensure inclusion of women with disabilities in local-level Disaster Risk Management Committees.** The Disaster Risk Management Committees formed under each municipality and rural municipality should include women with disabilities as committee members. Furthermore, the committees should hold consultations with women-led disabled people's organizations or groups.
5. **Build accessible and gender-sensitive quarantine shelters.** Quarantine shelters built by local governments are often not disability accessible nor gender-sensitive. Typically, there are not separate lodging rooms for women and shelters lack menstrual hygiene products, accessible toilets, bathrooms, taps with running water, wash basins, sufficient beds etc. Local governments should strictly follow and implement the accessibility quarantine shelter provisions given in "The Interim guidelines regarding the flow of essential health and rehabilitation services for people with disabilities in the context of the COVID-19".
6. **Public information on the COVID-19 pandemic should be provided in accessible formats.** Programs and public information at the local level (ward and municipal offices) are often not accessible for persons with disabilities. Local governments should adopt policies of conducting programs and publishing information in accessible formats, particularly in relation to the COVID-19 pandemic and other matters of public health and safety. Examples of accessible information formats include sign language interpretation, braille, closed captioning and easy-to-read format.
7. **Plan and implement accessible online classes for students with disabilities.** The Ministry of Education at the federal level, the Social Development Ministry at the provincial level and local governments should jointly plan and implement accessible online classes for students with disabilities, including sign language interpretation, Braille, closed captioning and/or easy-to-read format.
8. **Provide assistive devices for persons with disabilities.** During the COVID-19 pandemic, demand for the provision and maintenance assistive devices, such as hearing aids, is increasing. If persons with disabilities do not have assistive devices, they may be further marginalized and lack access information or employment opportunities. The local governments should provide assistive devices and maintenance services to persons with disabilities that require them.

9. **Provision of personal banking so persons with disabilities can access their social security allowances.** The social security allowances provided by the government to persons with disabilities is credited to different banks and to collect the allowances, either the person with a disability or their representative must be physically present at the bank. This puts persons with disabilities at greater risk of exposure to COVID-19 and means they may not be able to access the funds due to restricted mobility during the pandemic, which is particularly a challenge for women with disabilities who have increased caregiver responsibilities during the pandemic. The municipal-level disability coordination committee should facilitate social security services provided by such banks to persons with disabilities through personal banking systems, such as the delivery of security allowances to their homes.