

Image Credit: Artist Mahnaz Yazdani

Disability and the COVID-19 Pandemic

ESCAP Expert Group Meeting: Final Review of the Asian and Pacific Decade of Persons with Disabilities (2013-2022), 22-23 June 2022



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Some Resources

<https://bit.ly/3beBPfB>



1. Disability and the COVID-19 Pandemic
2. COVID-19 and its impact to the future generations
3. Situation of Persons with Disabilities in the COVID-19 Pandemic and Access to ICT (special focus on Women and Girls)
4. Post-COVID School Recovery in Malaysia

https://drive.google.com/drive/folders/1z8NcSmztJbGWBQBWDrUyb_D8cbzA2B Va?usp=sharing

Outline

1. COVID-19 Future - How the Pandemic is Changing
2. The Impact of COVID-19 on People with Disabilities & Disability Services
3. The Concerns of Long COVID
4. Disability Inclusion in the Post-Pandemic Period
 - Suggestions for consideration: ESCAP secretariat action
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[References in document](#)



Three Pandemics

1st Pandemic: **COVID-19**

2nd Pandemic: **Widespread Mental Health Issues**

3rd Pandemic: **Potential Mass Disability Event**

COVID-19 Future

How the Pandemic is Changing

- Important Caveat: Information regarding COVID-19 changes over time (much disinformation)
- COVID-19 pandemic is not over
 - Even with effective vaccines, we can expect fresh waves of new COVID-19 variants of concern for another 1-2 years
 - Some may evade the protection immunisation offers
 - Natural infection by recent variants (Omicron) do not confer additional immunity

"Without testing, without sequencing, without public health measures in place, we are really playing with fire with this virus. I understand that the world wants to be done with the COVID-19 pandemic, but such intense circulation will lead to more variants. Even with current variants, deaths are far too high and totally unacceptable when we have tools to prevent them."

Dr Maria Van Kerkhove
Infectious Disease Epidemiologist,
Technical Lead, World Health Organization
June 15th, 2022

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The Impact of COVID-19 on People with Disabilities & Disability Services

The COVID-19 crisis has exacerbated existing inequalities in society.

It has further excluded and marginalised persons with disabilities.

Support Service and Rehabilitation Progress Lost, Diagnosis Delayed

- **Access to all types services** during the pandemic were lost to varying degrees
 - In one Malaysian study on average 36% reduction in services
- PWD hard hit by a **loss of support services and rehabilitation progress**
 - Access to hospitals / clinics due to infection concerns
- Children newly-identified as having disability, now have a **later diagnosis**, later therapy and hence poorer outcomes
- Children in special education have not been able to physically return to school (2020/2021); serious **loss of education progress**

Support Service and Rehabilitation Progress Lost, Diagnosis Delayed

- Many community-based rehabilitation centres and early intervention centres remained closed for much of the past 2 years
 - In Malaysia, 25% of pre-school services have closed down
 - Many EIP centres struggling due to loss of community & parent funding
- **Enormous challenges to restart community disability services**
 - Anticipated surge in demand for services
 - Major impact for many years to come

Social Isolation, Increased Abuse, a Growing Mental Health Pandemic

- Many persons with disabilities have become **isolated at home** (with behavioural challenges)
- Prolonged home confinement has **increased domestic violence**, physical and sexual abuse
- Increased anxiety, stress, and depression in PWD and those with chronic health conditions
- This is just beginning:
 - The **COVID-19 pandemic is becoming a mental health pandemic**
 - Anxiety, post-traumatic stress disorders (PTSD) and suicides may increase long-term

Communication, Internet, Work

○ Inadequate Communication and SOP Compliance Issues

- Problems receiving on time COVID-19 information in formats and languages that they can access (blind, print-disabled, deaf, hard-of-hearing, persons with cognitive impairments)
- COVID-19 SOPs are challenging for persons with diverse disabilities to follow (mask wearing, touching surfaces, lip read, support of non-live-in personal assistants)

○ Increased Reliance on Online/Internet Connectivity

- Prolonged lockdowns meant that Internet and digital device access for PWD has become crucial
- Malaysian study: 23% of PWD had Internet access that worsened or was lost during the pandemic

○ Loss of Income and Jobs

- Persons with disabilities who survived on street vending, busking or tourism-related means of income are among those who have had loss of vital income (daily wage) and have limited or depleted financial reserves
- Food insecurity and loss of funds for paying rent and utilities have become real issues

Impact on Childbirth and Women

- Impact of Delaying Marriage and Childbirth
 - Delay in marriage and having a child
 - In Malaysia, there was a 11% reduction in births in 2021 – may be prolonged
 - Anticipated significant rise in older age pregnancies, with the risk of disabilities
- Impact on women with disabilities
 - UN Women-Sight Savers report on women with disabilities in 10 Asia-Pacific countries during COVID-19 emphasized significant difference in experiences for women with disabilities compared to men with disabilities
 - However, the report did highlight that this was not universal
 - In Malaysia, the lack of accessible communication was a bigger challenge than gender differences

Benefits of COVID-19 Pandemic to PWD And Allies

- Pandemic exposed and worsened long-standing systemic inequalities in society - galvanized some in community to fresh action
- Individuals in the community organized themselves and made home delivery of essential supplies to PWD
- Limitation on meeting physically has enabled an unprecedented **mushrooming of online connections and dialogues**
 - Linkages have been forged that will transcend the pandemic and facilitate networking among diverse groups and individuals
- Online support
 - Some organizations have initiated **tele-therapy for rural or hard-to-reach communities**, improving the shift to family-centred care
 - Some hospitals have initiated **online medical consultations**
- Where digital devices and Internet access are freely available or easily affordable:
 - Persons with disabilities are able to have **increased participation in online learning, income-earning and capability building options**
 - Employees with disabilities were able to benefit from **work-from-home arrangements**

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The Concerns of Long COVID

The COVID-19 pandemic may well become the greatest mass disabling event in human history

Also termed Post-Acute Sequelae of SARS-CoV-2 Infection or Post-COVID Conditions or Post-Acute COVID syndrome (PACS)

Symptoms of Long COVID

- Fatigue, brain fog, depression, anxiety, insomnia
- Joint or muscle aches, shortness of breath, chest tightness, GIT symptoms, changes in menstrual cycle
- The cause of Long COVID is still uncertain:
 - Viral persistence
 - Micro-blood clots
 - Chronic inflammation (damage to the immune system)

Risk of Long COVID

- Data from 50 international studies
 - **Worldwide prevalence of Long Covid is 43%** (95% CI 39-46%)
 - Hospitalised patients 54%, non-hospitalised 34%
 - Rates highest in the Asian studies

Global Prevalence of Post COVID-19 Condition or Long COVID: A Meta-Analysis and Systematic Review

<https://academic.oup.com/jid/advance-article/doi/10.1093/infdis/jiac136/6569364>

- Long Covid risk after an **asymptomatic infection ~20-30%**

Many 'Long Covid' Patients Had No Symptoms From Their Initial Infection

<https://www.nytimes.com/2021/03/08/health/long-covid-asymptomatic.html>

- Data on **children** pooled from 21 studies showed a **25% risk**

Long COVID in Children and Adolescents: A Systematic Review and Meta-analysis 2022

<https://www.medrxiv.org/content/10.1101/2022.03.10.22272237v1.full.pdf>

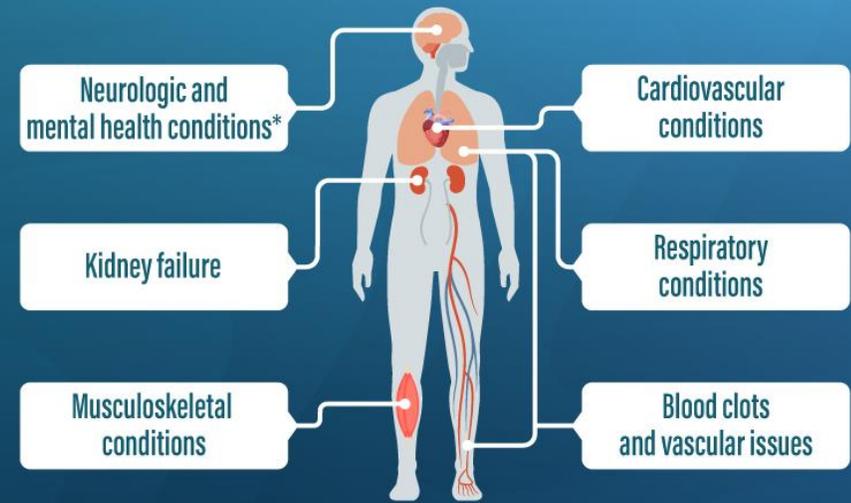
- **Vaccination may decrease** the risk of Long COVID by only **15%**

Ziyad Al-Aly, Benjamin Bowe and Yan Xie (2022). Nature Medicine

<https://www.nature.com/articles/s41591-022-01840-0>

Risk of Long COVID

Approximately
1 in 5 adults
ages 18+ have a
health condition
that might be related to
their previous COVID-19
illness, such as:



**Talk to your health care provider
if you have symptoms after COVID-19**



bit.ly/MMWR7121

MAY 24, 2022

* Adults aged 65 and older at increased risk

MMWR

- May 2022 report on Long COVID by US CDC
- “one in five COVID-19 survivors aged 18–64 years and one in four survivors aged ≥ 65 years experienced at least one incident condition (persistent symptoms or organ dysfunction) that might be attributable to previous COVID-19)”

Bull-Otterson L, Baca S, Saydah S, et al.
Post-COVID Conditions Among Adult COVID-19 Survivors Aged 18–64 and ≥ 65 Years — United States, March 2020–November 2021.
MMWR Morb Mortal Wkly Rep 2022;71:713–717.
<http://dx.doi.org/10.15585/mmwr.mm7121e1>

○

Impact of Long COVID on the Brain, Heart and Other Organs

- Mental Health Pandemic & Impact on Development of Children
- **Multi-organ impairment in 59% of LC at 12 months** (heart, brain, lungs, endocrine)
 - 3 in 5 people have impairment in at least one organ
 - 1 in 4 have impairment in two or more organs
- ICU Care persistent cognitive impairment (~loss 10 points in IQ, 6-10 mths later, recovery gradual)
- 0.5-2% brain shrinking in adults compared with b4 pandemic, even mild infections
- CNS impact 10-30 years from now - ?dementia risk
- Increased disability rates (30-50% of the pandemic's overall health burden)

Multi-organ impairment and Long COVID: a 1-year prospective, longitudinal cohort study. <https://www.medrxiv.org/content/10.1101/2022.03.18.22272607v1>

Laura Spinney. **Pandemics disable people** – the history lesson that policymakers ignore. Nature, 16 Feb 2022

Briggs & Vassall. **Count the cost of disability caused by COVID-19**. Nature, 26 May 2021

Maia P. Smith. **Estimating total morbidity burden of COVID-19**: relative importance of death and **disability**. J Clinical Epid. Vol 142, P54-59, Feb 2022

Spudich & Nath. **Nervous system consequences of COVID-19**. Science, 20 Jan 2022, Vol 375, Issue 6578

Shuffrey, Firestein, Kyle, et al. Association of Birth During the COVID-19 Pandemic With **Neurodevelopmental Status at 6 Months** in Infants With and Without In Utero Exposure to Maternal SARS-CoV-2

Infection. JAMA Pediatr. Jan 04, 2022. doi:10.1001/jamapediatrics.2021.5563

Risk of Cardiovascular Events after Covid-19: a double-cohort study <https://www.medrxiv.org/content/10.1101/2021.12.27.21268448v1>

Long Covid, Example

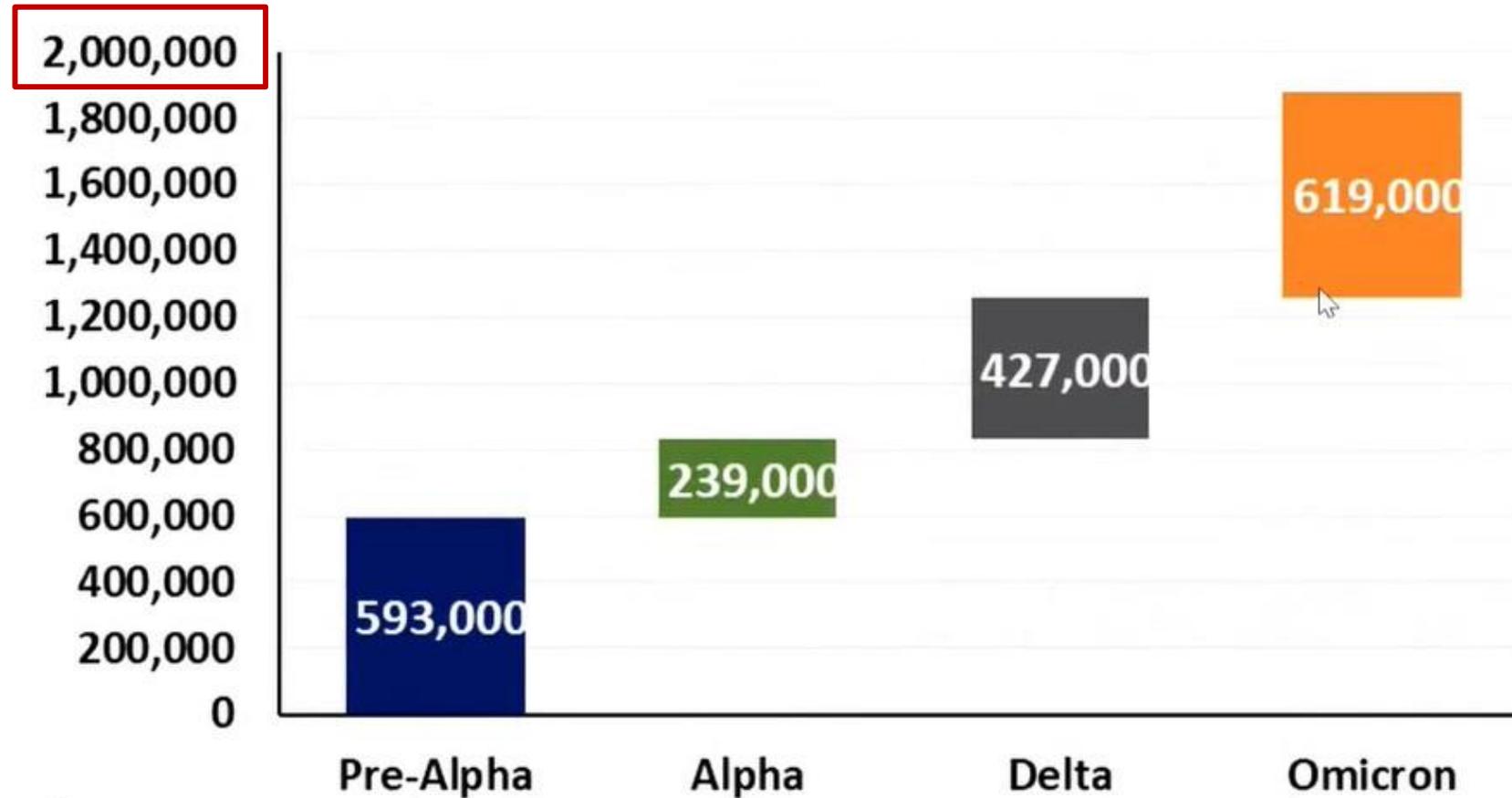


10-year-old Jasmin, daughter of Dr Kane, Consultant Respiratory Physician, UK

<https://metro.co.uk/2022/03/18/kids-with-long-covid-i-want-my-pre-covid-children-back-16278455/>

Number of People Living with Self-Reported Long Covid in the UK by Variant Type: Apr 4 - May 1, 2022

(Source: ONS Prevalence of ongoing symptoms following coronavirus (COVID-19) infection in the UK Reports)



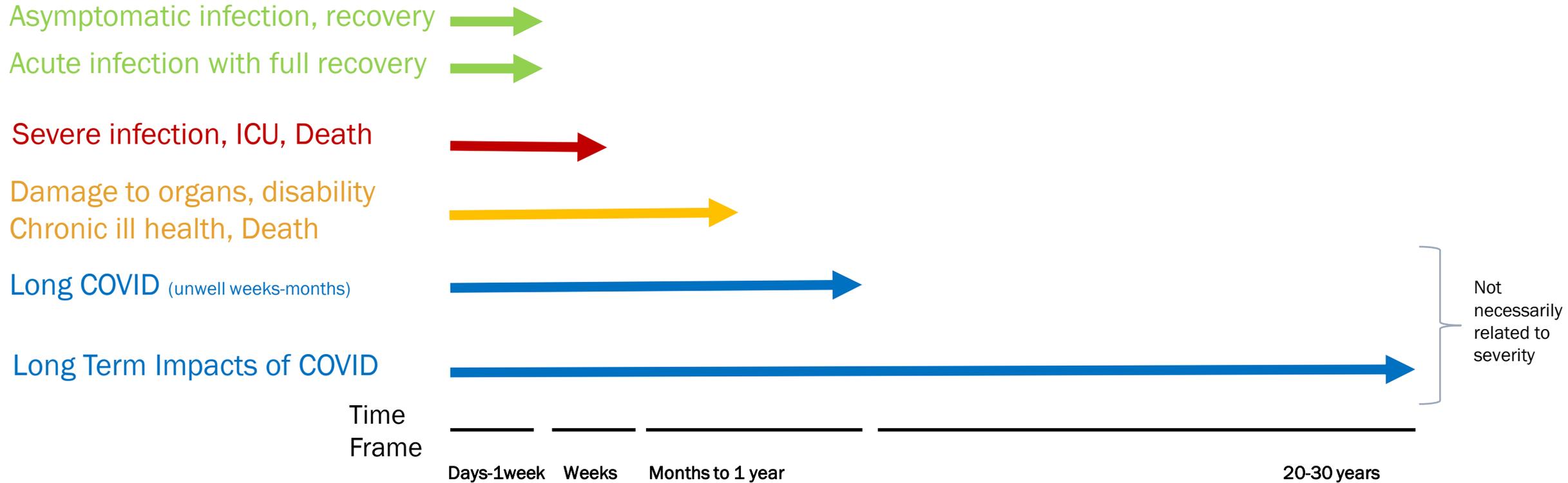
All

Thanks to Bob Hawkins for the chart

<https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/conditionsanddiseases/datasets/alldatarelatingtoprevalenceofongoingsymptomsfollowingcoronaviruscovid19infectionintheuk>

COVID-19 Outcomes

1. Immediate – admission, organ damage & death risk
2. Intermediate – Long COVID
3. Long Term Burden



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Disability Inclusion in the Post-Pandemic Period

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COVID-19 is a **wake-up call** to live as ‘humanity.’

We all have a choice to work towards a more equitable society where everyone can be given dignity and respect as a human being, and end the great disparity between persons with disabilities and the rest of society

Suggestions for consideration: ESCAP secretariat action

1. The pandemic has exposed gaps and inequalities in services for persons with disabilities. Highlight evidence to Governments of the ESCAP membership, to:
 - **Use lessons from the pandemic to improve support for persons with disabilities.**
 - Have mechanisms to map persons with disabilities / communities that have been excluded
 - Ensure adequate resources to ‘close the gap,’ particularly gaps faced by rural, indigenous and poor urban communities/families that have members with disabling conditions.
 - Introduce changes that are sustainable in the long run, to end inequalities permanently.
2. An important lesson from the pandemic is the **enabling and empowerment of persons with disabilities when digital devices and Internet access are freely available.**
 - How can ESCAP, with other members of the United Nations system, leverage on this momentum and build on the rapid digitalization of societies as a tool to remove major barriers to the meaningful participation of persons with disabilities?
3. A vital responsibility -- ESCAP secretariat should bring to the urgent attention of members and associate members the need to:
 - Formally **recognize the enormous impact of Long COVID and the potential disability pandemic that is evolving.**
 - Communicate widely to all Government officials and the general public the science and data on Long COVID, to enable personal risk reduction, while Governments make concerted efforts to limit the spread of the virus and minimize Long COVID.

Attention for Governments (ESCAP members and associate members)

1. The pandemic has yielded important lessons for Governments and put in place **a post-pandemic national disability action plan**:
 - Mechanisms to **map persons with disabilities and their communities** (disaggregated data) that have been excluded and ensure adequate resources to ‘close the gap,’ in particular rural, indigenous and poor urban communities/families that have members with disabling conditions.
 - Mechanisms to ensure **financial security** for persons with disabilities and families who have dependants with disabilities.
 - Chart and **monitor the implementation and sustainability** of inclusion efforts for persons with disabilities.
2. It is important that Governments in the ESCAP region:
 - Hasten support for individuals affected by the mental health pandemic that is emerging in the wake of COVID-19.
 - **Strengthen significantly existing mental health services** in the national health systems and those offered by CSOs.
3. Governments in the ESCAP region must be enabled to **recognize** the following:
 - Enormous, **growing burden of disability from Long COVID**, potential to overwhelm health-care systems, damage economies.
 - **Reduce reinfection risk** via promoting: (i) Routine use of quality masks; (ii) Significantly improve ventilation systems indoors.
 - Offer **screening to all individuals who have had a COVID-19 infection**, to look for secondary conditions.
 - Accelerate work on therapeutic options to support people with Long COVID.

One concern is that once the pandemic settles, government and society may revert to old ways