

IDDC Inclusive Safeguarding Task Group response to COVID-19

During the current COVID-19 pandemic we are told to stay home – stay safe - save lives. For many, home is the place where they feel most safe, however, for some people, home is unfortunately not a safe place. It is important to remember that by restricting movement and asking people to “stay home” we are increasing the risk of harm to some individuals whose abusers may have access to their “home.” These measures can also reduce an individual’s contact with trusted individuals who they could disclose concerns too and other safeguarding reporting mechanisms.

We want to encourage both government and non-government actors to work to ensure that the COVID-19 response does not result in a de-prioritisation of protections currently being put in place for children and adults with disabilities. The global movement to create inclusive safeguarding practices is in its early stages and we urge actors to ensure that this work is not undone, as can be the case in emergency responses, so that the needs of children and adults with disabilities remains front and centre in any safeguarding response.

Where individuals are dependent on others for basic care and support needs, they are at higher risk of being harmed, exploited or abused when compared to individuals who do not depend on others in the same way for basic care and support needs. Those who seek to abuse, exploit or harass those who are less powerful than them, may exploit the opportunity to do so behind closed doors, during times when many are focusing their attention on the COVID-19 response. People who may be at increased risk of such harm include persons with disabilities in households, care environments and hospitals.

Children and adults with disabilities face a higher risk of all types of abuse, neglect and harm, when compared with their peers without disabilities. Women with disabilities are

10 times more likely to be victims of sexual violence than their non-disabled peers.¹ Children with Disabilities are 3.7 times more likely to be victims of violence than children without disabilities² and 2.9 times more likely to be victims of sexual violence.³

During the current COVID-19 situation, there is limited movement so people at risk of harm are less able to access support services, trusted individuals and safeguarding reporting systems, such as letters, concern boxes, emails are all affected by the current crisis.

Many state and non-state actors, such as Disabled Persons Organisations, have supported work to ensure that safeguarding is inclusive of persons with disability; it is essential to keep these resources and integrate these efforts in the COVID-19 response's design and implementation.

In response to the restrictions on movement and lack of accessible public information, it is important to consider the risks associated with increased use of the internet by some children and adults with disabilities. As many services move to online and telephone support, such as banks, doctors the risk of scams aimed at persons at risk, including some people with disabilities may rise. It is important for communication strategies to include the experiences of people with disabilities, to reduce the impact of misinformation and fraudulent scams of persons at risk.

An economic impact of COVID-19 is that many care and support workers for children and adults with disabilities are uncontracted workers or in unstable employment. The nature of care provided, also exposes the children and adults with disabilities and their carers to an increase risk of contracting diseases such as COVID-19. Those who work closely with children and adults with disabilities, such as support workers, teachers,

[1] ¹ FCI Programme for Management Sciences for Health & UNFPA. (2016) *We Decide Young Persons with Disabilities: Equal Rights and a Life Free of Violence*.
https://www.msh.org/sites/msh.org/files/we_decide_infographic.pdf [online].

[2] ² Hughes K, Bellis MA, Jones L, Wood S, Bates G, Eckley L, McCoy E, Mikton C, Shakespeare T, Officer A. (2012) *Prevalence and risk of violence against adults with disabilities: a systematic review and meta-analysis of observational studies*. *Lancet*; doi:10.1016/S0410-6736(11)61851-5.
https://www.who.int/disabilities/publications/violence_children_lancet.pdf?ua=1 [online].

[1] ³ World Health Organisation (2012), *Review on Violence against adults and children with disabilities*,
<https://www.who.int/disabilities/violence/en/> [online].

medical professionals, play a vital role in many safeguarding reporting systems, so it is important to work to ensure their employment is secure.

Research demonstrates a strong relationship between low income, social exclusion and disability among families who have a child with disabilities. Families with children with disabilities remain disproportionately likely to be in poverty, they are more than twice as likely as other families to be unable to afford five or more everyday items.⁴ What this can mean in crisis response settings, is that they will have increased contact with authority figures and humanitarian representatives, who may abuse the power they are perceived to have.

We call on governments and international development actors to ensure that:

- All COVID-19 information and public service announcements on how best to protect yourself are available in alternative accessible formats, such as Sign Language, Braille or plain text.
- Civil society, including organisations of people with disabilities, are consulted and included in responses to COVID-19 particularly in terms of their safety
- The voices of children and adults with disabilities, and their caregivers, are heard, and involved in the design and implementation of safeguarding response plans
- All COVID-19 information and public service announcements include contact information for people with disabilities to reach safe places
- Support organisations such as DPO's providing vital safeguarding support in communities for children and adults with disabilities are continued to be supported financially.
- Removing yourself from a place of danger is included in the valid reasons for leaving your place of residence during the lockdown

⁴ Every Disabled Child Matters (2007), *Disabled Children and Child Poverty*, <https://disability-studies.leeds.ac.uk/wp-content/uploads/sites/40/library/every-child-disabled-children-and-child-poverty.pdf> [online]

- Places of safety are exempt from the lockdown and allowed to operate within the context of social distancing guidelines as advised by the health authorities.
- Organisations with expertise in support to victims of abuse and exploitation are given special dispensation to operate during lockdown periods. Safeguarding resources and systems should be diverted to COVID-19 responses. Now more than ever the focus on inclusive safeguarding is needed, so nobody is left behind.
- A sector-wide review is carried out after the crisis response has ended. This review would look at how the COVID-19 response systems adapted to meet the needs of children and adults with disabilities and asks the question, what would you do differently next time?