



HVT Inclusive Access Network

Webinar:

The impact of COVID-19 on the mobility of disabled and vulnerable people

23 April 2020



Ann Frye – HVT Programme



Welcome

Louise Cathro – HVT Programme



Introduction

- HVT Programme objective
- Origin of the Inclusive Access Network
- Members



Update from HVT Programme

- Inclusion and the High Volume Transport programme
- Recent activities and outlook
- Inclusive access, transport systems and COVID-19: who is addressing the issues?
- Who is doing what and the need for coordinated response

Penny Innes – UK Department for International Development



Update from DFID Disability Inclusion Team

CHARLOTTE McCLAIN-NHLAPO



Perspective from the World Bank

SUBHASH VASHISHTH



Svayam (India)

AMIN AMIR ANDANI



**Network Organisation Working with
People with Disabilities, Pakistan
(NOWPDP)**

AMANDA GIBBERD



Department of Transport (South Africa)

Response from South African Government since 1st March:

- Regulations introduced for a nationwide lockdown
- Restriction of non-essential travel
- Support for people with disabilities
- Financial stimulus packages
- Learning from the experience of others
- Inter-departmental approach to problem solving



Can Lah (Mexico)

Solutions implemented in Mexico City and its Metropolitan area (State of Mexico) for public transport:

- Main issue
- Information
- Communication between local authorities
- Strategy to reduce mobility gradually
- Needs identified for policy changes
- Private transport services

MOHAMMED YOUSUF



EquallyAble Foundation (USA)

COVID Disability Relief Initiative:

- Food and essential relief
- Physical and mental tele-health support
- Virtual and digital empowerment
- Lessons learned and crisis analysis

Open discussion

Please type your questions into the chat box.



Ann Frye:

Summary and actions

Thank you

INCLUSIVE ACCESS NETWORK WEBINAR – SUMMARY NOTES

The Impact of COVID-19 on the Mobility of Disabled and Vulnerable People 23rd April 2020

Topic

While everyone is affected by the global pandemic, older people and those with disabilities are often disproportionately affected by the impact of the current restrictions on their mobility, health and wellbeing as well as on their access to information in formats appropriate to them (e.g. sign language, lip reading).

The webinar draws on current experiences from colleagues around the world working in this field and draws together thoughts on key issues and useful initiatives in place, or planned, to address them.

Presentations

Introduction: Louise Cathro, HVT Programme Manager

The [High Volume Transport Programme](#) (HVT) is a 5-year applied research programme funded by DFID focused on national and regional transport corridors and within cities in low-income countries in Africa and South Asia.

The HVT Programme is pleased to present this first webinar featuring our Inclusive Access Network.

The Inclusive Access Network originates from the panel members that participated in the Foresight Session on [Disability Inclusive Road Transport](#) held at the PIARC World Road Congress in October 2019. The session was organised by the HVT Programme on behalf of the UK Departments of Transport and International Development. The Session received the award for Best Session of the Congress, as voted for by the delegates.

The Network members are all experts in the field of inclusive mobility and social inclusion and originate from a wide variety of organisations including multilateral agencies, academia and civil society and from countries ranging from China to Mexico.

Update from the High Volume Transport Applied Research Programme (HVT): Bernard Obika, Team Leader

Inclusion is one of two main pillars for the HVT programme. Over the past year we have supported DFID's efforts in this area through a number of initiatives. As well as organising the Foresight session in Abu Dhabi:

- We have published the [Disability Inclusive Public Transport Policy Brief](#) – a document intended for policy makers;
- We will shortly be revising [ORN21](#), a document that helps technical experts design transport infrastructure that is inclusive;
- We have called for proposals for research suppliers to provide us with innovative research projects that can improve the inclusivity of transport systems in the global south; and
- We have several other inclusive access initiatives in addition to making sure that inclusion is integral to all we do in other areas.

As the COVID-19 pandemic takes hold in low-income countries, with transport systems being a primary mode of infection, we need to understand the impact on the most vulnerable and people with disabilities in particular. What are the inclusion issues and who is addressing those issues now and post-COVID-19?

HVT has just published a [short paper](#) calling for co-ordinated action by global transport sector key stakeholders on COVID-19. This publication is based on the findings of work we have done over the past few weeks to establish “who is doing what” in the transport sector in response to the pandemic. That study, regrettably, shows that no-one is paying particular attention to inclusive access despite the many important issues COVID-19 raises for inclusion.

Update from of the Department for International Development (DFID): Penny Innes, Head of the Disability Inclusion Team

Brief overview of DFID activities in relation to the implication of COVID-19 for people with disabilities:

- DFID is shifting much of its work to COVID-19 and many of its programmes are being redirected towards fighting the pandemic.
- DFID is gathering evidence on the impact on people with disabilities.
- People with disabilities are more likely to contract the virus. Social distancing is unfeasible if you rely on a caregiver. They are also more likely to develop serious complications from those affected by secondary impacts – lower access to healthcare etc.
- It is important to involve people with disabilities in developing appropriate responses, preferably in a leadership role.
- A key issue is for communication in appropriate formats to meet the needs of people with impaired vision/ hearing, intellectual impairment etc.
- DFID is working on disaggregating data so the picture of the impact on people with disabilities can become clearer.

The approach of the World Bank: Charlotte McClain-Nhlapo, Global Disability Advisor

- Many people with disabilities are not able to access critical medical appointments. Travel restrictions need consistent messages that can be understood by all – particular concerns for those with intellectual and developmental disabilities.
- The World Bank has introduced a requirement that by 2025, all urban mobility projects must be disability inclusive. They are also working on 3 projects:
 - Sustainable mobility for all;
 - Enhanced road safety outcomes; and
 - Disability resulting from road crashes (funded by DFID).

Additional slides from Charlotte included at the end of this summary.

Global snapshots

Subhash Vashishth, Svayam, India

- India is observing a lockdown with only essential services open. The level of lockdown varies depending on the level of virus impact with relaxing of restrictions in some areas to allow the opening of all standalone shops. Strict social distancing must still be observed.

- Government has issued ‘Comprehensive Disability Inclusive Guidelines’ for implementation by all States and Union Territories to be followed during the COVID19 lockdown.
- Public transport services are closed however, 25% of buses are operating purely to transport key workers involved in essential services.
- Masks are mandatory for all when you step out of home.
- Delhi has established a large number of food centres for migrant labourers that are now unemployed. All residents eligible for subsidised dry rations (grains), are also given a fixed additional quantity per person by the state through a well-established public distribution system. State Commissioners for persons with disabilities have been declared as the nodal authority to cater to the specific needs of persons with disabilities.
- Blood donation is organised to keep the blood bank full for the transfusion needs of people with blood disorders. In addition, all hospitals have created isolated COVID-19 centres. In Delhi, five major hospitals are COVID-19 only hospitals.
- Curfew passes are issued online for essential services; a category for ‘Caregiver of person with disabilities’ has been added to ensure support needs continue.
- Challenges:
 - No accessible taxis in most states. Disabled people have to rely on ambulances to get to hospitals, personal vehicles or some NGO-run special vehicles.
 - Facemasks are impacting the ability of deaf people to communicate. Some NGOs have promoted masks that are transparent near the lips but that is not the norm when everyone is asked to use homemade washable cloth masks.
 - People with cerebral palsy, spinal injuries, polio survivors and those with other mobility challenges suddenly have no access to therapy services and many have reported developing stiff joints to helplines.
 - Phone repair shops are closed, and many disabled people face problems with non-functioning phones.
 - While most education institutions are providing online classes, the education of disabled students is affected as the provisions are not friendly to disabled students particularly with hearing and intellectual challenges.

Amin Amir Andani, NOWPDP, Pakistan

- To date, around 10,500 infections, 220 deaths, and 2300 recoveries related to COVID-19 have been recorded.
- Airlines, railways and intercity buses and ride-hailing services are non-operational.
- Only private transportation, grocery or medicine deliveries, and few rickshaws are visible on the road.
- People with disabilities are facing issues particularly in relation to medical needs due to a lack of public transportation.
- Welfare activities:
 - Ehsaas Emergency Cash Programme pays 12,000 Pakistani Rupees to 12 million families and this is accessible to people with disabilities who access the funds from mobile shops.
 - Door-to-door ration distribution by bike sharing services.
 - Telehealth services are free for people with disabilities.

- NOWPDP has taken responsibility of 3,500 people with disabilities and their families for the next 3 months (ration, skills and livelihoods). Shifted training to online media which has resulted in better attendance compared with physical classes.

Amanda Gibberd, Department of Transport, South Africa

- Poverty and difficulty with access to food are also issues for South Africa. Overcrowding in townships and lack of access to water (for handwashing) are also causing anger.
- All non-essential travel is restricted, and government departments are working together to get food and hygiene equipment into people's homes.
- South Africa has large network of mobile phones so use of WhatsApp is key for communication.
- People with learning disabilities and autism are badly affected by the lockdown; support is being given on case by case basis.
- There is a financial package to stimulate the economy, including social grants for people with disabilities/ older people.
- There is a need for international guidance on transport as a transmitter of the virus and greater clarity on issues such as the effectiveness of wearing masks.

Timeline of the South African response to COVID-19 attached at the end of this summary.

Janett Jimenez Santos, Can Lah, Mexico

- For a number of reasons, Mexican citizens distrust their government; some think COVID-19 pandemic is a fraud while others are afraid.
- Information has been a key factor; transport authorities have been creative in giving information for people with different levels of education (e.g. with drawings, comics, alien characters, etc.) considering cultural aspects to make sure the right message is sent. Information is provided in different formats (visual, audio, videos, etc.).
- Gradual actions have been taken for public transport, implementing tighter measures one step at a time. All transport systems in Mexico City and its metropolitan area are in constant communication to ensure consistency in approach and information provided to passengers.
- Strategy implemented to reduce mobility gradually - closing metro stations that are not critical, reducing the passenger capacity of buses (by 50%) to allow social distancing however, this has resulted in increased costs to travel. Local authorities must implement their own programs in co-ordination with different stakeholders.
- Regulations introduced for sanitary measures in public transport for the future for the protection of bus drivers (plastic screen in the cabin, gloves and face masks), operational aspects.
- Disposal of protective equipment has resulted in a large amount of trash.
- Ramp vehicles have been successful to assist people with medical issues to access health services. International standards for accessible vehicles are needed as well as an economic model for effective systems and protocols for accessible transportation.

Mohammed Youssef - The EquallyAble Foundation, USA

- Created a COVID-19 Disability Relief Initiative to provide food and essential relief, physical and mental tele-health support, virtual and digital empowerment and crisis analysis.

- Working with Easter Seals, agreed a grant of US\$25k towards COVID-19 Disability Relief Fund created to support over 1 million people with disabilities in the USA.
- Supporting 6000 individuals with disabilities globally with food for a month.
- Available to assist partners in developing countries.

Discussion

Tom Rickert, Access Exchange International (AEI)

AEI had drawn up advice for people with disabilities in dealing with COVID-19 – posted on their website <https://www.globalride-sf.org/COVID/1.Transport.disability.coronavirus.pdf>. Vital to get practical information out to people and important to involve transport operators in discussion of what could/should be done.

Further information from AEI attached at the end of this summary.

Charlotte McClain-Nhlapo, World Bank

Community engagement, which has traditionally been face to face, is excluding those without access to technology. This will affect the poorest most acutely as over 30% of the poorest people in the world are without access to a phone.

Summary

Ann Frye, Moderator

The contributions to the webinar had provided valuable insights into way in which different countries are tackling the pandemic both in general and in the context of access/mobility for people with disabilities in particular.

There are considerable differences in the approaches being taken and, in particular, of the level of co-ordination between different levels of Government and other public and private sector providers.

It is also clear that no-one was well prepared and that issues facing people with disabilities had not been foreseen or prepared for.

Three key themes to emerge from the discussion were:

1. **Access:** most public transport has stopped so getting food and medication for people with disabilities is key – systems are generally being put in place to deliver support in cash or in kind, but problems still exist for many. Social distancing is impossible for those people who need support with their care needs.
2. **Technology:** Mobile/ cell phones in particular are playing a vital role in helping people with disabilities to stay in touch and to identify their needs and get help with food and medication and to keep people informed. While some countries have extensive network coverage and phone ownership is high, in others there are large numbers of vulnerable people without access to technology who are still struggling.
3. **Communication:** Putting out Government and operational information in formats that work for people with vision or hearing impairments as well as for those with intellectual or cognitive issues is as important in public transport as elsewhere. The quality and consistency of information varies greatly currently both within and between countries.



WORLD BANK GROUP
Social Development

Supporting Disability-Inclusive in Transport

Charlotte McClain-Nhlapo

Global Disability Advisor



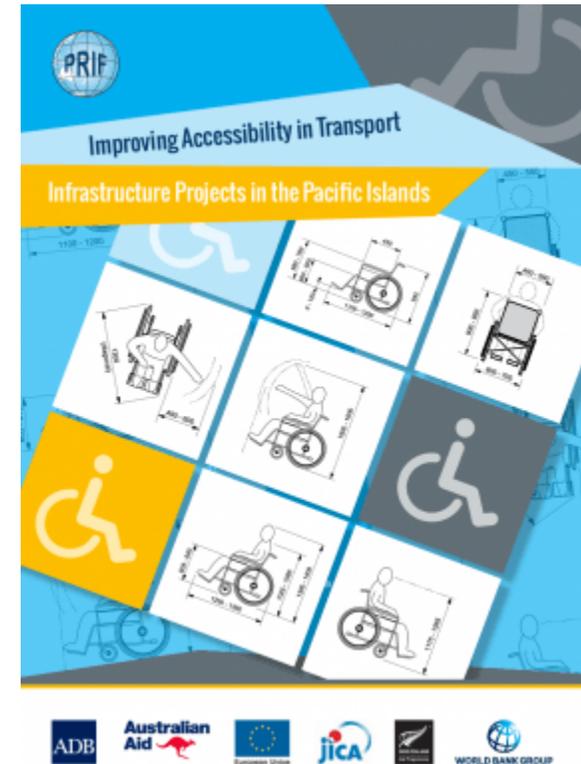
@McNhlapo



Operations in Transport & Urban

The World Bank with the Pacific Region Infrastructure Facility and other stakeholders and donors produced a report on improving accessibility in transport. In general, effective practices include the following:

- 1 Policy and regulatory changes.**
Adopt accessibility standards and guidelines, include access for all in transport policies, mandate accessibility in public procurement
- 2 Inclusive and universal design.**
Focus on all aspects of transit including road and pedestrian environment, vehicle design and operation, stations and stops, signage and information
- 3 User centered.**
Equitable, affordable, and timely transit choices including public transit, demand-responsive, or para-transit services; accessible door-to-door transit options; user involvement
- 3 Capacity building.**
Raise transport authorities' awareness and knowledge and build capacity of architects, designers, engineers, and product developers on universal design and accessibility



The 10 Commitments



1. INCLUSIVE EDUCATION

Ensuring that all World Bank financed projects/programs in education are disability-inclusive by 2025.



2. TECHNOLOGY AND INNOVATION

Ensuring that all WB-financed digital development projects are disability sensitive including through the use of universal design and accessibility standards.



3. DATA DISAGGREGATION

Scaling up disability data collection and use, guided by global standards and best practices, such as using the Washington Group's Short Set of Questions on Disability.



4. WOMEN AND GIRLS

Introducing questions on disability into the Women, Business and the Law survey to better understand the economic empowerment of women with disabilities.



5. PEOPLE WITH DISABILITIES IN HUMANITARIAN CONTEXTS

Ensuring that all projects financing public facilities in post-disaster reconstruction are disability inclusive by 2020.



6. TRANSPORT

Ensuring that all WB-financed urban mobility and rail projects that support public transport services are disability-inclusive by 2025.



7. PRIVATE SECTOR

Enhancing due diligence on private sector projects financed by the International Finance Corporation (IFC) regarding disability inclusion.



8. SOCIAL PROTECTION

Ensuring that 75 percent of WB-financed social protection projects are disability-inclusive by 2025.



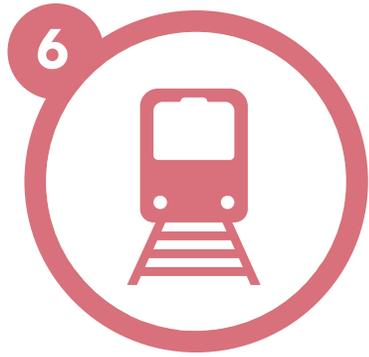
9. STAFFING

Increasing the number of staff with disabilities in the WBG



10. DISABILITY INCLUSION AND ACCOUNTABILITY FRAMEWORK

Promoting the Disability Inclusion and Accountability Framework among World Bank staff as a way to support the WB's new Environmental and Social Framework (ESF).



Commitment 6

TRANSPORT

By 2025 all new urban mobility and rail projects supporting public transport services will be inclusive in their designs so as to incorporate key universal access features for people with disability and limited mobility.



Ensuring that equity considerations, including access to persons with disabilities, continue to remain at the forefront of the Sustainable Mobility for All initiative (SuM4All).



Advocate for enhanced road safety outcomes, given that road crashes are one of the most significant public health issues of the century, causing both death and disability. This work will be led by the Global Road Safety Facility.



New funding from DFID and DHSC (UK Health Department) has been committed to support a specific research program on **disability from road crashes**.

Next Steps

Possible areas of intervention will include working with clients and persons with disabilities to

01

Promote policies and practices to improve road safety and disability-inclusive road and pedestrian environments

02

Assess accessibility barriers in current transportation systems and conduct impact evaluations of accessible transport with the close involvement of users with disabilities

03

Develop policies, regulations, and standards supporting accessible and universal design throughout the transport system

04

Apply universal access and universal design approaches in World Bank-funded transport projects, and include requirements for such approaches in standard procurement documents

THANK YOU

Charlotte McClain-Nhlapo

Global Disability Advisor

 [@McNhlapo](https://twitter.com/McNhlapo)

Presentation from South Africa

Department of Transport Covid-19 response for people
with disabilities and other universal access passengers

Thursday 23 April 2020

Amanda Gibberd

Director Universal Design and Universal Access
For the HVT Inclusive Access Network Webinar



Date:	Event	National Response	Departmental Response
<p>2020 1-5 March</p>	<p>First Covid-19 South African cases, through international travel to countries already infected, China, USA, Europe (UK and Italy).</p>	<p>Investigation by Departments of Health and International Relations. South African government starts to prepare.</p>	<ul style="list-style-type: none"> • South Africa went through a process of adopting WHO guidelines on social distancing, respiratory and hand hygiene.
<p>5 March – 31 March</p>	<p>State of Disaster declared on 15 March, after Covid-19 declared a pandemic on 12 March. South Africa moved to below Investment Grade on 27 March.</p>	<p>National regulations promulgated on a nationwide Lockdown, limiting movement to begin on 26 March.</p>	<ul style="list-style-type: none"> • Regulations on transport released 26 and 31 March, by the Department of Transport. • All non-essential travel curtailed, including international travel. • Local public transport for essential workers and for essential services provided by bus and minibus taxi. • DoT attended the HVT/TUMI Webinar on the Shenzhen bus service on 25 March, which provided valuable input for future guidance for public transport.
<p>1 April – 21 April</p>	<p>Lockdown runs until 21 April but is extended on 9 April until the beginning of May, due to lack of curtailment in the number of cases and deaths.</p>	<p>Regulations covering disability published on 2 April, coordinated national and provincial response to assisting people with disabilities where they live.</p>	<ul style="list-style-type: none"> • Coordination between the NGO sector and government begins, to deal with the immediate problems for people with disabilities, who are advised to stay at home.
<p>21 April onwards</p>	<p>The president announces further measures on 21 April, in recognition that South Africa is at the beginning of its infection curve. Economic and social cracks are now appearing, other measures announced to respond.</p>	<p>Economic packages released to help stimulate the economy and provide for people experiencing negative economic effects. Increase in health expenditure, with provision to cope with the expected forthcoming increase in cases.</p>	<ul style="list-style-type: none"> • Development of guidelines to be released through Transport Regulations, to limit the risks on public transport, as more work and services are declared essential. • Drafting of conditions for public transport grants using Shenzhen bus service experience and other research. • Problem resolution by provincial focal points for people with disabilities specifically, with access to services. • Social grants distributed separated so that grants for people with disabilities and elderly people are distributed on a different day to other social grants.

Let's help persons with disabilities during the current pandemic: Suggestions for advocates and for transport personnel

Each country, city, and town has its own specific situation and needs. Vehicle fleets vary from large buses to smaller buses, taxis, and "three wheelers" such as auto-rickshaws. Your area may have transportation shut down or greatly reduced and there may be a lack of supplies such as face masks, disposable gloves, hand sanitizers, and vehicle sanitation materials. You must deal with many issues. This sheet focuses on a single important issue which is easily forgotten: Transport for at-risk persons with disabilities in the midst of the current pandemic. We urge everyone to follow the directives of their national and local governments and health agencies.

To provide transportation for persons with disabilities

- **Friends, family, and NGOs supporting persons with disabilities who are at risk need to advocate for transport.** Contact health and transport agencies. Persons with disabilities should make themselves known to local governments, stating their needs clearly, including exact information on where they need to go, where they live, and other needed data.

- **Transportation personnel and advocates need to plan how to serve persons with disabilities:**

1. Contact government and medical agencies (hospitals, clinics) to establish criteria for essential medical trips. Medical agencies need to make a contact list of those of their clients with disabilities for whom transport to a medical facility is required, for example for kidney dialysis, blood transfusions, chemotherapy, or treatment for symptoms of coronavirus (COVID-19) **or** for whom deliveries of equipment are needed to where they live, for example to replace oxygen tanks. Also include input by advocates for essential trips not yet on the lists of health agencies .

2. Learn from medical staff about their hours of service and the best time for transportation to arrive.

3. Contact transport providers such as bus, jitney, taxi, and door-to-door services, including any volunteers who own a vehicle and are willing to help, as well as local NGOs with vehicles. Sometimes communities of faith (churches, temples, mosques) may provide volunteers. Prepare a plan that meets the needs of (1) the health agencies, (2) transport service providers and volunteers, and (3) the persons with disabilities who need the transportation.

4. Paratransit operators should arrange a return trip for persons with disabilities to assure that they are able to return after a visit to a medical facility. This may require adjusting drop-off and pickup times. For self-protection from the virus, drivers should avoid entering medical facilities when possible.

For basic essential information on coronavirus and public transportation, go to these websites to learn about ways to protect drivers and passengers from the virus.

1. Corona Transport Knowledge Platform at <https://www.transformative-mobility.org> for the latest information on public transportation issues and coronavirus, with examples from many countries

2. World Health Organization at www.who.int for the latest information on COVID-19 including personal protection measures

3. Hesperian Foundation at www.hesperian.org for clear general advice about COVID-19 for persons in lower-income countries

Compiled by Access Exchange International (AEI), San Francisco, USA. Visit AEI's website at www.globalride-sf.org for contact information. We welcome your comments or suggestions.

Ayudemos a las personas con discapacidad durante la actual pandemia: Sugerencias para activistas y operadores de transporte.

Cada lugar tiene su propia situación y necesidades específicas. Las flotas de vehículos varían desde autobuses hasta microbuses, taxis y "vehículos de tres ruedas" como moto-taxis o ciclo-taxis. Puede haber servicios de transporte cerrados o reducidos, aunado a la falta de suministros, como máscaras faciales, guantes desechables, desinfectantes para manos o productos de limpieza para vehículos, entre otros. Esta información se centra en un tema importante que se olvida fácilmente: el transporte de personas con discapacidad en riesgo en la actual pandemia. Instamos a seguir las directivas de sus gobiernos y autoridades de salud.

Proporcionar transporte a personas con discapacidad

• **Los amigos, la familia y las ONG que apoyan a personas con discapacidad que están en riesgo deben luchar por el transporte.** Las personas con discapacidad deben hacerse notar ante sus gobiernos, exponiendo sus necesidades, información sobre origen y destino, así como otros datos necesarios.

• **Operadores de transporte y activistas deben planear cómo atender a las personas con discapacidad:**

1. Comuníquese con instancias gubernamentales y médicas (hospitales, clínicas) para establecer criterios de viajes médicos esenciales. Las instancias médicas deben hacer una lista de contactos de usuarios con discapacidad que requieren de transporte a centros médicos, por ejemplo, para diálisis renal, transfusiones de sangre, quimioterapia o tratamiento por síntomas de COVID-19, incluso para entregas a domicilio de equipos, por ejemplo, para el reemplazo del tanque de oxígeno. También incluya en la lista información proveniente de los activistas sobre viajes esenciales no enlistados en los centros de salud.

2. Infórmese sobre horas de servicio del personal médico y el mejor momento para que llegue el transporte.

3. Comuníquese con proveedores de transporte: autobuses, servicios puerta a puerta, ONG locales o voluntarios con vehículo dispuestos a ayudar. A veces, en las comunidades de fe (iglesias, templos, sinagogas) hay voluntarios. Organice un plan que satisfaga las necesidades de (1) centros de salud, (2) proveedores de servicios de transporte y voluntarios, y (3) personas con discapacidad que necesitan transporte.

4. Los operadores de servicios de transporte adaptado han de considerar el viaje de regreso para personas con discapacidad luego de ir a un centro de salud, lo cual puede requerir ajustar los horarios de recogida y regreso. Para protegerse del virus, los conductores deben evitar el ingreso a los centros de salud.

Visite los siguientes sitios web para informarse sobre el coronavirus, el transporte público y las formas de proteger a los conductores y pasajeros del virus.

1. Corona Transport Knowledge Platform en <https://www.transformative-mobility.org> con información actualizada sobre problemas de transporte público y coronavirus, con ejemplos de muchos países.

2. Organización Mundial de la Salud en www.who.int con información actualizada sobre COVID-19, incluidas las medidas de protección personal (en español e inglés).

3. Fundación Hesperian en www.hesperian.org con consejos sobre COVID-19 para personas en países de bajos ingresos (en español e inglés).

Compilado por Access Exchange International (AEI), San Francisco, EUA. Visite el sitio web de AEI en www.globalride-sf.org para obtener información de contacto. Agradecemos sus comentarios o sugerencias.