

Women and Equalities Committee
House of Commons
Palace of Westminster
London
SW1A 0AA

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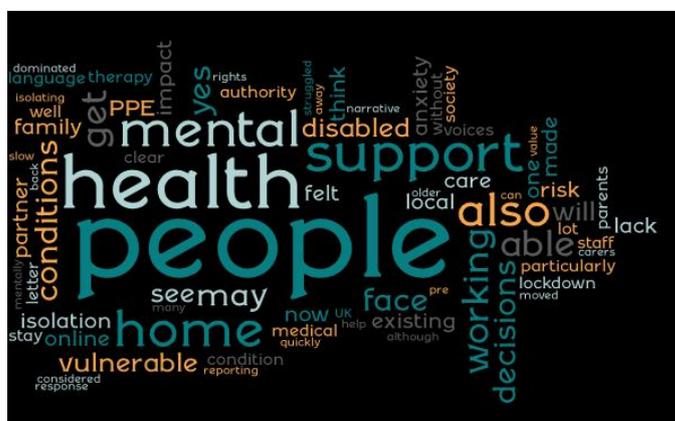
Dear Committee,

Unequal impact: Coronavirus and the impact on people with protected characteristics

The National Association of Disabled Staff Networks (NADSN) is a super-network that connects and represents Disabled staff networks across the UK. It exists as a collective platform to share experiences and good practice, and to examine challenges and opportunities for disabled people in the workplace. Focussed on the tertiary education sector we have membership from the NHS, public, private and third sector, all committed to the equality of disabled staff.

NADSN invited its members to complete a survey with their views and experiences on the questions that the Committee posed in this Inquiry. Within this submission, we have included quotes from the survey respondents, along with feedback from our individual Disabled staff networks, and from the experiences shared by our members through our regular weekly meetings on MS Teams.

The word cloud below provides a visual representation of the most common terms submitted in the survey responses.



Our experience of policy

You will see that the most common term in the word cloud is 'People'. What is clear from the evidence we gathered is that there has been a narrow view taken of Disabled people in public policy and a lack of understanding shown about the lives Disabled people live. This has been illustrated through the decisions made by the Government, and some senior leaders within healthcare and public sector organisations. Decision making has lacked an underlying understanding of the diversity of people and communities in the UK; equalities legal framework (e.g., Public Sector Equality Duty); the involvement of Disabled people (in the spirit of 'Nothing About Us Without Us'); and the social model of disability.

It is of great concern that the response to the COVID-19 pandemic has led to the dominance, without challenge, of a medical view of disability. After many years of hard work

by the movement, we have seen a rapid erosion of civil rights. These may be a temporary measure, but it has shocked us how quickly, and without full oversight, legislation was passed.

We need to ensure that people making decisions affecting our lives hear from us. This is a changing situation and disabled people should not only be seen as a 'vulnerable' group to 'shield' and leave us without a voice. Decisions that are taken in crisis situations are difficult but they are fairer if the people most affected have a say. That's not to say disabled people's voices will make decisions easier, they won't, but they will ensure that older people and disabled people are not shielded into silence. I'm astonished how quickly the mantra 'nothing about us without us' has been silenced at a time when it needs to be shouted louder than ever.

An attitude towards disabled people of sympathy is taking prominence, influenced by national guidance that recommends shutting people away for indefinite periods for their 'protection'. Whilst at the other extreme we are seeing an increase in harassment and victimisation. Disturbingly, our survey respondents included an individual who has been subject to abuse by neighbours, who considered them to be getting 'preferential treatment.'

I have been subjected to abuse (due to being in the at risk group) people throwing things at my windows and door, as they see me as being given preferential treatment.

And most extreme, disabled people have been portrayed through policy and the media as not worth treating, or resuscitating, if they develop COVID-19 and need care.

Whilst there are people vigilantly monitoring for abuses, unfortunately it has taken too much time for people to start speaking up, to challenge the overriding narrative that the media and politicians have shared from the outset of the pandemic – effectively writing off Disabled people (including those with long-term health conditions) and older people.

I have been particularly disappointed by the narrative that has dominated this pandemic where UK national government has fallen into the use of insensitive language inferring a lesser value to people who are older or have existing conditions. They have encouraged a terrible practice of reporting on coronavirus with ableist language that devalues anyone not considered to be 'strong' and able to 'fight' covid 19. This has had an enormous effect on me particularly how quickly this narrative has dominated reporting. We have had human rights and a focus on equality for many years in the UK but this history was brushed aside without a thought so quickly.

The effect on Disabled people of emergency legislation has been a removal of rights to services that help people to live independently. There are reports in the media that the lockdown has been positive in opening the world to Disabled people through online developments, but the reality is that many Disabled people want social contact; they do not want to live online.

Working from home and the risks of isolation

There have been increased opportunities to work from home, but unless this is managed well it can lead to additional barriers for Disabled staff in doing their work. It can lead to greater isolation from colleagues and a negative impact on mental health and wellbeing.

There is a risk that people who may need intensive support may not be able to access it and there will be a higher risk of suicide as a result of isolation.

Employers have been slow to recognise that they still have a duty to show due regard to workplace reasonable adjustments for their staff. They should ensure that any homeworking staff are supported with any IT equipment, and Wi-Fi connectivity, to do so. There are also

additional costs people will incur by homeworking, e.g., electricity bills, telephone costs, broadband and Wi-Fi costs, heating bills.

Wherever possible, it remains essential that Disabled people are visible in the workplace. The current situation is an extreme form of segregation and although the reasons for it may be well intentioned, any suggestion that it is better/easier for Disabled people to keep working from home, would be concerning.

I received the 'you are extremely vulnerable' letter for physical health reasons. But I also have quite severe mental health challenges which I have learned to live well with by walking a lot and engaging with voices etc. But the letter said to stay inside and see no one face to face for 12 weeks. This presents a serious challenge to my sanity and I really struggled with it, still am to some extent. The letter needs significant revision.

As can be seen by the survey responses, our members feel isolated, seeing themselves as a burden on family and friends, being forced to become more dependent and rely on others in order to get the basic things they need like food.

Yes, I'm in the vulnerable group so am shielding. I am therefore completely reliant on other people for food and prescriptions.

Living during COVID-19 has had an effect on the mental health of the population, but for Disabled people, having some independence in making choices and decisions is an important part of self-esteem and mental health. The erosion of opportunities to live independently (sometimes with support) will negatively affect people's mental health.

Disabled people's voices and the real impact of legislation

As a group, Disabled people have been very seriously impacted by this pandemic and the emergency legislation enacted in response. However, our voices have not been represented and this can be clearly seen in the impact of legislation. A practical example from our evidence: Personal Assistants have not been considered as key workers who require PPE and testing, so have been unable to provide the support for which they are employed; instead, responsibility is falling upon family members, who themselves may be disabled or of an older age. This is nonsensical with a public policy of shielding disabled people.

I think I may have had a mild version of it before the lock down, which meant that I had to self-isolate from my carer. Since then, I have informed my PA to stay at home and I have been relying on family to support me. I have also not been able to continue with my treatments to manage my condition and the pain provided by physiotherapist, massage therapist and visits to my local pool for exercise. This has an impact on my health and wellbeing.

Disabled staff working in the NHS

We have also heard from NADSN members who work in the NHS and are under particular pressure at this time. Leaders in the NHS have had to make lots of rapid decisions in recent weeks. Hopefully whilst not intentional, it is evident that the individual circumstances of Disabled staff have not been factored into decisions.

We have heard about issues in regard to a shortage of interpretation services, including BSL interpreters, lack of medical face masks that have transparent mouth areas (recognising that Deaf doctors/nurses may lipread), and dramatic increases in the cognitive load on frontline staff, this is a particular issue for staff with neurodiverse conditions. We have also heard about the experiences of retired Disabled NHS staff who wish to return, but have encountered challenges in doing so.

As a disabled person retired from the NHS as a Charge Nurse, I was contacted by the Nursing and Midwifery Council to rejoin as part of the Emergency Covid 19 register. While this was entirely voluntary it was something that I wanted to do. Unfortunately, due to pneumonia I was unable to do so, and instead went into isolation. However, SIX weeks into isolation I received my 'highly vulnerable person' letter saying that I needed to shield for 12 weeks. The NHS is also staffed frontline by those of us with disabilities, those of us that also answered the call. However, the shielding list has been woefully inadequate. When I was seriously ill I was told I wasn't on the highly vulnerable list, when I'm improved I'm told I need to shield.

We would implore the Women and Equalities Committee to consider our evidence and encourage the Government to consider the following:

- They must promote the social model of disability, not the medical model.
- They must engage Disabled people and rights campaigners – the Government must commit to the ethos of 'Nothing About Us Without Us'.
- Personal Assistants must be included in those who can access PPE equipment and testing.
- The general duties of the Public Sector Equality Duty are still in place – politicians and decision makers must give due regard to the need to eliminate discrimination, harassment and victimisation, to advance equality of opportunity, and to foster good relations between people who share a relevant protected characteristic (as cited under the Equality Act 2010).
- The physical and mental health and wellbeing of communities will be impacted by COVID-19. Disabled people, as lived experience experts, should be involved in the development of interventions that target health and wellbeing – a 'one size fits all' approach does not work.
- The police must be trained and resourced to respond to any cases of disability related hate crime and victimisation.
- Employers must show due regard to the need to consider reasonable adjustments for Disabled staff that are home working.
- Employers and Disabled staff should receive guidance about Access to Work and the support that they can provide in circumstances not covered by reasonable adjustments.
- We are also aware that development work (led by the Cabinet Office) on the National Strategy for Disabled People has been paused. We would encourage this work to resume as soon as it is possible. NADSN would welcome an opportunity to contribute to this work.
- The setting up of a 'lessons learned' system to ensure that the UK Government is effectively and efficiently prepared to deal with a situation like this in the future.

We would like to thank you for this opportunity to submit evidence and hope that the information we have provided is of benefit to your inquiry.

Yours faithfully,
on behalf of the NADSN Steering Committee and all NADSN members,

Hamied Haroon

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