While engaging with communities and larger populations in the response to COVID-19, it is important to understand the needs of specific groups who might experience barriers to accessing information, care and support or be at higher risk of exposure and secondary impacts, such as children and adults with disabilities, who make up an estimated 15% of the population and are often invisible and excluded. While UNICEF and partners work tirelessly to reduce the spread of COVID-19 and develop inclusive response and RCCE plans and strategies, this response also calls upon us to consult and work closely with affected communities, engage with them and in some cases, make them champions of change in reaching out to their peers and communities as part of the COVID-19 response efforts.

Below are some tips for UNICEF country offices and partners on key considerations when planning to engage with children and adults with disabilities for COVID-19 response.

Provide life-saving information in appropriate multiple and accessible formats

- Key behavior focused messaging on prevention of COVID-19 and available assistance may not reach people with visual, hearing or intellectual impairments if it is not provided in multiple and accessible formats. Concretely, this means all messages must be available in:
  - **Braille and large print for people who are blind or have low vision.** When those are not available or not used by local populations, information should be provided orally (e.g. through loudspeakers in the community)
  - **Easy-to-read version or plain text accompanied by pictures/diagrams,** which are more accessible for people who have intellectual disabilities and also benefit many other children, including those with low literacy or who use different languages.
  - **Written formats or video with text captioning and/or sign language,** for people with hearing impairment.
  - **Accessible web content for people using assistive technologies such as screen reader**

  - The key to improving accessibility is to provide all information in multiple formats: written, oral and pictorial, to reach people with diverse communication needs and preferences

1 For guidance on programming and coordination with partners, see UNICEF guidance on [COVID-19 Response: Considerations for Children and Adults with Disabilities](https://www.unicef.org/disabilities/index_90418.html)
• Providing information in multiple and accessible formats will also improve access for children and adolescents, people who use minority languages, migrants and refugees as well as people with low literacy

• Ensure that all community stakeholders, including parents, community leaders, religious leaders and local health workers are sensitized about risks faced by children and adults with disabilities and have the capacity to communicate the life-saving messages to them

• Ensure that all actors engaged in the response across all sectors (e.g. health workers, education providers, child protection officers, WASH service providers, C4D staff and others) understand the importance of and receive guidance on making communication inclusive and accessible for persons with disabilities3, and have access to local sign language interpreters and other resources to support communication

• Organizations of persons with disabilities (OPDs) can provide important advice and support on accessibility of information and help to build local capacity for disability-inclusive emergency preparedness and response. A useful starting point for identifying local organizations of persons with disabilities is to contact the International Disability Alliance or your regional network: http://www.internationaldisabilityalliance.org/content/ida-members. Support may also be found from local civil society organizations and service providers who work with persons with disabilities, as well as parents’ groups

Utilize the communication channels that are used by young people with disabilities

• For RCCE, conduct communication channels analysis and consider who will and will not be reached when developing your communication strategies. For example, boys and girls with disabilities are often excluded from education and early childhood development (ECD) programmes, so messaging conveyed through schools and ECD centers may therefore not reach them

• Local organizations of persons with disabilities (OPDs), including youth-led OPDs can provide important advice and support to identify effective and trusted information channels and key influencers - engage with them to develop appropriate strategies

Key reminders- Engage people with disabilities as agents of change

• Consider young people with disabilities not just as beneficiaries but also as our champions of change who can engage in COVID-19 response. They can play a key role in supporting information campaigns and myth-busting

• Build the capacity of organizations of people with disabilities to proactively combat xenophobia, stigma, and discrimination

• Ensure that situation analyses and rapid assessments include questions or information on local networks of persons with disabilities and their engagement in the response, as well as any barriers to their engagement

3 For guidance on inclusive communication, see https://www.unicef.org/disabilities/index_90418.html
• Connect with local media and invite young people with disabilities as speakers – to promote accurate communication on COVID-19 and its prevention measures to their peers, reducing stigma and strengthening social cohesion

• When working with youth networks/youth led organizations, inquire if they include young people with disabilities. Engage organizations of persons with disabilities to support outreach to children and youth with disabilities

Ensure that messages are disability inclusive

• Ensure to use ‘person-first language’ when referring to people with disabilities (e.g. a child who is deaf, rather than deaf child), to promote positive and respectful terminology

• When representing communities, include images of girls and boys with disabilities among other individuals. This highlights human diversity and conveys a message that all members of the community, including persons with disabilities, are impacted by COVID-19

• When developing messages for parents and families on how to support their children, ensure that these are inclusive of children with disabilities. For example, in activity toolkits for parents to use with their children, ensure that activities such as hand washing games and rhymes have adaptations for children with disabilities (such as physical actions to accompany rhymes for children with hearing impairments)

• Through social sciences data, including KAP studies, monitor stigma against persons with disabilities, such as beliefs that they are responsible for spreading the virus

For more information on COVID-19 and engagement with marginalized groups please refer to the following materials:

- UNICEF: COVID-19 response: Considerations for Children and Adults with Disabilities
- WHO, OCHA, IFRC: COVID-19: How to include marginalized and vulnerable people in risk communication and community engagement
- IASC: Briefing Note on Addressing Mental Health and Psychosocial Aspects of COVID-19 Outbreak
- UNICEF: Quick Tips on COVID-19 and Migrant, Refugee and Internally Displaced Children
- WHO: Coronavirus: Myth Busters
- UNICEF, WHO, IFRC: Key Messages and Actions for COVID-19 Prevention and Control in Schools

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4 For more guidance on terminology, see page 82 of For practical tips on how activities can be modified for children with disabilities, see page 82 of http://training.unicef.org/disability/emergencies/downloads/UNICEF_General_Guidance_English.pdf