Guidance to Pacific Ministries of Health in ensuring accessible and inclusive COVID-19 vaccination services

Making sure persons with disabilities needs are considered in COVID-19 vaccination activities

When carrying out any community visitation it is important to consider and plan for the needs of persons living with disabilities. A human rights approach should be undertaken to ensure this.

1. **Equality and non-discrimination** – do not leave persons with disabilities out, ensure that they are treated fairly
2. **Empowerment** – empower persons with disabilities to make decisions for themselves
3. **Participation and Inclusion** – ensure that they take part in the vaccination process
4. **Accountability and Rule of Law** – persons with disability should be included in every humanitarian intervention

Persons with disability in the Pacific often rely on family members as their primary carers and have select health service providers that they are familiar with. It is therefore recommended to follow some simple guidance when dealing with persons with disabilities during the COVID-19 vaccine roll out.

When dealing with persons with disabilities, it is important to remember two major preferences:

- Some individuals are sociable and are comfortable around others.
- Some would prefer their own space or safe area.

Recommendations:
- Carry out house to house visits for households with persons with disabilities; or
- Sit with the leaders, village headman/headwoman or local health worker to first identify which households have persons with disabilities and then set a time or schedule to visit them for their vaccination.
## Guidance on providing inclusive and accessible COVID-19 vaccination services to persons with disabilities

For service providers, including ministries of health, disability service providers and other

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| **Physical**                        | 1. All access points to areas where the vaccinations are happening (e.g. clinics) need to be accessible for mobility devices, including ramps.  
2. For those with high support needs and who cannot be moved, it is advisable that a door-to-door vaccination drive be done, or nurses be sent to visit the various persons with disabilities.  
3. Ensure that there is a place which allows for a person with a disability to feel safe if anxious (a separate area or room).  
4. Always enquire whether a carer is needed. |
| **Psychosocial and intellectual**    | 1. Use simple words in your communications.  
2. Use pictures to explain information about COVID-19 and COVID-19 vaccination.  
3. Use cheerful colors (blues, green, pink, yellow) when sending out posters or notices of where the vaccination point will be.  
4. Ensure that the person with a psychosocial disability decides whether to have his or her carer present.  
5. You may have to repeat yourself several times. To ensure the individual understands, ask them to explain back what you said.  
6. Your approach needs to be carefully thought out. For example, do not be abrupt. This may trigger a negative or extreme response.  
7. Persons with psychosocial disabilities may have different ways of interacting to stressful situations, so it is important that health workers remain calm.  
8. Refrain from using red as your background to your notices as this color may be deemed as dangerous and discourage persons with mental health issues from engaging in vaccination services. |
| **Vision/Sight**                    | 1. During the vaccination session, the health team should explain in detail the steps they will take and before each step is undertaken.  
2. Keep the area to and from the place of vaccination free of barriers, such as chairs, bins, and tables.  
3. Persons who are color blind will not be able to distinguish between red and green, therefore it is important not to use these colors in your notices. Stick to the black font on a plain background. |
| **Hearing**                         | 1. Ensure that you use subtitles if or when using video guides.  
2. It is advisable that you engage directly with the person with disability and let the sign language interpreter do the signals.  
3. Speak clearly and confidently when talking.  
4. Persons who are deaf rely on their sign language interpreters, therefore use simple words which can be easily defined in their language. |
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| All disability types – physical, psychosocial and intellectual, vision and hearing | 1. Ensure that you have a discussion with the village health worker/nurse or community representative before commencing vaccinations in a village setting to understand whom has disabilities in the community and how to best accommodate their needs in the vaccination service.  
2. Ensure that the place of vaccination is accessible, and if not then organize an alternate venue or offer home-based vaccination services.  
3. Always ensure that a person with disabilities decides on whether his or her personal assistant/carer/sighted guide is present.  
4. For those with legal guardianship, the legal guardian will need to sign the consent form, so they will need to:  
   a) read the information sheet provided on COVID-19 vaccination  
   b) Provide written consent on behalf for the person with a disability  
5. Always ensure that any message or advice given is clearly portrayed or told to the person with disability in a simple manner. It may have to repeated. The support person / assistant should help explain the messaging. |