Module 6 Transcript.

RICHARD: Welcome everyone to our presentation on Module number 6, environment and humanitarian situations, a very crucial issue for us all, our very survival and there are many more links to disabled people than you would perhaps think on the surface of it. This is the online presentation of Module 6, of the Commonwealth Disabled People's Forum Online Course, Disability Equality Capacity Building and I hope you are all getting on with the work, the course book will be up when this goes up, and there will be a number of follow up activities in it and there will also be the seminar the following Friday for you to tune into. I would like to now go over to Sarah Kamau to do the introductory part, let me just put up the PowerPoint.

SARAH: Thank you Richard.

RICHARD: Hang on you can start but I need to do something. Let's just, yep. I seem to have lost something. Just having to get No. 6 up. Right, I will start again. Ok yes, Sarah over to you.

SARAH: Thank you Richard. I will start introducing this session by a quote from the UN Secretary General Antonio Guterres, that he made on 26th of February 2021 on climate change issues, UN Climate Report: A Red Alert for the Planet by Guterres. "2021 is a make-or-break year to confront the global climate emergency. The science is clear, to limit global temperature rise to 1.5 Celsius we must cut global emissions by 45% by 2030 from 2010 levels. Today's interim report from the UNFCCC United Nations framework Convention on Climate Change, is a red alert for our planet. It shows governments are nowhere close to the level of ambition needed to limit climate change to 1.5 degrees and meet the goals of the Paris Agreement. The major emitters must step up with much more ambitious emissions reductions targets for 2030 in their nationally determined contributions as well as before the November UN conference in Glasgow." That is the end of the quote. From that quote, we're going to learn from COVID-19 response on how government made responses to the issues of ... [video frozen] humanitarian work from COVID-19 response or lessons. There is little doubt that COVID-19 and other ongoing virus pandemics are also caused by a crossover between humans, domestic and wild animals and as humans encroach more and more on wild habitat. Our ability to survive as human beings is in the balance and unless all people talk to each other through their governments and these governments collaborate on an ongoing basis with only face more human catastrophes. As disabled people, we learned during the COVID pandemic our hard-won human rights can be dashed, as we triaged out of scarce ventilators and don't receive the support we need to live. We can safeguard our rights and give the humanitarian assistance as owed by governments implementing Article 11 of the UNCRPD. This can only be done by getting all our countries, the Commonwealth and the UN to take our human rights seriously as part of greater efforts to implement the Sustainable Development Goals to develop climate justice and support peoples everywhere to live more in harmony with limited and interconnecting life support system that is planet earth. I will also talk about language that the Commonwealth Disabled People's Forum uses, for conceptualisation's sake and we use the word 'disabled people'. Why we still choose to call ourselves disabled people? It's because of the development of the social medical model. In the 19th and 20th centuries, a disabled person's medical condition was thought to be the root cause of their exclusion from society, an approach now referred to as the 'medical or individual model' of disability. We use the social model of disability where the barriers of environment attitude and organisation are what disabled people with impairments and lead to prejudice and discrimination. So to call ourselves persons with disabilities, is to accept that we are objects and powerless. We also view ourselves as united by a common oppression and so are proud to identify as disabled people rather than people with disabilities. But when you're talking about the United Nations Convention on the Rights of Persons with Disabilities, we should use the term people or persons with disabilities. I hope you get that thank you.

RICHARD: Thank you very much. What we're going to try and cover in the rest of this presentation is the growing environmental crisis, what lies behind it, the impact on disabled people. We're going to take the example of Kiribas, what must be done we have got a couple of films and some interesting activity. Kiribas is a population of 100,000 one of the smaller countries of 30 coral atolls in the Pacific. It's probably the first country that will disappear under global warming as sea levels rise. Then we look at humanitarian situations and disabled people, armed conflict, accidents natural disasters, and examples of good practice and what we must be doing. We have got a quite packed agenda, we'll get on with it. If we look back to 2018/19, what were the affects there of changes in the environment. 35 million people affected by floods. Ocean acidification going on, climate change threatening peatland ecosystems, 1600 deaths associated with heatwaves, 883,000 people internally displaced because of floods and droughts, global oxygen levels continue to decrease meaning a loss of fish particularly in that environment, therefore affecting the food chain. Two million people displaced by weather and climate change, 821 million people undernourished partly due to drought, and so that's quite a big impact for just one year. Now a young disabled woman has become very famous Greta Thunberg.

RICHARD: Great message, and really, that crisis we as disabled people and DPOs we need to put ourselves right in the middle of it and the fight because we will be the ones who more than any others are disadvantaged by the effects of climate change. Medically the quality of healthcare equipment and medicines are affected by all of these events, life quality, personal assistance, accessible housing. transportation, funding and stability, social services benefits, employment, community, family support. These things take time to develop among at risk populations such as disabled people. Change which is definitely coming from climate change and environmental crisis requires we start planning now. We need to be talking to governments about how they have plans which include us with all of these events. So the impact of the eco crisis on everyone, floods, droughts, fires, heatwaves, direct impact, stronger and more frequent storms, indirect impact, infrastructure changes. Expanding droughts and forest fires leads to food insecurity. Sea level rises and acidification, leads to poor health and poor food. More intensive heat leads to more economic disruption. General weather patterns are changing, environment and ecosystems are getting more unstable. We're losing habitat which is leading to people to move from where they live. It is estimated that between 200 million and a billion people will have to move from where they live in the next 30 years. Impact on disability. Non-disabled people will be made more impaired. Creative prevalence of impairment by storm related injuries, crop shortages leading to malnutrition and stunting. Invasive diseases, the control programmes we have for malaria and even things like polio will come back, and new variants of virus will come more and more as the crossover between the wild where many of these viruses live and human habitation becomes more and more. Increased war and armed conflict is also likely which leads to a great deal of impairment, and poverty leads to impairment as we saw in Module 5. For us directly as disabled people, inaccessible shelter and evacuation. We won't be thought about in these emergency measures unless we get thought about now. Fragile support systems, we need medical and PAs to be available, we need recovery finance, so whatever is affected as we have seen in COVID we can build back better. We have to be able to build back better after all of these environmental events. Heat exhaustion and heatstroke, air quality affects respiratory and heart conditions will lead to greater problems for us, we will all become poorer. Key issues for planning ahead, we need to be involved as DPOs in every stage of planning. We need to try and mitigate by cutting emissions, DPOs have solidarity with climate campaigners, when there's an Extinction Rebellion or other demonstration make sure you're out there as disabled people with your banners, making placards which show why we're directly affected by this. Plan disaster relief and recovery is accessible and takes our needs into account. Accessible shelters, and transit systems need to be built in. The planning relief and recovery is really important, that the emergency services know where disabled people live and how to rescue them and what's needed for them. Benefit and healthcare and social care support is sufficient, all of this must be done with communications that are accessible and easy to understand. Employment and benefit security is not affected or if it is, it needs to be subsidised so people can still have a livelihood. Local support must be available and we need local independent living centres, including in refugee camps and other places where we are temporarily housed.

Let's have a look at the impact of this in one particular series of coral atolls in Kiribas.

[video playing]

Scientific research shows that the Pacific is the region most affected in the entire world by climate change. In the case of Kiribas, one of the biggest threats is sea level rise and that's because Kiribas, which is composed of 33 low-lying atolls, is no more than 4 metres high at the highest point and in Kiribas we can say that 100% of the population lives within 1 km of the coast, so the country is extremely vulnerable. Given that the scientific research shows that by 2100 it's almost certain now that we'll have more than a metre of sea level rise, on a flat island like Kiribas that amount of sea level rise comes very far inland so it's a very serious situation and for that reason, the Government is looking at options for relocating the population.

We have seen the scenarios, the projections put forward by the scientific community. I am not being pessimistic, I am being very realistic, but I think as a leader it's important that we provide options. Even if there is that 1% possibility it will happen, we must provide the options for our people. One thing that I have always emphasised is that we never wish to be refugees. We would be refugees if we don't do anything now because a refugee is a response to unexpected event, ok, but we know it's coming so we should be acting accordingly beginning from now and we would have our people, if they need to migrate, to migrate with dignity not as refugees.

And that's your house just over the sea wall?

The younger people are beginning to understand but the older ones it's very, very hard for them because it's very attached to the land you know, if you have a land to have to stay and die there and it's very hard to leave your islands. One time we went to the cemetery and there was a funeral took place and this coffin was put into the ground but somehow, it's floating in there, it's floating and they have to put stone to put it right. To us it's very important for us and ancestors, where you bury your dead.

I don't want to leave here because I was born here and my sisters live here as well, but if the effects affects me then I will be have to leave here. I feel very sad and it hurts to leave where you come from. The scientists say in 50 years Kiribas will submerge under water, that's not a happy thought.

Carbon trading will be of no consequences to us, so there has got to be some very special provisions for the victims, not potential victims, the victims because we are victims and so there's got to be some very deep soul searching on the part of people to do something about it. Will we remain a sovereign nation, will we remain a people, will we be able to maintain the identity and culture that we have? My answer is yes, I will do everything in my power to prove we can do so, but at what cost? Who is going to pay for it?

RICHARD: So Te Toa Matoa which is our affiliate, which is the national disability organisation in Kiribas, have been talking to the Government and have managed to get into their policy and action plan from 2018 to 2001 that the Government developed a guide to assist all Government of Kiribas ministers to include people with disabilities in all services programmes and plans. I think that's a long way further than most people have got, maintain a register prioritised GoK, strategic and operational policies to be reviewed against the CRPD, review the Kiribas Joint Implementation Plan for climate change and disasters risk management to assess its inclusiveness of disabled people. Develop standard operating procedures to address the needs of disabled people, a guide for inclusion is developed and TTM and other stakeholders are consulted about the priority and that's pretty strong stuff they have managed to get there. An implementation plan with timelines is being used to manage and monitor and review. Churches, faith-based organisations are actively contributing to actions outlined. The strategic plan is developed and people with disabilities are included in all planning processes. Needs of people with disabilities are included in island council strategic plans and budgets. Conduct workshops with disabled people and sports stakeholders to identify how to ensure access and inclusion. Include people with disabilities in sport, recreation and leisure. Conduct access audits on sporting facilities and seek resources to modify facilities and ensure accessibility. Increase opportunities. So this is a DPO turning a crisis into them being involved. Now clearly they are all going to lose their home in the next few years and already talks are being conducted with New Zealand and Australia about allowing the whole population of 100,000 to move there. Clearly with migrant control politicians in charge in Australia there are big problems with that, but these people will have to go somewhere and re-establish as will millions of others. So it's, and after all the global warming is not caused by people in the Pacific as they will tell you, it's caused by the big industrial countries that are burning higher carbons at an enormous rate. Therefore there is a moral responsibility to create spaces where people can with dignity, as the President said, move to. Now, they made up TTM, Te Toa Matoa have made up a song which I will play for you now with a film about what they think about this very Pacific-oriented thing.

[video playing]

RICHARD: So there's an example of people getting on and actually confronting the situation they face. I think we should all gain from that. Another area which causes a great deal of problems for disabled people, and creates disability, is armed conflict and war. During conflicts, many challenges arise for all civilians affected. These challenges are heightened for disabled people, as institutional, attitudinal and environmental barriers and risk factors are exacerbated in crisis or conflict. PTSD, and psychological traumas are usually massively underestimated, and psychological trauma arises. The disability of war casualties depends on the nature of their impairment, the quality of their medical treatment and the rehabilitation they receive and how effectively the barriers they face are overcome. In modern wars, people are much more likely to survive and therefore have an impairment. Take the American Civil War in the 1860s, half of the people who were injured died. In the more recent war in Iraq, on the American side, only 1 in 6 people died, but of course that meant 5 out of 6 would have had a major lifelong impairment. More than 240 regional and civil wars have occurred since the ending of World War II, millions have developed lifelong impairments. Chemicals such as Agent Orange have had long-term effects on health impacts on both troops and civilians. Landmines left in the ground impact largely on children playing and women gathering wood. Since the Landmine Treaty in 1999, adopted by 160 countries, casualties have fallen from about 20,000 a year to only 4,000 a year so something can be done. Over the last 100 years rape and sexual abuse of women and children has moved from being seen as part of the spoils of war and is now actually a weapon of war, a gendered war weapon. That has to be banned and challenged. Looking at First World War which was of course an Imperial war where the British Empire, now the Commonwealth, were asked to play their part, it's often forgotten on the Western Front that 1.4 million soldiers from Greater India, that 47,000 died and 65,000 were disabled. Or in Africa that 71,000 died and 100,000 wounded. Pictures up from different soldiers from India and a group in Brighton convalescing from their injuries, Kings Royal Rifles in East Africa. I am now putting up a picture of the Tower of London with ceramic red poppies all around it, this was a memorial that was done in 2014 for the 100th centenary of the beginning of the First World War, 888,246 military dead from the Empire and the UK but what was never thought about after the War was that there were 2,400,000 came back from that war disabled. For a land fit for heroes or was it, they were treated really badly, but eventually went on to fight for the first disability legislation that came into the UK and in other parts of the Commonwealth. Accidents and disability. On the night of December the 2nd, 1984 approximately 40 tons of toxic gas spewed from then factory owned by the US giant Union Carbide in Bhopal, a city in the heartland of India. Blown by the wind the gas covered more than 40 square km. The entire population of Old Bhopal was affected. Pregnant women miscarried as they ran, children died in their parents' arms, hospitals were overwhelmed by dead and dying for days afterwards. That night ultimately ended but years of death and suffering and impairment resulted. And similar you could say for nuclear accidents like Chernobyl and many others that have happened because of the lack of safety and control of dangerous substances that occurs in the pursuit of profit by many companies, or else just efficiency. And the UNCRPD Article 11 is really important and it states for humanitarian emergencies, "State parties shall take, in accordance with their obligations under international law", including international obligations and human rights law, all necessary measures to ensure and protect the safety and of disabled people, and in situations of risk, including situations which, of armed conflict, humanitarian emergency such as the things we have been looking at caused by global warning, caused by the eco-catastrophe. Are you still with us Sarah, do you want to go through the next few?

SARAH: Yes, I am here Richard.

RICHARD: Ok so this is some of the problems that are caused from these various natural disasters so-called. So if you would likely to take us through the next few slides.

SARAH: Thank you Richard. I will take you through the slides, the daily problems of accessibility. It has a direct physical impact with loss of mobility, damaged and/or loss of assistive devices and increased dependency, loss of comfort and a disruption in daily routine. During crisis situations based on the latest statistics, 80% of adults on the autism spectrum are dependent on some form of public transport and when disaster strikes, this may lead to disruption in daily routine and eventually the loss of independence. The challenges mentioned will occur in some form of disorientation, the struggle with planning, organisation and crisis management. For example, during the Hudhud Cyclone in Vishakhapatnam in India, in 2014, Sai Padma, founder of Global-Aid and a wheelchair user, was stuck in her house for 20 days because a tree fell at the entrance of her house and her wheelchair could not move until the tree was removed. Those are issues of accessibility, then we have physical risks. Lack of access to medical treatment, and secondary health issues like fever, infections, and high rate of abuse during crisis including physical, psychological, food, water, and other forms including sexual. For example, during Cyclone Vardah in Chennai in India a 20-year-old was on a ventilator and the power shut down because of the cyclone meant that she quickly needed to arrange an alternative. It took several hours for her life to be saved. We also have inclusion of disability in disaster management, there's a link there that you can look into to see the kind of risk that is involved and also we now go to psychological issues which include aggravation of depression, diminished and/or loss of self-confidence, emotional vulnerability, general frustration, self-doubt, depression. The psychological challenges as mentioned can be associated with a physical cause and affect response such a self-harm or stimming. For example, in Thailand the rapid mental health needs assessment after the tsunami in 2004 was done by researchers as part of public health emergency response. The report revealed that while symptoms of post-traumatic stress disorders were found among 12% of displaced, and 7% of non-disabled persons, anxiety symptoms were found among 37% of displaced and depression was reported by 30% of displaced survivors. We also have acquiring new, secondary conditions, when it comes to disaster and humanitarian risks. Psychological problems, or ulcers, pressure sores, contracture or reduced hearing or vision. When over stimulated, sensory stimulus that is received from the different senses can lead to the fight/flight response. The key term here is sensory or auditory blindness, where visual and auditory sensory stimulus is restricted and can therefore affect the outcome and reaction. For example, in Bhubabeswar a study conducted on 323 households with disabled children, showed 82 children who were improving in gait training or sitting balance had developed curvatures, undergone muscle weakness and lost sitting balance due to lack of therapy during the lockdown period. There are also livelihood issues with this situation. Livelihood issues like destruction of existing livelihood, disruption of markets and problems with government disability allowance. For example in India, according to Salma Mahbub, General Secretary Bangladesh Society for the Change and advocacy nexus, June was a particularly difficult month. This is what he is saying. "June was particularly a difficult month for disabled people. The survival packages, financial assistance and sanitisation support undertaken were not reaching them properly. Again in many places, the ones who did not have the disability cards were excluded from any sort of support. We are expecting a second wave of COVID-19 but until now no protection measures exist for those who have lost their jobs." So those are issues that come up with humanitarian and risky situations.

RICHARD: So in the light of what we were hearing from India there, this is a film from India which is really showing the risk to disabled people in general which backs up the point you have been making.

RICHARD: Ok that shows all of the main points. Do you want to read this or shall I go on and you do the last bit, what do you want to do Sarah?

SARAH: I can do the last one.

RICHARD: So the main barriers that impede access to services. There's no information on what type of service existed, no knowledge of where to access services. The service was too far from temporary or home locations, couldn't afford to get there, special services didn't exist. Special services was too expensive. Special services were not physically accessible. There were no trained staff to support, and the staff couldn't understand needs. Lack of empathy from service providers and lack of expert advice. So what the film was saying is disaster risk reduction needs to happen long before the disaster actually strikes, so that when it does happen there is a well thought out plan that then links in and actually provides the support that is actually needed. So here is another, having a look at severe weather, this is an Australian little short clip which I think helps to explain some of those points again. Let's have a look at this.

RICHARD: So, advance preparation for a disaster, the key points then. Equal access to shelter facilities. Equal access to evacuation and transport. Equal access to disaster clean up. Accessible shelters. Physical access, accessible communication in alternative languages. Accessible paths, accessible toilets, accessible sleeping equipment, access to food and healthcare needs. Assistive devices, facilities for power for people who need to recharge their powerchairs for instance and there's another thing. If schools are closed, and they are inclusive schools, then the temporary schools also need to be inclusive and they need to be in the charities and disaster organisations that produce schools in a box, there need to be differentiated materials so they can be available. After Cyclone Sidr in Bangladesh in 2007, a number of cyclone shelters were built using foreign aid. Despite information on the importance and how to of accessible design, the shelters were not constructed to be accessible. As a study stated, not a single one of them have ramps or any other accessible features, even the stairs are high and risky, in other words, making shelters and other temporary accommodation accessible for everybody is better for everybody, and we should really be in there being consulted and being asked. So what do we learn from this and many of the lessons which are held in the course book? There are many more of them. Over to you Sarah, what have we learned from the case studies?

SARAH: What we have learned from these case studies is that there is need for inclusive disaster risk reduction and preparedness. That disabled people and DPOs can have a critical role to play in disaster risk reduction, and preparedness if they are involved in the planning stages and if they are consciously thought about by those planning the same. Collecting and using disability disaggregated data for assessment and programming, relevant is very important because we need to know who we are planning for, who we need to rescue and what type of assistance they require. There's also the lesson of participation of disabled people and their respective organisations in humanitarian response and recovery, very key so that they can be able to be safe when such disasters occur. Removing barriers to access humanitarian assistance and protection. Disabled people are the most effective and strongest advocates to call for the elimination of barriers to their services. So they need to advocate more and put and hold the Governments to account for even giving them the safety that they require during humanitarian situations and making sure that the environments are conducive and friendly to their type of impairment. We also learnt that influencing co-ordination and mechanism and resource mobilisation to be inclusive, advocating for an inclusive humanitarian response for disabled people in a specific crisis, can have positive outcomes, so the inclusiveness in the recourse mobilisation is key so that it also caters for the special amenities that are required to cater for issues of persons with disabilities during the response. Thank you and over to you Richard.

RICHARD: Thank you just to finish then really, I think this has been quite a whistle-stop tour from a global crisis taking it down to the local level but obviously climate change, natural disasters, food emergencies, all of these things will impinge directly on the life of the 1 billion disabled people as they will on everybody else, but the reality is if there's a tsunami coming you're the last person, if you're mobility impaired, who will be able to get away from that. If you're in a situation where everything has changed because of a COVID lockdown, and you're a deaf person and you can't hear what the police are saying to keep off the streets during a curfew you're going to be the person that gets shot, and we heard last week from Uganda how that had happened to a couple of deaf people. We were talking about war, nothing changes much. In the First World War, many disabled people, because people from Britain went to fight, disabled people were the reserve army and brought into the munitions factories, but in fact a whole factory in North London, there were about 20 deaf people working there, but the soldiers who were guarding it had not been told to actually communicate with them so again, 100 years ago or more, these munition workers, several of them were shot by the sentries not understanding the communication. So the link between what happened then, what happened in Uganda, do we never learn anything? That's why DPOs need to be round the table, why we need to be there, actually saying what needs to be in a disaster response. But we also need to take active participation in preparing governments and holding governments to account, to actually reduce the causes of many of these disasters. So I hope you have learnt a lot in this module, like to thank you Sarah and Gemma behind the scenes and Julia our captioner, and we'll see you again at the seminars. Thank you very much.

SARAH: Thank you.