Vaccine Outreach to the Disability Community

Lisa McNiven, MPA
Vaccine Equity in Action
September 10th, 2021
NM Disability Statistics

Prevalence Rates of specific disabilities in New Mexico

All Disabilities prevalence rate is at 15.6% in NM, with the US at 10.4% for all ages.

2018 American Community Survey (ACS) by Cornell University
**NM Disability Emergency Planning Advisory Council (NMDEPAC)**

<table>
<thead>
<tr>
<th>Mission Statement</th>
<th>Provide Advice to Governor’s Commission on Disability (GCD)</th>
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<tbody>
<tr>
<td>Advocate, advise, train and educate for people with disabilities in disaster preparedness with the state and local agencies, emergency managers and first responders and disability communities.</td>
<td>Discuss Policy Questions regarding Emergency Preparedness (EP) Issues</td>
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<td><strong>Two Subcommittees:</strong></td>
<td>Participate in exercises</td>
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<td>Notification System Booklet</td>
<td>Provide local advice &amp; training to first responders or people with disabilities on Emergency Preparedness.</td>
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<td>Access and Functional Needs Map</td>
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New Mexico Variant Frequencies

Frequencies (colored by Clade)

20A
20C
20G
20B
20I (Alpha, V1)
21C (Epsilon)
21A (Delta)

Nextstrain
It began because of a need to share information in the state of NM during COVID 19 for people with Disabilities and those with Access & Functional Needs.

This comprises of:
- Disability Providers such as CDHH, CFB and DDC & more such as DVR.
- NMDEPAC
- Others: Homeless Providers, Education,…

Who provide services to individuals with disabilities or those with access and functional needs (pregnant, homeless, elderly, prisoners and more).
- Over 300 on the email list serve.

They meet weekly, every Thursday for up to 2 hours.

It has a leadership group, that is smaller in scale that has done work together such as:
- Communication Access Letter to the Governor.
- Material Development for the public
- Group presentations on systematic problems.
- Group discussion regarding access needs.
USA as of July 14th, 2020

**Total Cases:** 39,488,866  
**Total Deaths:** 641,725

CDC | Updated: September 9th, 2021 5:00pm

**New Mexico People with Disabilities in Congregate Settings** (Defined as Integrated Community Supports, In home supports, Day Services, Family & Medical Living, Respite, Supported Living and other such as Mi Via)

**Total Cases:** unknown  
**Total Deaths:** 608

NMDDSD as of August 13th, 2021 3pm

People with Disabilities:

- 30k in nursing homes in the U.S., this includes people with disabilities.  
  *Marcie Roth – World Disability Institute in 2020

Ex: A Mass. Nursing Home has 44 patients with 44 staff to accommodate their needs, all 44 patients and staff have COVID-19.

**NM People with Disabilities in Congregate settings** (Defined as Nursing Homes, Institutions, Group Homes and Psychiatric Hospitals):

**National:** 1,149,975 cases with 185,105 deaths (Total affected: 1,335,080)

**NM:** 7,811 cases with 1,006 deaths (Total affected: 8,817)

Autistic Self-Advocacy Network as of September 9th, 2021
Disability-based discrimination marginalizes a person with a disability in society during periods of non-emergency.

However, a disaster enhances the disparity between a person with a disability and other members of society as it increases the likelihood that those with a disability will be disproportionately negatively affected both during and after a disaster.

Separation from:
- Social support networks
- Support staff
- Mobility devices
- Medication
- Information through normal channels
INCLUSION OF INDIVIDUALS WITH DISABILITIES

Defining Inclusion

Valuing Inclusion

Optimizing Inclusion

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Copyright Right Picture: FEMA
**Disability Rights Laws** Section 504 of the Rehabilitation Act and Section 1557 of the Patient Protection and Affordable Care Act are Federal laws that protect qualified persons with disabilities from discrimination based on disability in programs and activities that receive Federal financial assistance.

- A wide **range of entities are covered by these disability rights laws.**
  - Covered entities may include, but are not limited to: Other civil rights laws, such as Titles II and III of the Americans with Disabilities Act, also protect individuals with disabilities.
    - All State and Local Governments
    - Hospital and Health Clinics
    - Tribal Health Centers
    - Physicians’ Offices
    - Urgent Care Centers
    - Nursing Homes
    - Congregate Care Facilities
    - Pharmacies
Disability Access in Vaccine Distribution

- **Eliminate Discriminatory Administrative Barrier**
  - Simplify the registration, scheduling, and communication processes required to get a vaccination.
  - Limit the number of steps required to receive a vaccination appointment.
  - Avoid time-consuming and challenging paperwork requirements that may screen out people with disabilities unnecessarily – only require the documentation necessary to ascertain eligibility.

- **Provide Effective Communication**
- **Provide an Equal Opportunity to Make Vaccine Appointments**
- **Ensure Program Access**
- **Modify Social Distancing Practices**

Compassion and trust: Reach for justice by prioritizing communities hardest hit by the COVID-19 public health emergency, as well as people who face current and historic health inequities and systemic oppression. Acknowledge the need for healing and amplify the voices and experiences of people who have been oppressed.

Inclusiveness: Approach vaccine engagement from a place-based, community-centered and intersectional perspective by recognizing individuals belong to multiple communities, including those defined by neighborhood as well as identity.

Transparency: Build trust with communities through honest, open and clear communication delivered by messengers who are trusted by their communities.

Autonomy: Make sure all individuals, regardless of their housing status or criminal justice involvement, access needs, age, use of social services or the languages they speak, can get the information they need to make an informed decision about the COVID-19 vaccine.

Accountability: Take advantage of the historic opportunity to build new, equitable policies, systems and power structures. Use data and community feedback to measure the impact of the COVID-19 vaccination program.
Group A
- Sign Language Interpreters
- Personal Care Attendants
- Home Health Care Attendants
- Support Services Providers (SSP’s)
- Orientation Trainers
- Rehabilitation Professionals
- Service Animal Trainers
- Healthcare Providers
- OT, PT, SLP, & Mental Health Providers
- Transportation Providers/Drivers
- Community Based Disability Providers
- Vocational Rehabilitation Counselors
- Caregivers

Group B
- People with Disabilities
- People with compromised immune systems
- Elderly
- Seniors
- People with underlying Health Conditions

COVID-19 Vaccines for People with Disabilities | CDC
**PHASE 1A**
- Hospital personnel
- Residents and staff of long-term care facilities
- Medical first responders
- Congregate setting workers (homeless shelters, correctional facilities, residential treatment centers, and community homes)
- Persons providing direct medical care and other in-person services
- Home-based healthcare and hospice workers

**PHASE 1B**
- Persons 75+
- Persons 16+ at risk of COVID complications
- Frontline essential workers unable to work remotely:
  - Early education and K-12 educators/staff, caregivers, grocery stores, food and agriculture, public transit, critical manufacturing, public health, public safety, mortuaries, indigent care, non-hospital laboratories
- Vulnerable populations:
  - Residents of congregate settings

**PHASE 1C**
- Adults 60+
- Other essential workers unable to work remotely:
  - Transport and logistics, utilities, energy, water and wastewater, food service, retail, shelter and housing, financial services, IT and telecommunications, energy, legal and accounting, media, veterinary and livestock services

**PHASE 2**
Members of the general public (age 16+)

*Estimated time frames; dependent on DOH receiving vaccine

*Vulnerable populations at risk of COVID complications can be vaccinated sooner
COVID-19 Resource Guide
Virtual Platform Guide
Virtual Platform Presentation
Town Hall Conferences
News Conferences

Accessible Vaccine Days (2x over 3 days)
- Accessible Site – Berna Facio Conf. Ctr
- Accessible plan
  - ASL Interpreters
  - ADA ToolKit
- Transportation - collaborative approach
  - Sun Van
  - MCO
- Marketing

Information for the Disability Community about COVID-19 | NM Governor's Commission on Disability (state.nm.us)
They determined that there was a need for information on people with disabilities experiences during the pandemic.

To highlight the issues found so that solutions may be addressed prior to the next public health emergency.
Purpose
- Collect info as to what worked or not for people with Disabilities statewide during the pandemic.

Goal
- Share information with Partners to generate solutions.

Process
- Focus Groups
- AAR Meeting
- Survey Development

Timeline
- Development of discussion points – September 2020
- 7 Focus Groups met to review discussion points – October to December 2020
- Collected data and compiled into a report – Jan. to May 2021
- Preliminary Report – May 2021
- Survey Dissemination – Fall 2021
- Final Report – Winter 2021

Note: Accessibility Needs during the process

*Report by the NMDEPAC*
Seven groups ranging from 3 to 15 participants with specific disabilities focused on their access needs during the pandemic, what worked and didn’t work under the 9 themes. They answered questions during several meetings. Data was collected via anecdotes in a narrative format.

In the report, we looked for themes across all disability groups. The most basic theme reported was that broadband and internet services were limited or non-existent in rural areas. This affected their ability to do remote work or participate in classes.

Some things that affected each disability group were different due to their specific access needs. The Blind needed Braille, the Deaf needed Sign language interpreter and a person with a cognitive disability needed a personal care attendant.
PRELIMINARY FINDINGS: NINE THEMES

- Technology
- Healthcare
- Transportation
- Employment
- Education
- Social Experiences
- Access to Food and Supplies
- Housing
- Voting
Summary

• No one disability group experienced barriers at a higher rate than the others. This may be due in part to the difficulty of quantifying narrative reports.

• All disability groups indicated that the pandemic created issues for them in all areas of daily activity. Social distancing and stay at home rules compounded their existing access needs prior to the pandemic.

• The preliminary report represents only a small sample (less than 1%) of members of the disability community. We need a statewide survey to assess issues among the great majority that have not been identified yet.

Next Steps

• Crafting accessible survey for all people with disabilities with both online and hard copy formats.

• Working with Stakeholders to distribute the surveys to the community statewide. Scheduled to go out in Fall 2021.

• Write up final report in Winter of 2021.
INCLUSION SAVES LIVES!
Any Questions?

Disasters do not discriminate!
CONTACT INFORMATION

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RESOURCES

- National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR) on ACL (Administration for Community Living) Website: https://acl.gov/about-acl/about-national-institute-disability-independent-living-and-rehabilitation-research

- ASAN: COVID 19 Case Tracker
  https://autisticadvocacy.org/covid19/

- CDC: Center for Disease Control
  https://www.cdc.gov/covid-data-tracker/index.html#cases

- NM Caregivers Coalition
  https://www.nmdcc.org/

- NM Department of Health (DOH):
  https://cv.nmhealth.org/
RESOURCES

- National Organization on Disability:
  https://www.nod.org/

- NM Governor's Commission on Disability (GCD) Evacuation Workbook:
  orrections-an-table-of-contents-links.pdf

- Pacific ADA Center:
  https://www.adapacific.org/

- The Partnership for Inclusive Disaster Strategies:
  www.disasterstrategies.org

- The World Institute on Disability:
  https://wid.org/