MAMI MIZUTORI

"WOMEN ARE POWERFUL CHANGE AGENTS IN THEIR FAMILIES AND COMMUNITIES"

INTERVIEW

MAMI MIZUTORI, SPECIAL REPRESENTATIVE OF THE SECRETARY GENERAL OF DISASTER RISK REDUCTION

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SHAYLIN SLUZALIS, CO-EXECUTIVE DIRECTOR PARTNERSHIP FOR INCLUSIVE DISASTER STRATEGIES

INTERVIEW

ANGÉLICA MONTEAGUDO
Disaster and Disability Inclusive Risk Reduction Magazine

Publication: bi monthly
Publisher: ONG Inclusiva, Chile
Languages: Spanish and English versions
Formats: PDF/ accessible word
Objectives:
• To promote human rights of people with disabilities and their families when facing disasters and emergencies
• To share knowledge about Disaster and Disability Inclusive Risk Reduction Magazine team:
  Editor in Chief: Mr. Carlos Kaiser M.
  Deputy Editor: Mrs. Loreto Brossard
  Director of the editorial board: Mr. Jorge Gallardo
  Graphic design: Mr. Franco Arriagada
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EDITORIAL

Arbitrary exclusion weakens society, is a social phenomenon that costs lives and also prevents significant. Social participation of women, apart from being unjust, creates vulnerabilities to face disasters.

Because of my disability I have been treated as an imperfect person and my merits are not taken as meritorious as the ones from people without disabilities, but when they want to feel inspired by my efforts as a source of amusement, but never as a source of dignity. I know women face similar conditions as the ones I face.

Women are building resilience and inclusion in the world. That is why we dedicate this issue to them interviewing great women leaders that are changing the world, struggling against COVID-19, hurricanes, earthquakes, and all kind of disastrous events. leaving no one behind

May this number contribute to celebrate and to promote women contributions to inclusive disaster risk reduction.

Carlos Kaiser
Editor in Chief
Disaster and Disability Inclusive Risk Reduction Magazine
WOMEN, DISABILITIES AND DISASTER RISK REDUCTION

Sendai Framework contributed to foster participation of women into disaster risk reduction in general and in disability inclusive disaster risk reduction in specific.

SENDAI goal of leaving no one behind is itself a game changer. as a breaking point that fosters participation. Let say that this moto can be understood not only as to bring help to those in need, but to fully recognize everyone’s contributions, to achieve resilience society needs all, and to leave no one behind equals to let everyone in, because of this the world is a better place.

Women contributions towards disability inclusive disaster risk reductions are wide, range from science to community-based actions, includes but are not limited to policy making, humanitarian actions, building back better among other areas.

Women contributions are meritorious not only because their amount and quality, but because the barriers that we face. Let’s look at some numbers.

Environmental degradation and climate change have disproportionate impacts on women and children. Women often bear the brunt of coping with climate-related shocks and stresses or the health effects of indoor and urban pollution, which add to their care burden. As land, forest and water resources are increasingly compromised, privatized or “grabbed” for commercial investment, local communities and indigenous peoples, particularly women, whose livelihoods depend on them, are marginalized and displaced. Globally, women are 14 times more likely than men to die during a disaster.¹

Women with disabilities are so marginally treated that there are no statistical data about what happens with them during different crisis like COVID-19.

Because all of the above mention I am leading the Global Network of Women Leaders om Inclusive Disaster Risk Reduction GNWLDRR, together we will have a voice of our own and we will change the world. Let’s be inclusive!!!

¹ Women, Gender Equality and Climate Change Fact Sheet THE NEED FOR GENDER SENSITIVE RESPONSES TO THE EFFECTS OF CLIMATE CHANGE.
On 31 January 2018, the United Nations Secretary-General announced the appointment of Mami Mizutori of Japan as Assistant Secretary-General and Special Representative of the Secretary-General for Disaster Risk Reduction, United Nations Office for Disaster Risk Reduction (UNISDR).

Ms. Mizutori brings to the position a combination of management and leadership expertise as well as more than 25 years of experience in international affairs and security. She is currently Executive Director of the Sainsbury Institute for the Study of Japanese Arts and Cultures, University of East Anglia, United Kingdom, since 2011. Prior to joining the Institute, she served for 27 years in the Japanese Ministry of Foreign Affairs in various capacities, including as Budget Director, Director of the Japan Information and Culture Centre at the Embassy of Japan in London, Director of the National Security Policy Division, Director of the United Nations Policy Division, Director of the Status of United States Forces Agreement Division and Deputy Director of the Personnel Division. She has worked in London, Washington, D.C., and Mexico City. She has taught courses on governance in East Asia at Ritsumeikan Asia Pacific University and international studies at Waseda University, Tokyo.

Ms. Mizutori graduated in law from Hitotsubashi University, Tokyo, and obtained a diploma in international studies from the Diplomatic School of Spain. Born in 1960, Ms. Mizutori is married.
1. SRSG Mizutori, what is the importance of women’s participation in disaster risk reduction?

Women’s participation in disaster risk reduction is crucial because women and girls are more vulnerable and exposed to disasters. Women are disproportionately represented in mortality figures. For example, in April 1991, Bangladesh was hit by the powerful cyclone Bob 01 when 90% of those killed were women. During the 2004 Indian Ocean Tsunami, four times more women were killed in India, Sri Lanka, and Indonesia than men.

More recently, reflecting on the impact of COVID-19 on our world, early data indicates that the mortality rates from COVID-19 may be higher, in fact, for men. However, when we think about impact on livelihoods, the pandemic is having devastating social and economic consequences for women and girls. Nearly 60 per cent of women around the world work in the informal economy, earning less, saving less, and being at greater risk of falling into poverty. As we see markets fall and businesses close, millions of women’s jobs have disappeared. And at the same time as they are losing paid employment, women’s unpaid care work has increased as a result of school closures and the increased needs of older people. Domestic violence against women is rising and girls are losing the opportunity of education.

UNDRR advocates for women to be put at the centre of disaster risk reduction efforts not only because gender equality is a fundamental part of increased resilience to disasters but also because women are powerful change agents in their families and communities. To support their role in catalysing change, women’s opinions and needs must be deliberately sought and included at all stages of development and implementation of national and local strategies on disaster risk reduction. Concrete gender-sensitive and responsive approaches can be planned. These can include ensuring that evacuation shelters have separate areas for women and children, resulting in stronger disaster risk reduction interventions that reduce the vulnerability of women in times of disaster.

We know that local community-based women’s organizations are often the most knowledgeable of the specific needs and capacities of affected people; engaging at the local level is therefore essential. The Huairou Commission, is a great example of a global movement that provides direct support to grassroots women’s organizations in 54 countries, ensuring women can participate in decision-making structures dealing with issues that affect their daily lives. We need to see and support more such initiatives!

2. Is there any data about the impact of COVID 19 in women and people with disabilities?

This question highlights an extremely important issue about data in general. Put simply, we do not have enough of
the right kind of data, and by that I mean data that is contextual and disaggregated—data that improves our understanding of not just how many are affected, but how they are affected. This is particularly important when we consider how to better plan and respond to reducing risk and loss for people living with disability. So my honest response to your question, unfortunately, is that we still don’t have a full picture about how women and people with disabilities are affected by COVID-19. What we do know is that the COVID-19 disaster is deepening pre-existing inequalities.

Take the Americas and Caribbean region alone where there are more than 85 million persons living with some form of disability. If we add to that their caregivers, families and support networks, either directly or indirectly, disability is a core factor which determines the wellbeing of the lives of a significant percentage of the population. We must not forget that even in normal circumstances, due to existing barriers in their environment, persons with disabilities tend to live in situations of greater vulnerability than other social groups and are more likely to experience conditions of poverty or extreme poverty. COVID-19 is definitely exacerbating their vulnerability.

To give a clear example, persons with disabilities—one billion people globally—have been among the hardest hit in this crisis in terms of fatalities. But even under normal circumstances, persons with disabilities are less likely to access health care, education, employment and to participate in the community. They are more likely to live in poverty, to experience higher rates of violence, neglect and abuse, and are among the most marginalized in crisis-affected communities.

PERSONS WITH DISABILITIES TEND TO LIVE IN SITUATIONS OF GREATER VULNERABILITY THAN OTHER SOCIAL GROUPS

3. Is there any recommendation for countries to be disability inclusive when they start building back better?

Yes, in fact the United Nations Secretary-General launched his Policy Brief on a Disability Inclusive Response to COVID19 in May 2020. It recommends meaningfully engaging all stakeholders, including persons with disabilities to build sustainable and disability inclusive social protection systems and invest in community-based solutions. The UN has also put together a very practical checklist for planning a disability inclusive socio-economic response to COVID-19.

We need to change this crisis into an opportunity. There are many areas where we can push the reset button and together with persons with disabilities, design disability-inclusive
COVID-19 response and recovery options that in turn support more inclusive and accessible societies.

How do we ensure that our recovery is risk-informed so that we build disaster resilience and protect sustainable development gains for persons with disabilities? As the UN guidance indicates, we can do this by, amongst other things, strengthening national legislation around disability inclusion; improving health-care coverage for persons with disabilities; and prohibiting discriminatory practices in insurance coverage.

When it comes to disaster risk reduction specifically, building back better and leaving no one behind are the core values of the Sendai Framework for Disaster Risk Reduction, the first of the 2030 Global Agenda frameworks and the global blueprint for risk-informed development. The Sendai Framework specifically references persons with disabilities throughout its preamble, the guiding principles, the priorities for action, and the role of stakeholders.

4. What are the next steps of UNDRR to promote disability inclusive disaster risk reduction?

Since the adoption of the Sendai Framework for Disaster Risk Reduction by Member States in 2015, UNDRR has advocated for persons with disabilities and their leaders to be consulted and fully engaged in the development and implementation of national and local disaster risk reduction strategies.

But without accurate evidence of where we currently stand, we cannot confidently chart our path forward. UNDRR advocates that risk-informed sustainable development requires robust data and statistics that are timely, accurate, disaggregated, people-centred and accessible, and which enable us to capture progress and then direct investment accordingly.

In order to further increase awareness on disability inclusive DRR, UNDRR has developed a range of policy guidance and advocacy campaigns on humanitarian action and DRR, including narrative pieces, blogs and case studies on “Inclusion and Vulnerability” which you can find on our PreventionWeb.

Some of our other engagements on disability inclusive DRR include:

- Hosting a special tsunami awareness training for African youth, with volunteers coming from the youth representatives of the local deaf school in Toamasina Madagascar, by our Regional Office for Africa.

- Assisting the Disability inclusive DRR Network (DiDRRN) in Asia to produce a series of disaster preparedness quick guides for persons with disabilities through our Regional Office for Asia Pacific.
In the Americas and Caribbean, our Regional Office is currently assisting in the development of guidelines and tools on inclusive local DRR plans which will be applied in 51 local governments in the greater metropolitan area of Santiago.

- UNITAR and UNDRR GETI summer and winter editions of the eLearning course on Making cities Resilient: Developing Local Disaster Risk Reduction and Resilience Strategies are accessible to persons with disabilities.

- During September and October, UNDRR will undertake in-depth training on disability inclusiveness for all the staff, including myself, which will result in the identification of key priorities and concrete actions to implement disability inclusive disaster risk reduction.

- Importantly, the upcoming five regional platform meetings in 2021 will be inclusive of persons with disabilities and thus ensuring that disability stays high on the disaster risk reduction agenda and that it is an integral part of the on-going political discussion.

5. People with disabilities have been discriminated during COVID-19, how can we stop this situation and how can we be better prepared to face the next disaster leaving no one behind?

More than a simple health disaster, COVID-19 is a human disaster. It has been attacking our societies at their core. It was also a wake-up call that disasters don’t wait in turn to strike us.

Good governance is critical. The focus of the International Day for Disaster Risk Reduction this year is improving risk governance. When we don’t have good enough risk governance, the likelihood of a catastrophic event grows. Countries must put disaster risk reduction at the heart of government and policymaking as well as putting the funding behind prevention.

The very essence of the Sendai Framework is about shifting attention from responding to disasters, to changing behaviour, so that we can mitigate risks from disasters before they hit and, in doing so, reducing deaths and economic loss, and make it more likely that we will achieve sustainable development for everyone, including persons with disability.

And since persons with disabilities share the same primary needs as everyone else including health protection and treatment, basic services, shelter and income, the best way to address their inclusion is through mainstreaming disability in all our plans and efforts.

In short, it’s about prevention and building resilience for the future – for everyone. Only then we can say with confidence that we are not leaving anyone behind.
SHAYLIN SLUZALIS, CO-EXECUTIVE DIRECTOR PARTNERSHIP FOR INCLUSIVE DISASTER STRATEGIES:

“WITHOUT WOMEN’S LEADERSHIP, GOVERNMENTS AND ORGANIZATIONS LOSE A VITAL PERSPECTIVE, RESOURCE, AND CONTRIBUTION”

Shaylin Sluzalis is a life-long disability rights advocate, born and raised by the Independent Living movement. Shaylin has been an advocate for her disabled sister Brittani all her life, and has been involved with the Center for Independent Living of North Central Pennsylvania since she can remember. She co-founded, alongside disability rights leaders, North Central PA ADAPT and is a strong disability rights activist and organizer. Shaylin has been involved with The Partnership since 2017 after being deployed by Portlight Strategies to Puerto Rico to provide aid to people with disabilities and advocate for full inclusion and equal access to disaster resources.

1. **How can women’s participation in disaster risk reduction be increased?**

We can increase women’s participation in disaster risk reduction when we recognize that women’s leadership is fundamental to the success of the field. Governments and organizations need to ensure there is gender-responsive as integration and promotion of women’s leadership and participation.

Disasters impact the most marginalized demographics the most. Women and girls are particularly exposed to climate-related disaster risk — we are likely to suffer higher rates of mortality, morbidity and economic damage to our livelihoods. Women, along with
children, are also 14 times more likely than men to die in disasters.

Without women’s leadership, governments and organizations lose a vital perspective, resource, and contribution. As Priority Four from the Sendai Framework outlines, “[empowering] women and persons with disabilities to publicly lead and promote gender equitable and universally accessible response, recovery, rehabilitation and reconstruction approaches is key.”

It’s important to emphasize women’s leadership, and not just women’s participation. As the Sendai Framework says, we need to empower women. This means not only including women in discussions, but with the understanding that men need to acknowledge when to move out of the way to allow space for meaningful input, participation, and leadership from women.

Persons with disabilities are two to four times more likely to die or be injured in a disaster than the general population. This is largely due to the inadequate support given to disabled people, and the lack of accessible resources available to the disability community.

When disasters can be anticipated, governments encourage the affected population to either fortify their homes or evacuate. However, many disabled individuals cannot do either of these things without additional supports – supports that often do not exist. Instead, governments ignore the people with disabilities that need help and watch as they succumb to the disaster.

In the aftermath of disasters, people with disabilities continue to be left behind. Available resources set up for the public are not created with Disabled Person Organizations (DPOs), and as a result often without disabled people in mind. Many shelters are not accessible, and when and in the chance they are often prejudices on people with what may be observed as having severe disabilities or with medical needs are not allowed in. Instead, we are told to go to institutions when what we really need is equal access to disaster services, programs, and humanitarian aid.

2. Could you describe what are the greatest problems people with disabilities face when disasters happen?

All disaster and emergency related services and programs must be inclusive and accessible to all people with disabilities. This includes equally effective
communication in alerts and notifications and physical accessibility and equally effective communication throughout evacuations, sheltering, relief, and recovery services. People with disabilities often are left behind and considered burdens in disasters. If governments and organizations include people with disabilities and DPOs at the planning, response, mitigation, and recovery stages - we can apply our adaptability and daily problem solving skills to make an inclusive response that leaves No One Behind and Build Back Better.

3. What is needed to achieve a world inclusive COVID-19 response?

Every country, and governments at all levels need to include persons with disabilities and multi-marginalized communities in the planning, response, mitigation and recovery stages. Starting with increasing the number of countries with national and local disaster risk reduction complementary to the Sendai Framework, and fully honoring (or ratifying, like in the case of the United States) the UN Convention on the Rights of Persons with Disabilities.

In relation to the COVID-19 pandemic response, countries need to collaboratively commit to bias-free access to testing, treatment and long-term recovery for people with disabilities and marginalized communities. Access to testing includes, but is not limited to, having alternative locations on bus lines as well as testing in congregate settings. Access to treatment and long-term recovery means abolishing medical rationing of life-saving resources, such as ventilators.

COUNTRIES MUST DEVELOP AND IMPLEMENT COMMUNITY ALTERNATIVES TO ALL CONGREGATE SETTINGS

Additionally, once a vaccine is created, countries need to have a course of action that ensures equal access to vaccinations. Countries also need to prioritize so called high-risk groups, such as people with disabilities, older adults and other multi-marginalized communities, so that we can mitigate any more unnecessary loss of life.

Finally, countries must develop and implement community alternatives to all congregate settings, including nursing homes, group homes, mental health facilities, homeless shelters, detention centers and prisons. We all recognize by now COVID-19 spreads in congregate settings at a much higher rate than non-congregate settings; to prevent further infection and death we need to move away from these settings.
GOVERNMENTS NEED TO RESERVE SEATS AT DISASTER RISK MANAGEMENT PLANNING TABLES FOR DISABLED PERSONS ORGANIZATIONS (DPOs) THAT HAVE THE EXPERIENCE AND EXPERTISE TO BE LEADERS IN THE FIELD

4. The world faces multiple hazards simultaneously, but it seems that people with disabilities are not included into disaster risk management mainstream bodies or entities, do you think that is possible to change that? If yes, how?

Yes, of course it is possible to include people with disabilities and other marginalized communities in disaster risk management. We can do this by 1) empowering persons with disabilities to join leadership and decision making positions, and 2) non-disabled people need to recognize people with disabilities are not intrinsically vulnerable.

To empower people with disabilities to join leadership positions, governments need to reserve seats at disaster risk management planning tables for Disabled Persons Organizations (DPOs) that have the experience and expertise to be leaders in the field.

Finally, governments, the private sector, and foundations need to ensure that DPOs across the globe are included in disaster aid and funds directly, this will elevate the ability of subject matter experts with lived experiences to increase their local, national, regional, and global disaster policy making and response.

5. How can we encourage women from all over the world to work in disability inclusive disaster risk reduction?

I am not so sure we need to encourage women to work in disability inclusive disaster risk reduction, but that governments and organizations need to empower and welcome space for women leadership and women’s involvement at all levels of disaster risk reduction. There are millions of women around the world making our planet a more resilient place, especially disabled women impacted by disasters, disabled girls, and family and caregivers of disabled persons and older adults, who are predominantly women around the world.

These women, and so many more, are often not thought of to be “encouraged” to be involved in disaster risk reduction, and often do not have the equal opportunity as their male counterparts. Additionally, we women will not be used as tokens for representation or to meet a quota - governments and organizations must involve women as equal contributors to disability inclusive disaster risk reduction.
and treat us as equal counterparts, problem solvers, and decision makers.

As a young woman in leadership at a national disability-led organization, I certainly feel the barriers the systems and people within the systems place before me and my many women colleagues around the world. We must not let these systems forget that the world could not go round without the strength, intelligence, and resiliency of women.

These actions would make strides in beginning to dismantle the barriers and encourage women from all over the world to identify with working in disability inclusive disaster risk reduction.

Nothing About Us Without Us!

THESE CAMPAIGNS NEED TO DEVELOP CULTURALLY APPROPRIATE PROGRAMMING AND MESSAGING CAMPAIGNS SURROUNDING THE BENEFITS OF WORKING WOMEN.

Governments, organizations, and communities can encourage women to work in inclusive disaster risk reduction by dismantling the barriers we often face. Campaigns need to be developed to change the cultural stigmas surrounding women that work in this predominately-male field. These campaigns need to develop culturally appropriate programming and messaging campaigns surrounding the benefits of working women. Training programs need to be developed to train and build confidence in women who have no prior work experience in this field. Finally, women need to be guaranteed discrimination-free hiring, opportunities for career and leadership development, equal wages, and free and accessible childcare.

In Solidarity,
Shaylin Sluzalis
Co-Executive D
ANGÉLICA MONTEAGUDO:
“IT IS NECESSARY TO CARRY OUT AN INTENSIVE AWARENESS CAMPAIGN ON THE INCLUSION OF PEOPLE WITH DISABILITIES”

Angélica Monteagudo is a well known leader of people with disabilities. She works on disaster risk reduction.

1. As a woman with disabilities, what are the greatest barriers you face to work on disability inclusive disaster risk reduction with governments?

Among the main barriers are the lack of inclusion of the gender perspective and the rights of people with disabilities in the response plans before the DRR in which the actions of the Central Government and Municipal entities, in their majority, are seen as people receiving services and with a medical focus, that is, sick people.

2. how hard has been for people with disabilities to cope with COVID-19?

Extremely difficult due to poor access to information and communication in accessible formats, health and rehabilitation services have been limited, as most are for people affected by COVID-19, and the few people who have managed to obtain a job have been very affected, some have lost their jobs and other people with disabilities who continue to work, their employers do not consider the environmental conditions as an additional factor that affects a possible contagion on a larger scale than the rest of the
population, accentuating this condition by the lack of reasonable accommodation so that the protocols and biosafety measures are equitable, and the limited mobility and autonomy of the person with disabilities is not limited.

3. How can we facilitate more participation of women with disabilities work in disability inclusive disaster risk reduction?

It is necessary to carry out an intensive awareness campaign on the inclusion of people with disabilities and the participation of women with disabilities in DRR. And at the same time request international cooperation to include the gender and disability perspective in their projects.

4. Disasters will continue to happen, what can be done to leave no one behind?

Advocacy should continue from the different Organizations of People with Disabilities and the institutions that work in the area of Disability in order to guarantee the need to include the rights of people with disabilities and the gender perspective in DRR response plans, both locally and centrally.
SOCIAL SCIENCE AND INCLUSIVE DISABILITY DISASTER RISK REDUCTION:
CURRENT LANDSCAPE AND CHALLENGES FOR THE FUTURE

Research and Development Coordinator Inclusive NGO.
Member of national and international research networks, such as the International Sociological Association. With studies in Health Sciences, he is currently a Ph.D. (c) in Sociology. He has been a lecturer in the main universities of Chile and has participated as a researcher in the UNAM.
In ONG Inclusiva, he participates in the preparation and theoretical-methodological discussions of the various studies, instruments and other activities that we carry out.

The pandemic is not over. Despite the efforts of several laboratories around the world, the road is long. Either because of the different testing phases that vaccines must go through or because of the global distribution networks necessary so that a large part of the world’s population can be immunized. Either way, we are not close to the end of the pandemic. However, almost a year after the first reported case of COVID-19 on the planet, we are witnessing the various ways of addressing the global emergency and its problems. Among them, we will mention the impact of the pandemic on people with disabilities.

At the beginning of the pandemic, various groups and institutions warned of the possibility of discrimination against people with disabilities in health services. Including us, we remembered the rights that people with disabilities have to be cared for and not be forgotten (1). However, despite this effort, today, we have evidence that many of the measures implemented around the
world had a negative impact on the population of people with disabilities. Let's look at some of them.

In general, we saw that the response to the pandemic was fundamentally hospital-based. In various media, it was common to see daily reports of new cases of infection, deaths, and available mechanical ventilators. This approach to the pandemic has been described as hospital-centric. In other words, it was the hospital alone that had to respond. Moreover, the LockDown strategy was used as a method to contain the contagion. Both approaches to address the global health emergency, resulted in excluding the support given by health services installed in the community. In other words, everything revolved around the hospital.

How did these measures affect people with disabilities? On the one hand, many people with disabilities saw their rehabilitation services diminished. As a result of the lockdown, it was not anticipated how critical this was for many people (2). And while it might be understandable, there is another more worrisome effect: the impact of some specific disabilities on the risk of COVID-19 was not considered. For example, one study showed that people with visual impairment are at greater risk of getting COVID-19 (3). Simultaneously, no measures were disseminated to reduce infection risk for people with disabilities who use wheelchairs, canes, or other technical aids. For this reason, Inclusive NGO published specific recommendations to reduce the risk of infection in these cases.

In this scenario, the challenges we face are many; however, the path is a little clearer. First, we must understand that the pandemic is not yet over. Therefore, we must learn from all the experiences around the world about how to deal with it. Second, we need to think about how focusing on hospital care can have negative consequences for the population when groups such as people with disabilities are excluded from society. This would mean that their needs would not be heard or included in measures to address the pandemic. And third, the pandemic has taught us that we are not alone. We need each other to live in society. Therefore, despite the magnitude this pandemic has had and will have, we have an opportunity to strengthen the ties that bind us together, and work to create a more inclusive society in the future.

References

