



**Royal Commission**  
into Violence, Abuse, Neglect and Exploitation  
of People with Disability

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# Issues Paper

## Emergency planning and response

April 2020

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Please be aware that the content and associated questions in this issues paper maybe distressing or raise issues of concern for some readers.

There are a range of services available if you require support after reading this paper. Contact details for these services are located at the end of this paper under the heading 'Support to respond to this Issue paper'.

## Introduction

Australia is currently in the midst of an unprecedented emergency with the COVID-19 pandemic, following the summer bushfire crisis. All Australian governments have a responsibility to uphold the rights of people with disability during emergencies.<sup>1</sup> People with disability can be severely affected by emergencies and may be at a higher risk of experiencing violence, abuse, neglect and exploitation at these times. The Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability (the Royal Commission) is interested in understanding how emergency planning and response can include and support people with disability, and what should be done to prevent people with disability from experiencing violence, abuse, neglect and exploitation during emergencies.

The purpose of this Issues Paper is to invite information from the public on emergency planning and response. We welcome any information that will assist the Royal Commission. A list of questions is included near the end of this paper. The questions are a guide. You do not have to answer every question.

More information about how to respond to this Issues Paper is at the end of the paper.

If you wish to share an individual experience of violence, abuse, neglect or exploitation, experienced by you or another person with disability, please consider making a submission. You can contact us in writing, by telephone or by sending a video. More information is on our [website](#).

**Attachment A** sets out the Royal Commission's working definitions of violence, abuse, neglect and exploitation.

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# What is emergency planning and response?

Australia has a long history of emergencies that affect people's lives and the economy. The current COVID-19 pandemic and the 2019-2020 bushfire season are two recent examples of disasters that have had profound effects on the Australian population. We also regularly experience floods, droughts and cyclones. Australian, state and territory governments are responsible for planning and responding to emergencies.

Different jurisdictions and sectors are currently implementing a range of measures in response to the pandemic. Our intention is not to catalogue those measures. We seek feedback on what could be done to improve emergency planning and responses for people with disability and to prevent violence, abuse, neglect and exploitation.

## Case study: COVID-19

- COVID-19, also known as Coronavirus, is a virus making people sick.
- The symptoms of COVID-19 can range from very mild to very severe. Some people may have a cough, fever and be short of breath. Some people may get very sick.<sup>2</sup>
- The virus has become a pandemic, meaning it has spread worldwide. It may become widespread across Australia if not managed.<sup>3</sup>
- As of 6am on 14 April 2020 there are 6,366 confirmed cases of COVID-19 in Australia and 61 people have died.<sup>4</sup>
- Coronavirus is most likely spread through person-to-person contact.<sup>5</sup>
- Australian, state and territory governments are responding with measures to help control the spread of the virus. These include 'social distancing', which means increasing the physical distance between people, and limiting the number of people allowed to meet in public spaces. Some people prefer to call this 'physical distancing'.
- People with disability may at be higher risk of getting COVID-19 because of the need for physical contact with other people to meet their support needs and may develop more severe illness because of pre-existing health conditions.
- People with disability are also facing barriers to accessing quality health care during the pandemic, including inaccessible communication, clinics and testing, and triage protocols that discriminate against people with disability.<sup>6</sup>

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## Case study: 2019-2020 bushfire season

- The Black Summer bushfires of 2019-2020 destroyed over 11 million hectares across Australia.<sup>7</sup>
- Nearly 80% of Australians were affected either directly or indirectly by the bushfires, and an estimated one billion animals were killed.<sup>8</sup>
- The properties of around 2.9 million Australians were destroyed, damaged, threatened or had to be evacuated. Thirty-three people died during the bushfires, and a further 417 deaths and 3,000 hospitalisations were caused by exposure to bushfire smoke.<sup>9</sup>
- People with disability were at risk during the bushfires due to inadequate or inaccessible evacuation plans and communication and information broadcasts, for example no interpreters or not in easy English. Many people with disability also lost essential aids and equipment during the bushfires, and were forced to leave accessible homes.<sup>10</sup>
- The Royal Commission into National Natural Disaster Arrangements may consider some of these issues.<sup>11</sup>

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# Key human rights obligations and frameworks

## Convention on the Rights of Persons with Disabilities

The United Nations Convention on the Rights of Persons with Disabilities affirms that people with disability have the right to life on an equal basis with others (Article 10), and governments have a duty to ensure people with disability are safe and protected in situations of risk (Article 11). Australian governments are responsible for ensuring people with disability have full and equal access to information and services, such as medical facilities during emergencies, as well as upholding the right to health without discrimination on the basis of disability (Articles 9, 11 and 25). Australia has a responsibility to ensure people with disability are not deprived of their liberty on the basis of their disability during emergencies (Article 14).

## Sendai Framework for Disaster Risk Reduction

The United Nations Sendai Framework for Disaster Risk Reduction 2015–2030 is the international framework for reducing and preventing disaster risks. Australia endorsed the Sendai Framework in 2015. The Sendai Framework outlines four priorities for disaster risk management to strengthen the resilience of countries at times of crisis. It recommends inclusive engagement and partnership, and investing in women and people with disability to lead and promote the design and implementation of accessible disaster risk policies, plans and standards.<sup>12</sup> The Sendai Framework highlights people with disability and disabled persons organisations need to be part of disaster risk assessments.

## Australian Frameworks

The Commonwealth Government has two frameworks in place to prepare for disasters: the National Disaster Risk Reduction Framework (2018) and the Australian Disaster Preparedness Framework (2018). The National Disaster Risk Reduction Framework translates the Sendai Framework into the Australian context and outlines a coordinated approach to reducing disaster risk, highlighting that disaster impacts are often felt disproportionately by vulnerable groups.<sup>13</sup> The Australian Disaster Preparedness Framework (2018) outlines the skills or capabilities needed to prepare for, manage and recover from severe to catastrophic disasters.<sup>14</sup> It highlights essential capabilities required to meet the essential needs of affected citizens, including provision of care across health, disability, psychological and aged sectors. Neither of these frameworks incorporates the Sendai Framework recommendation to include people with disability in design and implementation of accessible disaster risk plans.

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# Key issues

The Royal Commission is concerned about people with disability being overlooked or left behind during emergencies. Our [Statement of Concern](#) outlines our concerns about the impact of the COVID-19 pandemic on people with disability.<sup>15</sup> This has been strongly endorsed by over 70 Disability People's and Disability Representative Organisations across Australia in an Open Letter to the National Cabinet.<sup>16</sup> The United Nations Special Rapporteur has also endorsed our call for action.<sup>17</sup>

We are similarly concerned about the treatment of people with disability during bushfires, floods and droughts. We acknowledge the role of the Royal Commission into National Disaster Arrangements in investigating planning and responses to natural disasters and that they may also consider some of the issues outlined below through the course of their inquiry.<sup>18</sup>

## Accessible information

Information and news broadcasts provided during emergencies can be inaccessible to people with disability. Governments, service providers and national health authorities must provide information in accessible formats, including:

- Australian Sign language (Auslan) and captioning<sup>19</sup>
- accessible digital technologies including text messages, captioning and relay services
- non-digital formats for people without regular online access
- easy-to-read and plain language
- First Nations languages and diverse community languages.

We are interested in hearing how governments and others, such as the nongovernment, private and community sectors, share information with people with disability. This include understanding how this works for those who do not have access to the internet, smart devices or mobile phones during emergencies. We are also interested in understanding how these strategies can be improved to ensure people with disability have access to the information they need.

## Access to essential support services

Many people with disability require daily assistance with meals, toileting, showering, sleeping and getting dressed. Emergency planning and responses need to ensure people with disability continue to have safe and regular access to these essential support services. Consistent measures should also be put in place to ensure people providing these supports are properly trained in harm reduction practices and infection control. People with disability must not be forced to accept support without proper safeguards to reduce risks to their health and safety during emergencies. We want to know what measures are needed to ensure safe delivery of services.

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## Access to food and nutrition

People with disability may face barriers to accessing food and nutrition during emergencies if essential supplies run low or if support workers or family are unable to help access food. While the Australian Government has recently announced that National Disability Insurance Scheme (NDIS) participants will receive priority home delivery from leading supermarkets during the COVID-19 pandemic,<sup>20</sup> we are concerned many people who are not NDIS participants are excluded from accessing this priority service. We are interested in hearing what measures should be put in place to ensure people with disability have access to essential food and nutrition during emergencies.

## Access to health care

Underlying health conditions, such as chronic diseases and complex conditions, and increased risk of infection further complicate issues around access to health care. People with disability experience higher rates of death during emergencies.<sup>21</sup>

We have heard that people with disability continue to face barriers during emergencies in accessing:

- critical health care, medications, assistive devices, rehabilitation and therapeutic services
- essential health supplies, such as personal protective equipment and sterilising equipment
- basic needs to support their health, including food, water, shelter and toilets
- an ambulance, especially people who are unable to transfer independently and rely on lifting equipment to transfer out of a wheelchair.

Unconscious bias and discrimination in the health care system may mean people with disability experience poor health care during emergencies. People with disability must not be prevented from accessing critical and lifesaving health care, such as screening and treatment, due to disability. We are interested in hearing about the experiences of people with disability in accessing health care during emergencies.

## Housing

People with disability living in closed facilities, such as group homes, prisons and mental health facilities, may be at higher risk of infection and not having access to health care during the current pandemic. For example, they may be at higher risk of becoming unwell during the pandemic due to their close contact with support workers and other residents. It is critical that support workers and others are trained in infection control and have access to personal protective equipment to avoid spreading disease. People with disability also need access to accessible education on infection control and hygiene measures.

Decisions to lock down closed or segregated settings during an emergency may put people with disability at risk of violence, abuse, neglect and exploitation by removing safeguarding or oversight practices.

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People with disability face increased likelihood of experiencing homelessness or additional barriers to exiting homelessness.<sup>22</sup> During emergencies, it is important that housing support services are accessible to people with disability. We would like to hear how the housing of people with disability is affected by emergencies.

## Income security

People with disability often experience increased financial stress during emergencies. Financial costs may increase through additional requirements for medication, transport or therapy. Income security may be limited for people with disability who may have their wages reduced or who receive the Disability Support Pension.

People with disability who are able to continue employment during an emergency may be placed at increased risk through inaccessible information, for example, if workplace hygiene training is not provided in accessible formats. We are interested in what should be done to increase the income security of people with disability during emergencies.

## Domestic and family violence

People with disability, especially women with disability, are already at greater risk of domestic and family violence: around 40% of all female victims of partner violence are women with disability.<sup>23</sup> The risk of domestic and family violence increases during disasters.<sup>24</sup>

It is essential that domestic, family and sexual violence services are resourced to assist people with disability during emergencies, and people with disability are informed of clear pathways to seek help with minimal interruption to necessary supports. We want to know what measures should be in place to reduce the risk of domestic and family violence for people with disability during emergencies.

## Education

People with disability may face barriers to receiving quality education during and as a result of emergencies. For example, replacement buildings built during bushfire seasons may be inaccessible to students with disability.

The move to online and distance learning in other emergencies, such as the current COVID-19 pandemic, may raise new and increased barriers for students with disability. Not all video conferencing, online tools and communication methods are accessible to all people with disability and their families, particularly if they do not have access to the internet. Parents and families may need additional support to assist children with disability so that their educational needs are not neglected. We are interested in hearing the experiences of students with disability during emergencies.



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## Reduced safeguards and oversight

People with disability in closed facilities and segregated settings may be at increased risk of violence, abuse, neglect and exploitation during emergencies due to reduced safeguarding and oversight by family, friends, supporters, advocates and community visitors. Closed facilities and segregated settings include group homes, prisons, mental health facilities, Australian Disability Enterprises, and day programs.

Removing informal community-based safeguarding and oversight practices may expose people with disability to higher rates of violence, abuse, neglect and exploitation. We are interested in hearing what measures governments have in place to protect and support people with disability in all closed facilities and segregated settings during emergencies. We are also interested in hearing how these measures can be improved.

## Community participation and social isolation

Staying connected with the community, particularly through online communication methods, is critical for ensuring people with disability remain safe and informed during emergencies. People with disability in closed or congregate settings may be at a greater risk of being socially isolated during crises if they do not have access to the internet, telephones or computers.

We want to know how people with disability can be supported to stay connected to family, friends and the community during emergencies.

Some people with disability participate in day programs in congregate settings. State and territory governments are currently providing different advice to the disability sector on whether these programs should close during the pandemic. At present there is no uniform national guidance on managing day programs during the pandemic.

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## First Nations people with disability

Even in non-emergency situations, First Nations people with disability experience poorer overall health, poverty and overcrowded housing. Gaps in services, including acute care, primary care and prevention, and a lack of health infrastructure, equipment and medicine can result in poorer outcomes for First Nations people with disability. Many First Nations people with disability lack access to transport options, making it more difficult for them to keep themselves safe during an emergency. This can be made worse by a lack of culturally appropriate and accessible information.

We are interested in understanding how First Nations people with disability are affected during emergencies, and what supports and services should be put in place.

## Culturally and linguistically diverse people with disability

We are interested in understanding the experiences of culturally and linguistically diverse people with disability during emergencies. We would particularly like to understand how they may be further affected by a lack of accessible information, support services and appropriate strategies to engage culturally and linguistically diverse communities.

## Including people with disability in emergency planning and response

The United Nations has identified that including people with disabilities in all stages of emergency planning and response can help save lives.<sup>25</sup> People with disability and their representative organisations are best placed to advise governments and authorities on what is needed to ensure they are kept safe during times of crisis. The World Health Organisation suggests the need for collaborative and inclusive actions before, during and after emergencies in order to manage health risks for people with disabilities.<sup>26</sup>

We would like to hear how people with disability are or should be included in emergency planning and response, including through volunteer efforts by people with disability. This includes how people with disability have helped inform the development or implementation of current frameworks and practices.

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# Questions

We welcome responses from people with disability, their families or carers, about the specific difficulties they may have experienced during the COVID-19 pandemic, the Black Summer bushfires, or any other emergencies.

Please answer as many of these questions as you wish. You do not need to answer them all and your response does not have to address any of the questions.

**Question 1:** What needs to be done by governments to increase the safety and wellbeing of people with disability during an emergency such as the COVID-19 pandemic or the Black Summer bushfires?

**Question 2:** What supports are required to ensure people with disability are not at risk of violence, abuse, neglect and exploitation during an emergency? For example:

- Health support
- Financial support

**Question 3:** What is the experience of people with disability in getting assistance and information in an emergency? How does a lack of assistance and information expose people with disability to violence, abuse, neglect and exploitation?

**Question 4:** Will an emergency hotline service help people with disability keep safe and informed during an emergency? What other communication measures might be helpful?

**Question 5:** How can people with disability be included in emergency planning and responses to ensure strategies that reduce risk of violence, abuse, neglect and exploitation?

**Question 6:** How are people with disability in closed facilities and segregated settings placed at increased risk of violence, abuse, neglect and exploitation during emergencies? What is needed to ensure people with disability in these settings are safe if facilities are locked down or evacuated?

**Question 7:** How can people with disability be protected from violence, abuse, neglect and exploitation when oversight and safeguarding practices are affected during emergencies? Should additional practices be in place during emergencies? If so, what should those be?

**Question 8:** What are the particular experiences of children and young people, First Nations people, culturally and linguistically diverse people, women and LGBTQI+ people with disability during emergencies?

**Question 9:** How effective have initiatives by businesses been in supporting people with disability through the pandemic, such as dedicated supermarket shopping hours or home delivery services? What else can be done?

**Question 10:** How can people with disability, including those in closed and segregated settings, be supported to maintain social and community connections during emergencies?

**Question 11:** Is there anything else we should know about the experiences of people with disability during emergencies and responses that are needed?

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## Responding to this Issues paper

Responses to this Issues paper can be provided by:

- email to [DRCEnquiries@royalcommission.gov.au](mailto:DRCEnquiries@royalcommission.gov.au)
- letter to GPO Box 1422, Brisbane, Qld 4001
- phone on 1800 517 199 or +61 7 3734 1900 (between 9:00am to 5:00pm AEST Monday to Friday). We can make a time with you to take your response over the phone.

Responses can be in writing, an audio recording or a video recording. Responses can be in any language. The Royal Commission will translate the response to English.

We encourage responses by **17 July 2020**, however responses will also be accepted after this date.

## Support to respond to this Issues paper

The Australian Government provides support to assist people to engage with the Royal Commission. This support includes:

- free legal advisory services provided by National Legal Aid and the National Aboriginal and Torres Strait Islander Legal Services
- emotional support services provided by the Blue Knot Foundation
- advocacy support services provided under the National Disability Advocacy Program.

Further information about these supports, including how to access them, is available on the [counselling and support](#) section of our website.

## How we will use your response

All responses will inform the work of the Royal Commission.

We may make your response public, unless you tell us not to. Responses can be made anonymously.

We may publish your response on our website and your response may also be referenced in any public document prepared by the Royal Commission, for example, our interim and final reports.

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## Attachment A – Definitions

The Royal Commission has provisionally defined key terms as follows:

**Violence and abuse** – include assault, sexual assault, constraints, restrictive practices (physical and chemical), forced treatments, forced interventions, humiliation and harassment, financial and economic abuse and significant violations of privacy and dignity on a systemic or individual basis.

**Neglect** – includes physical and emotional neglect, passive neglect and wilful deprivation. Neglect can be a single significant incident or a systemic issue that involves depriving a person with disability of the basic necessities of life such as food, drink, shelter, access, mobility, clothing, education, medical care and treatment.

**Exploitation** – means the improper use of another person or the improper use of or withholding of another person's assets, labour, employment or resources including taking physical, sexual, financial or economic advantage.

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# Endnotes

- 1 *Convention on the Rights of Persons with Disabilities*, opened for signature 30 March 2007, 999 UNTS 3 (entered into force 3 May 2008), art 11.
- 2 Australian Government, Department of Health, 'Coronavirus (COVID-19) frequently asked questions – version 9', 1 April 2020. <<https://www.health.gov.au/sites/default/files/documents/2020/04/coronavirus-covid-19-frequently-asked-questions.pdf>>.
- 3 Australian Government, Department of Health, 'Coronavirus (COVID-19) current situation and case numbers', web page, last updated 3 April 2020. <<https://www.health.gov.au/news/health-alerts/novel-coronavirus-2019-ncov-health-alert/coronavirus-covid-19-current-situation-and-case-numbers>>.
- 4 Australian Government, Department of Health, 'Coronavirus (COVID-19) current situation and case numbers', web page, last updated 3 April 2020. <<https://www.health.gov.au/news/health-alerts/novel-coronavirus-2019-ncov-health-alert/coronavirus-covid-19-current-situation-and-case-numbers>>.
- 5 Australian Government, Department of Health, 'Coronavirus (COVID-19) frequently asked questions – version 9', 1 April 2020. <<https://www.health.gov.au/sites/default/files/documents/2020/04/coronavirus-covid-19-frequently-asked-questions.pdf>>.
- 6 People with Disability Australia, *Urgent measures needs to support people with disability during COVID-19 crisis*, media release, Sydney, 19 March 2020. <<https://pwd.org.au/covid-19-crisis-mr/>>; Letter from Ana Lucia Arellano, International Disability Alliance to Dr Tedros Adhanom Ghebreyesus, World Health Organisation, 31 March 2020. <[http://www.internationaldisabilityalliance.org/sites/default/files/ida\\_letter\\_to\\_who\\_march\\_31\\_2020.pdf](http://www.internationaldisabilityalliance.org/sites/default/files/ida_letter_to_who_march_31_2020.pdf)>.
- 7 Nicholas Biddle, Ben Edwards, Diane Herz & Toni Makkai, *Exposure and the impact on attitudes of the 2019-20 Australian bushfires*, The Australian National University Centre for Social Research and Methods, Report, February 2020, p 1.
- 8 Lesley Hughes, Will Steffen, Greg Mullins, Annika Dean, Ella Weisbrot & Martin Rice, *Summer of crisis*, Climate Council of Australia, Report, 2020, p ii.
- 9 Nicholas Biddle, Ben Edwards, Diane Herz & Toni Makkai, *Exposure and the impact on attitudes of the 2019-20 Australian bushfires*, The Australian National University Centre for Social Research and Methods, Report, February 2020, p ii, p 1; Nicholas Borchers Arriagada, Andrew J Palmer, David MJS Bowman, Geoffrey G Morgan, Bin B Jalaludin & Fay H Johnston, 'Unprecedented smoke-related health burden associated with the 2019-20 bushfires in eastern Australia', (2020), Medical Journal Australia.
- 10 People with Disability Australia, *People with disability must be part of bushfire plans and recovery*, Sydney, media release, 15 January 2020. <<https://pwd.org.au/media-release-people-with-disability-must-be-part-of-bushfire-plans-and-recovery/>>.
- 11 Royal Commission into National Natural Disaster Arrangements, established 20 February 2020. This Royal Commission is (in conjunction with relevant State inquiries) considering issues arising from the Black Summer bushfires, with a particular focus on an appropriate Commonwealth role in natural disaster management and response. Submissions close 28 April 2020. <<https://naturaldisaster.royalcommission.gov.au/>>.
- 12 Sendai Framework for Disaster Risk Reduction 2015-2030, UNISDR/GE/2015 – ICLUX EN5000 1st edition, March 2015, [19d], p 13. <<https://www.undrr.org/publication/sendai-framework-disaster-risk-reduction-2015-2030>>.
- 13 National Disaster Risk Reduction Framework, Australian Government Department of Home Affairs, 2018. <<https://www.homeaffairs.gov.au/emergency/files/national-disaster-risk-reduction-framework.pdf>>.
- 14 Australian Disaster Preparedness Framework: A guideline to develop the capabilities required to manage severe to catastrophic disasters, Australian Government Department of Home Affairs, 2018. <<https://www.homeaffairs.gov.au/emergency/files/australian-disaster-preparedness-framework.pdf>>.
- 15 Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, *Statement of concern: The response to the COVID-19 pandemic for people with disability*, 26 March 2020.
- 16 An open letter to the National Cabinet, *Immediate actions required for Australians with disability in response to coronavirus (COVID-19)*, 3 April 2020, p 14. <<https://pwd.org.au/wp-content/uploads/2020/04/An-Open-Letter-to-The-National-Cabinet-Final-small.pdf>>.

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- 17 Letter from Catalina Devandas-Aguilar, Special Rapporteur on the rights of persons with disabilities to Ronald Sackville, Chair of the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 31 March 2020. <<https://disability.royalcommission.gov.au/publications/statement-concern-response-covid-19-pandemic-people-disability>>.
- 18 Royal Commission into National Natural Disaster Arrangements, established 20 February 2020. Submissions close 17 April 2020. <<https://naturaldisaster.royalcommission.gov.au/>>.
- 19 We recognise that Auslan interpreters are used in many emergency telecasts.
- 20 Stuart Robert MP, *NDIS participants to receive priority home delivery from leading supermarkets*, media release, 5 April 2020. <<https://ministers.dss.gov.au/media-releases/5711>>.
- 21 World Health Organisation, 'Guidance note on disability and emergency risk management for health', web page. <<https://www.who.int/hac/techguidance/preparedness/disability/en/>>.
- 22 Australian Institute of Health and Welfare, *People with disability in Australia 2019: in brief*, Cat. no. DIS 74, 2019.
- 23 Australian Bureau of Statistics, *Personal safety, Australia, 2016*, Catalogue number 4906.0, 8 November 2017.
- 24 Debra Parkinson & Claire Zara, 'The hidden disaster: Domestic violence in the aftermath of natural disaster', *Australian Journal of Emergency Management*, (2013), vol 28 (2), p 28–35.
- 25 United Nations Department of Economic and Social Affairs, 'Inclusion saves lives', web page. <<https://www.un.org/development/desa/disabilities/issues/un-desadspd-public-forum-taking-action-toward-a-disability-inclusive-disaster-risk-reduction-framework-and-its-implementation/inclusion-saves-lives.html>>.
- 26 World Health Organisation, 'Guidance note on disability and emergency risk management for health', web page. <<https://www.who.int/hac/techguidance/preparedness/disability/en/>>.



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