

A voice of our own

# COVID-19: Where to from here?

**Summary Report** 

Summary report of consultations People with Disability Australia completed with its national membership, on what people with disability want with the easing of COVID-19 restrictions.

**SEPT 2023** 

# **Copyright information**

COVID-19: Where to from here?

First published in 2023 by People with Disability Australia Level 8, 418a Elizabeth Street, Surry Hills, New South Wales, Australia 2010 Head office also in Sydney

Email: pwda@pwd.org.au

Phone: +61 2 9370 3100 Fax: +61 2 9318 1372

URL: www.pwd.org.au

Typeset in Arial 12 and 14 pt and VAG Rounded 16, 22 and 26 pt

© People with Disability Australia 2023

The moral rights of the authors have been asserted

National Library of Australia Cataloguing-in-Publication data:

Creator(s): People with Disability Australia

Title: COVID-19: Where to from here?

All rights reserved. Except as permitted with the Australian Copyright Act 1968 (for example, a fair dealing for the purposes of study, research, criticism or review), no part of this book may be reproduced, stored in a retrieval system, communication or transmitted in any form or by any means without prior written permission. All inquiries should be made to the publisher at the address above.

#### Suggested citation:

People with Disability Australia, COVID-19: Where to from here? [report], 13 September 2023, People with Disability Australia, Sydney.

ISBN: 978-0-6459325-0-8



## **About PWDA**

People with Disability Australia (PWDA) is a national disability rights and advocacy organisation made up of, and led by, people with disability.

We have a vision of a socially just, accessible and inclusive community in which the contribution, potential and diversity of people with disability are not only recognised and respected but also celebrated.

PWDA was established in 1981, during the International Year of Disabled Persons.

We are a peak, non-profit, non-government organisation that represents the interests of people with all kinds of disability.

We also represent people with disability at the United Nations, particularly in relation to the United Nations Convention on the Rights of Persons with Disabilities (CRPD).

Our work is grounded in a human rights framework that recognises the CRPD and related mechanisms as fundamental tools for advancing the rights of people with disability.

PWDA is a member of Disabled People's Organisations Australia (DPO Australia), along with the First People's Disability Network, National Ethnic Disability Alliance and Women with Disabilities Australia.

DPOs collectively form a disability rights movement that places people with disability at the centre of decision-making in all aspects of our lives.

'Nothing About Us, Without Us' is the motto of Disabled Peoples' International.



# **Table of Contents**

Introduction	
Methodology	6
Respondent demographics	7
Discussion	8
Where to from here?	23
Appendices	25
Appendix A - PWDA COVID-19 Position Statement	25
Appendix B - PWDA Survey Questions	29
Appendix C - Table of survey respondent disability demographics	34



## Introduction

In late 2021, Australia changed its approach to COVID-19 and began slowly re-opening after the worst of the pandemic.

States and territories have gradually reduced protective measures, such as mask-wearing, mandatory isolation and social distancing. Australians are now 'living with COVID-19', which is circulating in our community as life goes back to some form of 'normal', at least for some.

PWDA wanted to know how our members feel about the current 'living with COVID-19' approach, and what measures they would like the governments to take, if any. To achieve this, we conducted both an online survey and an online forum for members to provide their feedback.

This summary report focuses on the online survey, outlining its methodology and summarising responses to the survey questions. For the purposes of enriching the report, we have also featured some quotes from the online forum in the report's discussion section. Where this has occurred, the source of the quote has been clearly identified.

This summary report, along with the online forum have been used to inform our COVID-19 position statement (see Appendix A). PWDA will use the position statement to advocate for change in the COVID-19 policy area. We thank all members who have shared their feedback and experiences of COVID-19 with us.



# Methodology

The United Nations Convention on the Rights of Persons with Disabilities (CRPD) Article 31 provides that accurate data needs to be collected around the issues and barriers that impact people with disability.

As a Disabled Persons Organisation, PWDA recognises that research into disability must be led and generated by people with disability.

For research to be fully inclusive, people with disability must also determine the matters that require investigation and the subsequent potential outcomes. People with disability have raised significant concerns with PWDA about the Government's relaxation of COVID-19 restrictions.

PWDA determined that a survey would be appropriate to gather information about how people with all kinds of disability are feeling about the relaxation of COVID-19 restrictions and what measures they would like to see the Government take.

The survey contained 19 questions including multiple choice and open-ended questions. Please refer to *Appendix B* for a full list of the survey questions. PWDA's Board, which is comprised of people with disability, reviewed and approved the survey questions.

The survey was open from 31 March 2023 to 17 April 2023. It was promoted directly to members through a member mailout on 31 March 2023 and via an internal staff newsletter on 3 April 2023 to reach staff who are also PWDA members. The survey received 104 responses.

This report summarises and discusses the quantitative and qualitative data obtained from the survey.



# Respondent demographics

The demographic information regarding the 104 respondents is summarised as follows:

#### Age

Respondents' ages ranged from 14 to 83 years of age, with an approximate median age of 51 years of age.

#### **State/territory**

The majority of respondents were from New South Wales, Victoria and Queensland. The breakdown by state/territory was:

- New South Wales = 33 respondents
- Victoria = 24 respondents
- Queensland = 18 respondents
- South Australia = 10 respondents
- Western Australia = 8 respondents
- Australian Capital Territory = 6 respondents
- Tasmania = 3 respondents
- Not disclosed = 2 respondents

## **Disability type**

People were asked to describe their disability. Please refer to Appendix C for a table collating these answers.

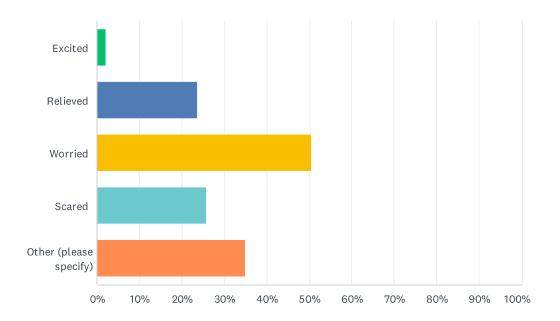


## **Discussion**

This section summarises and discusses the responses we received to the substantive section of the survey (questions 5 - 19).

## Question 5: How do you feel about the Government removing most **COVID-19 restrictions?** (eg mask-wearing, isolation periods, etc)

Respondents were able to select more than one answer to this question. The responses are broken down as follows:



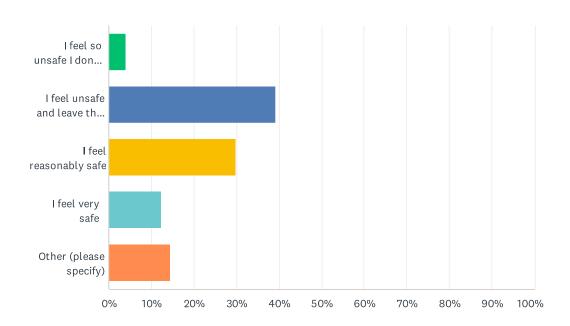
- 51% of respondents felt worried about the Government removing most COVID-19 restrictions
- 26% felt scared
- 24% felt relieved
- 2% felt excited



35% reported having 'other' reactions, which were mostly negative, including anger, anxiety, exhaustion, frustration, isolation and despair. Some respondents said they felt 'unsure' or 'neutral'.

The results show that most of our members have experienced a negative reaction to the Government's removal of COVID-19 restrictions.

## Question 6: How do you feel about going out in the community now that **COVID-19 restrictions have lifted?**



#### Respondents responded as follows:

- 4% feel so unsafe they don't leave the house
- 39% feel unsafe and only leave the house when they have to
- 30% feel reasonably safe
- 12% feel very safe
- 14% reported 'other' responses

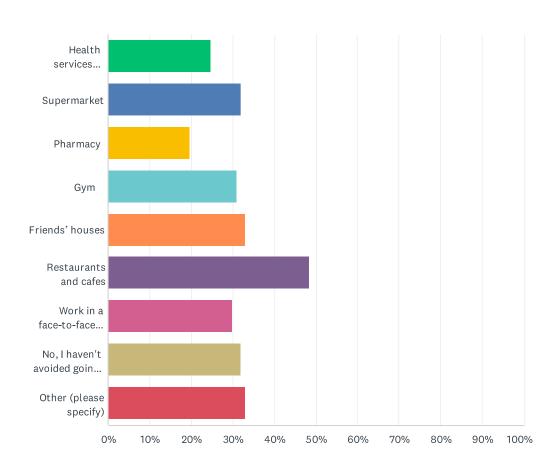


Reponses recorded in the 'other' category include feeling unsafe but having to leave the house for education, work and general mental health purposes. Many respondents stated that they wear a mask when they go out because they feel unsafe. One respondent reported:

'I do not feel safe to leave the house but am forced to leave the house because universities are mandating in-person attendance.'

As seen in the results, our members reported mixed responses about going out in the community. While not the majority, a significant 39% of respondents are restricting themselves to the house and only leaving when it is necessary.

Question 7: Since the COVID-19 restrictions have lifted, have you avoided going to any of the following places from fear of getting COVID-19?





The majority (67% of respondents) reported avoiding going to places due to the fear of contracting COVID-19. Overall, 48% of respondents avoided going to restaurants and cafés, 33% avoided going to friends' houses, 32% avoided going to the supermarket, 31% avoided going to the gym and 30% avoided going to workplaces.

Concerningly, 25% of respondents have avoided going to health services, and 20% have avoided going to the pharmacy. One respondent reported:

'I went home [from ER] and took my chances when I had near fatal case of cellulitis, as the alternative was waiting for estimated over 6-14 hours in a badly ventilated, crowded, hospital ER with a group of anti-vaxxer antimaskers and no seating except right beside them. Hospital staff and security were also ignoring the COVID-19 protocols and ignored me when I begged for anywhere else to sit.'

This theme also emerged during the online forum, with one participant stating that:

'Not even being able to access healthcare safely is outrageous, you should not have to decide if the risk of attending healthcare/ hospital is worth it - a real risk of infection that will make your health worse vs delayed care which equally can make your health worse. Safe healthcare is a healthcare right but is not happening."

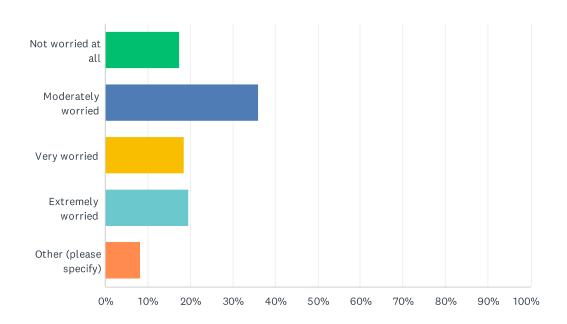
In addition, 33% of the survey respondents reported avoiding 'other' places, including community and religious gatherings, public transport, shopping centres, cinemas and events.

Two respondents expressed concern about compulsory in-person attendance at university. One respondent ceased their university studies because considerable in-person attendance is required for core subjects and no alternatives were provided.

Other respondents said that they still go out but take precautions such as mask wearing and social distancing.







The majority of respondents reported being worried about contracting COVID-19. Only 18% reported not feeling worried at all, while 36% reported feeling 'moderately worried', 19% reported feeling 'very worried' and 20% reported feeling 'extremely worried'.

The other 8% reported 'other' responses, including worry about passing COVID on to family members and noting the strain of having to take precautions to protect themselves from COVID-19.

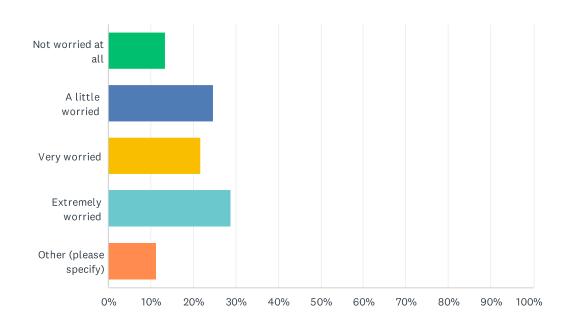
A respondent who is immunocompromised reported a 'horrific experience' contracting COVID-19 and stated that:

> '[the] Government and general public don't care about people like me who are being left behind because of the ceasing of COVID rules. People and business owners no longer care about sanitising or maintaining the distancing rules!'

Another respondent stated that they felt they were being asked to sacrifice their life for a community that does not care about them.







There was significant consensus in response to this question, with only 13% of respondents reporting that they were not worried about developing long COVID. On the other hand, 29% of respondents were 'extremely worried' about developing long COVID, while 22% were 'very worried' and 25% were 'a little worried'.

11% of respondents reported 'other' responses, including several respondents who said they had already experienced or are experiencing long COVID. Others expressed concern about living with long COVID, due to it having little recognition or support. One respondent reported that:

> 'I am only concerned about getting long COVID, not the initial COVID-19 infection, whether that is mild or kills me. This worry is based on my experience of extreme, long-term hardship surviving with similar chronic illnesses in this country.'

Two respondents expressed that they do not worry about contracting long COVID because it is out of their control.



## Question 10: What effect has having less COVID-19 restrictions had on your life?

Responses to this open-ended question were mixed. Some respondents reported enjoying being able to access the community and improved mental health, while others felt excluded, further isolated and more anxious. Others did not feel any significant change in their lives.

Some respondents reported troubling experiences. For example, one respondent reported delaying having a breast lump examined because of unsafe health care settings. Another respondent stated that:

'I am excluded from all community activity. I can't do any of my hobbies. I can't see my friends. I am isolated in my home. I have lost the little support that I had. It has utterly destroyed my life. The irony burns. The reason I take immune suppressant drugs is to control my arthritis to allow me to participate in life, and to avoid being house bound. Yet now they render me so immunocompromised that it is not safe for me to be out.'

Several respondents reported feeling uncomfortable that they are often the only person wearing a mask in public settings.

One respondent reported that:

'After finally convincing colleagues at work that I am as capable as them, now treated like a shirker because my medical practitioners have told me to avoid indoors where there are no mask mandates; devastated that friends won't wear masks so I can have social interaction: unsafe because landlord, trades/repair people and support workers refuse to wear masks if visiting/inspecting my home.'

On the other hand, one respondent reported experiencing less anxiety about being forced to wear a mask.



## Question 11: What effect has less COVID-19 restrictions had on your access to supports?

This was an open-ended question and responses were mixed:

- approximately 50% of respondents reported no change in their access to supports
- approximately 30% reported less access to supports
- approximately 11% reported better access to support, and;
- approximately 9% reported they were being more cautious with their supports (e.g. by requiring supports to wear masks).

There was also a common sentiment that the public are tired of COVID-19 restrictions and are not understanding of people who need to be cautious. In particular, a number of respondents said that support workers refuse to wear masks. As one respondent noted:

'I've had to cancel home visits for support. I have even had workers claim they were wearing a mask but took them off because I am blind and couldn't see (a person on a video call saw them in the background and warned me.'

#### Another respondent stated:

'I keep having to do without supports, because I can't force people to wear a mask in my home.'

This theme also emerged in the online forum, with one participant noting that:

'Staff and other residents in not just aged care facilities, but villages for aged and disabled are refusing to mask, leaving people isolated to singular rooms, not units or homes.'

Other concerns raised include:

that the taxi industry has been impacted and taxis are less available



- being required to attend university in-person
- being more careful with supports to limit the risk of catching COVID-19
- finding it extremely difficult to find supports and therapists
- inability to safely go to medical appointments needed for chronic conditions, including attending general practitioner and therapy appointments

One respondent stated that supports have disappeared and that:

'[a]lmost all services and businesses have stopped any accommodations and assistance they had instituted when the restrictions started. The only exceptions have been small business owners going out of their way to personally provide supports because they know my history.'

Another respondent said that

'[i]t makes it harder to feel safe reaching out to new supports and especially accessing supports in person'

Those who experienced better access to supports since the COVID-19 restrictions lifted, reported the following benefits:

- improved access to face-to-face appointments
- greater access to supports, including increased availability of carers who do not have to isolate
- improved access to services and community

One respondent highlighted the severe impacts of not being able to access support due to COVID-19 restrictions:

> 'There were times I had no food and I didn't get a shower for 3 weeks. At least I am not going through that now.'



## Question 12: What effect has less COVID-19 restrictions had on your work or study life?

Responses were mixed, with some respondents reporting positive flexible working arrangements while others reported being forced back to the office. Some respondents (n=5) have stopped or reduced their work due to the lessening of restrictions.

Some respondents reported that universities have not provided alternative options for students who cannot attend in person.

Online forum participants also raised concerns about work and study. One participant stated that they:

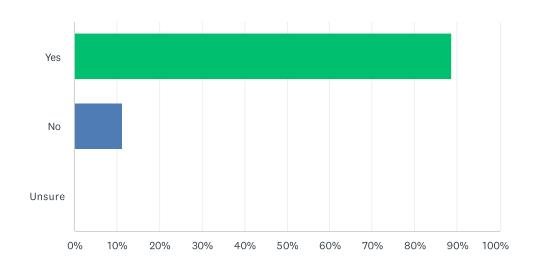
> '...have had to provide ongoing medical certificates from my GP and specialist to 'justify' to my managers to keep working from home full time during this ongoing COVID Pandemic... Far too often staff living with disability are viewed as a problem and not a person who requires some modicum of care and consideration.'

Another online forum participant noted that:

'We need our partners/families/housemates to be able to work and study from home too. It's not just the high risk person who needs to take precautions and isolate, but also our whole households.'



Question 13: Have you accessed health services by phone or online (telehealth) since the beginning of the pandemic?



89% of respondents have accessed telehealth and 11% have not.

Question 14: Please comment on your healthcare experiences via phone or online (telehealth) and whether you would like the Government to continue to fund bulk-billed telehealth appointments.

Most respondents reported very positive experiences with telehealth and felt very strongly that telehealth should continue. Many respondents also believed that telehealth should be bulk-billed.

Reported benefits of telehealth included saving travel time and costs, not having to sit in a room of sick people, removal of sensory barriers to accessing health care and being able to see doctors that are not close in close proximity.

Survey respondents made the following comments about the benefits of telehealth:

'I saw a psychologist via telehealth and found it very helpful. If telehealth hadn't been available I probably wouldn't have even contacted the psychologist at all.'



'It's made a huge difference. I don't have to make long trips to allied/health appointments (saves money on my transport budget) and I don't know what I'm going to do if the government takes away access to telly health.'

'On days when my social and sensory bucket is full and I don't want to leave the house, Telehealth appointments mean I can still access the medical support I need without having to leave the house.'

Some respondents believed that the Government should abolish the requirement that patients must have attended the clinic in person in the past 12 months to access telehealth. This was also raised at the online forum, with one participant stating that:

> 'Telehealth should be accessible for people who are immunocompromised, house-bound or bedridden without having to see a GP in person once a year. I have to go and sit in a waiting room with people who are unmasked to keep telehealth. The journey itself already wipes me out for weeks.'

## Question 15: What were your reasons why you have not accessed healthcare by phone or online (telehealth)?

Nine people responded to this question and responses were mixed. Some respondents felt healthcare was best delivered in person, one respondent said it was too expensive and another said they were unable to speak on the phone due to their disability.

## Question 16: Which (if any) COVID-19 restrictions would you like to see re-introduced?

Respondents were able to select more than one answer to this question.

The most supported restrictions were:

 People who have tested positive for COVID-19 should not be allowed to visit disability group homes and aged-care homes (82%)



- Mandatory mask-wearing in medical and hospital settings (76%)
- Mandatory mask-wearing for people with cold or flu symptoms in all closed public spaces (eg public transport, taxis etc) (76%)
- Mandatory home-isolation periods for people who have tested positive for COVID-19 (74%)

#### Other supported restrictions included:

- Mandatory mask-wearing for staff and visitors in congregate residential settings (eg disability group homes and aged care homes) (67%)
- Mandatory mask-wearing on public transport (67%)
- Mandatory mask-wearing in taxis/rideshare services (63%)
- Social distancing requirements in medical and hospital settings (52%)
- Mandatory mask-wearing in all public indoor settings (44%)
- Social distancing requirements on public transport (40%)
- Social distancing requirements in all public indoor settings (39%)

## **Question 17: Should State and Territory Governments introduce** mandatory minimum standards for ventilation (air flow) in indoor settings such as schools and workplaces?

This recommendation was supported by 86% of respondents, with a further 7% saying they were 'unsure'.



## Question 18: What else should the Government do to help people with disability feel safe from COVID-19?

Sixty-eight people responded to this question. Responses were again mixed, but there was a strong sentiment that the Government and public are 'pretending' that the pandemic is over.

Many respondents would like to see mandatory mask wearing and testing, particularly in congregate settings and for support workers. Respondents also wanted better and quicker access to anti-viral medication and PCR tests and for social distancing requirements to be implemented.

Additionally, respondents wanted increased public health messaging from the Government regarding vaccinations, boosters, hygiene, social distancing and information about the impact of COVID-19 on people with disability.

This sentiment was echoed at the online forum, with one participant stating that:

'Communication is really important. Messaging around the fact that there's still vulnerable people and plenty of them, and we don't walk around with a giant sign saying so.'

Some survey respondents wanted the cost of personal protective equipment, including N95 masks, and rapid antigen tests to be covered in NDIS plans. Improved access to conferences and online training was also desired.

## Question 19: Would you like to make any other comment about your experience?

The most common theme that emerged was feeling left behind by the government, the public and even close friends. Many respondents felt that society is pretending that COVID-19 no longer exists and treating people with disability as 'collateral damage'. Many respondents felt that the Government knew what should be done to help people with disability but will not do it for political reasons.



#### Comments from respondents included:

'My human rights aren't being met. "Just stay home" isn't a humane, practical or fair solution.'

'I don't see why my health and safety should be reliant on other people doing the right thing. I protect myself as much as possible, but people should not be allowed to roam free while they have COVID.'

'Our government has demonstrated that it doesn't care about disabled people and I am appalled and ashamed.'

'I am struggling and don't know how much longer I can endure this complete isolation from my community.'

A participant at the online forum similarly expressed that:

'The thing is, a lot of people are happy for our rights to be lost for their convenience. How do we get people to care and be better people?'



## Where to from here?

Based on the feedback received from PWDA's national membership, a position statement was developed, with a set of recommendations that need action from different levels of government. PWDA will be sharing this report and advocating to all levels of government to adopt these recommendations.

We replicate the recommendations contained in our position statement here:

**Recommendation 1 –** The relevant level of government mandate up-to-date vaccinations for all workers in high-risk settings including but not limited to hospitals, medical services, disability services and aged care homes, and other settings where workers support people with disability.

**Recommendation 2 –** The Commonwealth Government develops national indoor air quality standards, with particular consideration given to high-risk settings, including hospitals, medical services, disability group homes, aged care homes, schools and workplaces.

**Recommendation 3 –** The relevant level of government mandates that people who have tested positive for COVID-19 should not be allowed to visit disability group homes and aged-care homes until they are no longer infectious.

**Recommendation 4 –** The relevant level of government mandates that masks must be worn in all health and hospital settings.

**Recommendation 5 –** Each state and territory government implements a traffic light advice mechanism to signal the current level of COVID-19 risk in the community.

**Recommendation 6 –** The Commonwealth Government creates an exemption to the Medicare 'Existing Relationship Requirement' so that people who have disability and/or are immunocompromised can access telehealth appointments regardless of whether they have attended the medical practice in person in the past 12 months.



**Recommendation 7 –** The Commonwealth Government mandates that general practitioners must bulk-bill telehealth appointments for people with disability.

Recommendation 8 - The Commonwealth, state and territory governments regulates the tertiary education sector to ensure that people who have disability and/or are immunocompromised can choose to attend their course online, in-person or by a combination of both delivery modes.



# **Appendices**

### Appendix A - PWDA COVID-19 Position Statement

The below position statement is also available online here.

#### **COVID-19 Position Statement**

## September 2023

#### **Background**

In late 2021, the Government started to reduce many COVID-19 measures and embrace a 'living with COVID-19' approach. People with Disability Australia (PWDA) wanted to know how this current approach is affecting our members and what, if any, action they would like to see the governments take.

PWDA distributed a survey to its members in March 2023, which received 104 responses. This was followed by an online member forum held on 4 July 2023, which had 31 participants. The common themes from the survey and forum were:

- most members have felt worried or scared about the Government's relaxing of COVID-19 measures
- that the Government and public is 'pretending' that the pandemic is over
- feeling forgotten, ignored, and undervalued by the Government and the public
- concern about contracting long COVID
- very strong support for telehealth
- feeling unsafe about going out into the community.

This position statement and the below recommendations is based on what we heard from our members through the survey and the online member forum. We have summarised the findings of our consultations in a report. Please see the COVID-19 survey summary report for more information.



#### Recommendations

PWDA recommends that:

**Recommendation 1 –** The relevant level of government mandate up-to-date vaccinations for all workers in high-risk settings including but not limited to hospitals, medical services, disability services and aged care homes, and other settings where workers support people with disability.

**Recommendation 2 –** The Commonwealth Government develops national indoor air quality standards, with particular consideration given to high-risk settings, including hospitals, medical services, disability group homes, aged care homes, schools and workplaces.

**Recommendation 3 –** The relevant level of government mandates that people who have tested positive for COVID-19 should not be allowed to visit disability group homes and aged-care homes until they are no longer infectious.

**Recommendation 4 –** The relevant level of government mandates that masks must be worn in all health and hospital settings.

**Recommendation 5 –** Each state and territory government implements a traffic light advice mechanism to signal the current level of COVID-19 risk in the community.

Recommendation 6 - The Commonwealth Government creates an exemption to the Medicare 'Existing Relationship Requirement' so that people who have disability and/or are immunocompromised can access telehealth appointments regardless of whether they have attended the medical practice in person in the past 12 months.

**Recommendation 7 –** The Commonwealth Government mandates that general practitioners must bulk-bill telehealth appointments for people with disability.

Recommendation 8 - The Commonwealth, state and territory governments regulates the tertiary education sector to ensure that people who have disability and/or are



immunocompromised can choose to attend their course online, in-person or by a combination of both delivery modes.

#### Feeling unsafe going out into community with less restrictions

Most respondents have felt worried or scared about the Government's relaxing of COVID-19 measures. A PWDA member who attended the PWDA online forum noted:

'Communication is really important. Messaging around the fact that there's still vulnerable people and plenty of them.'

Relaxing COVID-19 measures has caused many people to go out less into the community, only leaving the house when it is essential. 39% of respondents are restricting themselves to the house and only leaving when it is necessary, and avoiding going out in social settings and only going out for medical, work, and study reasons. One respondent stated that they felt they were being asked to sacrifice their life for a community that does not care about them. See Recommendations 1-5.

#### Less access to support

Most members were worried about getting long COVID. Others expressed concern about living with long COVID, due to it having little recognition or support. 30% of respondents say they now have less access to supports, such as support workers who refuse to wear masks, finding it extremely difficult to find supports and therapists, inability to safely go to medical appointments needed for chronic conditions, including attending general practitioner and therapy appointments. At PWDA's July online member forum, members explained:

'I keep having to do without supports, because I can't force people to wear a mask in my home.'

'Not even being able to access healthcare safely is outrageous, you should not have to decide if the risk of attending healthcare/ hospital is worth it - a real risk of infection that will make your health worse vs



delayed care which equally can make your health worse. Safe healthcare

is a healthcare right but is not happening.'

One respondent stated that almost all services and businesses have stopped any

accommodations and assistance they had instituted when the restrictions were in place.

Most respondents reported very positive experiences with telehealth and felt very strongly

that telehealth should continue. All 15 respondents who directly answered the sub-

question about whether telehealth should be bulk-billed answered in the affirmative. See

Recommendations 6-7.

**Limited work and study** 

Some respondents have told us that they have stopped or reduced their work due to the

lessening of restrictions and being forced to go back into the office. Some have reported

that universities have not provided alternative options for students who cannot attend in

person. One member who attended PWDA's online forum noted that:

'[I] have had to provide ongoing medical certificates from my GP and

specialist to 'justify' to my managers to keep working from home full time

during this ongoing COVID Pandemic... Far too often staff living with

disability are viewed as a problem and not a person who requires some

modicum of care and consideration.'

This further isolates people with disability and makes participation in work and education

even more inaccessible. See Recommendations 2 and 8.

Contact

Giancarlo de Vera

Senior Manager, Policy

Email: <a href="mailto:pwd@pwd.org.au">pwd@pwd.org.au</a>



#### **Appendix B - PWDA Survey Questions**

Question 1: My consent (please tick the statements you agree with)

- I have read the information above, or someone has explained it to me
- I know that I will be asked questions about 'living with COVID-19'
- I know that I can stop at any time
- I am happy for my answers to be kept and used for PWDA's advocacy
- I understand that no one will know they are my answers
- I would like to take part in this survey

Question 2: My disability is best described as

Question 3: My age is

Question 4: I live in this state/territory of Australia

Question 5: How do you feel about the Government removing most COVID-19 restrictions? (e.g. mask-wearing, isolation periods, etc) (you can select more than one answer)

- Excited
- Relieved
- Worried
- Scared
- Other (please specify)

Question 6: How do you feel about going out in the community now that COVID-19 restrictions have lifted?



- I feel so unsafe I don't leave the house
- I feel unsafe and leave the house only when I have to
- I feel reasonably safe
- I feel very safe
- Other (please specify)

Question 7: Since the COVID-19 restrictions have lifted, have you avoided going to any of the following places from fear of getting COVID-19? (please tick any that are relevant

- Health services (doctor, physio etc)
- Supermarket
- Pharmacy
- Gym
- Friends' houses
- Restaurants and cafes
- Work in a face-to-face setting
- No, I haven't avoided going anywhere due to fear of contracting COVID-19
- Other (please specify)

#### Question 8: How worried are you about getting COVID-19?

- Not worried at all
- Moderately worried
- Very worried



- Extremely worried
- Other (please specify)
- Not worried at all

Question 9: How worried are you about developing long COVID-19?

- Not worried at all
- A little worried
- Very worried
- Extremely worried
- Other (please specify)

Question 10: What effect has having less COVID-19 restrictions had on your life?

Question 11: What effect has less COVID-19 restrictions had on your access to supports?

Question 12: What effect has less COVID-19 restrictions had on your work or study life?

Question 13: Have you accessed health services by phone or online (telehealth) since the beginning of the pandemic?

- Yes
- No
- Unsure

Question 14: Please comment on your healthcare experiences via phone or online (telehealth) and whether you would like the Government to continue to fund bulkbilled telehealth appointments.



Question 15: What were your reasons why you have not accessed healthcare by phone or online (telehealth)?

Question 16: Which (if any) COVID-19 restrictions would you like to see reintroduced? (You may select more than one) Please note: Some of the restrictions below may already be in place in your state or territory of Australia.

- Mandatory mask-wearing in all public indoor settings
- Mandatory mask-wearing in medical and hospital settings
- Mandatory mask-wearing on public transport
- Mandatory mask-wearing in taxis/rideshare services
- Mandatory mask-wearing for staff and visitors in congregate residential settings (eg disability group homes and aged care homes)
- Mandatory mask-wearing for people with cold or flu symptoms in all closed public spaces (eg public transport, taxis etc)
- Social distancing requirements in all public indoor settings
- Social distancing requirements in medical and hospital settings
- Social distancing requirements on public transport
- People who have tested positive for COVID-19 should not be allowed to visit disability group homes and aged-care homes
- Mandatory home-isolation periods for people who have tested positive for COVID-19
- None of the above
- Other (please specify)



**Question 18: Should State and Territory Governments introduce mandatory** minimum standards for ventilation (air flow) in indoor settings such as schools and workplaces?

- Yes
- No
- Unsure

Question 19: What else should the Government do to help people with disability feel safe from COVID-19?

Question 20: Would you like to make any other comment about your experience?



## Appendix C - Table of survey respondent disability demographics

Respondents were asked to self-describe their disability. Below is a table showing these descriptions. Of the 104 people who completed the survey one person represented a person with disability, but their disability is unknown and so is not reflected in the table below.

Disability	Total
Acquired Brain Injury	3
Cerebral Palsy	6
Chronic fatigue	1
Chronic illness	1
Dwarfism	1
Immunity	2
Intellectual disability	3
Multiple Sclerosis	3
Muscular Dystrophy	1
Muscular Neuropathy	1
Neurocognitive	1
Neurodivergent	11
Physical	17
Psychosocial	5
Spina Bifida	1
Spinal Muscular Atrophy	1
Vision	8



Disability	Total
Multiple	33
Other	4
TOTAL	103





People with Disability Australia (PWDA) is a national disability rights and advocacy organisation made up of, and led by, people with disability.

For individual advocacy support contact PWDA between 9 am and 5 pm (AEST/AEDT) Monday to Friday via phone (toll free) on 1800 843 929 or via email at <a href="mailto:pwd@pwd.org.au">pwd@pwd.org.au</a>

#### **Submission contact**

Giancarlo de Vera Senior Manager of Policy

E: pwd@pwd.org.au

