

Witness Name: Rhian Davies
Disability Wales/Anabledd Cymru
Statement No.: 1
Exhibits: 4
Dated: 28 April 2023

UK COVID-19 INQUIRY

WITNESS STATEMENT OF RHIAN DAVIES

I, RHIAN DAVIES, am Chief Executive of Disability Wales/Anabledd Cymru and make this statement on behalf of the organisation. I will say as follows in response to the matters raised by the Solicitor to the Covid-19 Public Inquiry in Module 1 of the Inquiry set out below: -

1. The inquiry has asked for a brief overview of the history, legal status and aims of our organisation and an explanation of whether our work is UK wide, or confined to England, Scotland, Wales or Northern Ireland only. Disability Wales/Anabledd Cymru ('DW') is a registered charity and company limited by guarantee (Registered Charity no: 517391; Registered Company no: 0199862) formed in 1972. We are the Welsh national association of Disabled People's Organisations, striving to achieve rights and equality for all Disabled people in Wales. Our core role is to represent the views and priorities of our members to government, primarily Welsh government but also UK government on reserved matters, with the aim of informing and influencing policy.
2. The Inquiry has asked for a brief description of the issues and/or groups of people which our organisation supports and/or represents and the work we conduct in relation to this. DW has 100 member organisations across Wales, 29 of which are full member Disabled People's Organisations. We support our members through the provision of information on a wide range of disability

related issues, training programmes to develop capacity and engage in consultations and development opportunities such as mentoring initiatives, student work placements and the Access to Elected Office Fund. Details of this can be found on our website <https://www.disabilitywales.org/> .

3. The Inquiry has asked for our organisation's views in relation to the state of the UK's pandemic planning, preparedness and resilience, at the time that the Covid-19 pandemic struck. DW believes that the UK's pandemic planning, preparedness and resilience at the time that the Covid-19 pandemic struck was wholly inadequate. Appropriate and accessible communication and information systems were not in place to inform people about the virus and how best to protect themselves. Decisions were not taken in a timely manner and decision-makers and those advising them did not have the necessary knowledge or expertise regarding how measures such as imposing a national lockdown would impact on Disabled people and their ability to access support and assistance. In our view, the previous ten years of UK Government austerity policies had significantly eroded the capacity and resilience of public services as well as the incomes and wherewithal of Disabled people and their families to respond effectively to a national crisis.
4. The Inquiry has asked for our organisation's views on the extent to which the UK's pandemic planning and emergency preparedness adequately took into account pre-existing inequalities and vulnerabilities, such as those represented in our organisation's work, and why we take this view. It does not appear to us that pandemic planning and emergency preparedness adequately took account of how these would affect Disabled people. Evidence of the impact of the lack of planning and preparedness is highlighted in "Locked out: liberating disabled people's live and rights in Wales and beyond", which I now produce as Exhibit [RD/1 - INQ000177836]. DW played a leading role in co-producing this report. I intend to provide a further statement detailing issues arising from this report in relation to Modules 2 and 2B of the Inquiry.

5. The Inquiry has asked what our organisation considers was done adequately in relation to UK pandemic planning and preparedness in the context of pre-existing inequalities and vulnerabilities, such as those represented in your organisation's work, and why. In response, we are not aware of anything that was done adequately in relation to UK pandemic planning and preparedness in relation to Disabled people.
6. The Inquiry has asked what our organisation considers could have been done better in relation to UK pandemic planning and emergency preparedness in the context of pre-existing inequalities and vulnerabilities, such as those represented in our organisation's work, and why we hold these views. The *Locked-Out Report* explains that central planning with respect to Disabled people must rely on the foundation of 'co-production as research method'. Co-production actively integrates disabled people's lived experiences into the research process (see page 4). This ensures that all planning that affects Disabled people's lives corresponds with the way that Disabled people discuss their lives. This was a particularly pertinent issue during the pandemic, as policies were frequently dominated by a medical, pathologising conception of Disability.
7. The report criticises the lack of representation of Disabled people in decision making and calls on Welsh Government to implement UN recommendations that nations fully involve disabled people in the planning stages of all future responses to public crises (page 8).
8. There were many occasions where Disabled people found themselves being referred to as 'vulnerable' by the Government, which for many, felt demeaning and inaccurate (at page 24). The fact that fundamental categorical and descriptive errors were able to proliferate signals that Disability – and the social model of disability - was poorly understood and insufficiently embedded into governance prior to the pandemic.

9. Having discarded the social model of disability, reliance was placed on the medical model of disability. This initially excluded groups of Disabled people with 'stable' or 'established' impairments from the Shielding List, which determined access or priority to essential services. Only later was consideration given to the extent to which people were *socially* excluded and, therefore, also 'at risk' (at page 26). This is just one of several examples where the pandemic amplified the intersecting nature of inequalities that Disabled people face. The ease with which the Social Model of Disability was abandoned suggests it was poorly understood and integrated in the first place (at page 24). This is despite the Welsh Government being committed to the Social Model of Disability since 2002.
10. In the absence of pre-pandemic real institutional co-production, the Welsh Government relied on responding to issues raised by Disabled People's Organisations as they emerged (at page 78). This is consistent with the 2017 UNCRPD Committee concern "*about the impact on persons with disabilities in situations of emergencies*" in the UK "*and the absence of comprehensive policies related to disaster risk reduction that include persons with disabilities in the planning, implementation and monitoring processes of disaster risk reduction*" set out in their Concluding Observations on the initial report of the United Kingdom of Great Britain and Northern Ireland at paragraphs 28-29.
11. The *Locked-out* report highlighted the lack of Disabled people in leadership and decision-making roles and recommends initiatives that seek to address this, such as the Access to Elected Office Fund. Without lived experience or the ability to draw on experts, policy and planning takes limited account of the diverse requirements of the community.
12. The report outlines the legal requirement for greater engagement of Disabled people and Disabled People's Organisation in planning and policy making, and

for the resources to be in place to support this, which would include emergency planning.

13. The report also recommends utilising an approach to policy making and planning that is based on the Social Model of Disability thereby focussing on barriers to participation and inclusion. There are many examples in *Locked-out* relating to the impact of government thinking defaulting to the Medical Model with dire consequences for Disabled people, in accessing treatment, information, support and supplies. *Locked-out* refers to how such 'thoughtlessness' helps to illustrate a much more pervasive problem: the way taken-for-granted ableist assumptions dominate in decision-making but can have life-limiting consequences for Disabled people.
14. The Inquiry has asked to what extent did our organisation engage with government (a) prior to January 2020; and (b) after January 2020 regarding the extent to which inequalities and vulnerabilities should be factored into emergency preparedness and pandemic planning in the UK. Prior to January 2020, DW engaged with Welsh government on a wide range of policy issues, including on the publication of the Framework and Action Plan entitled: *Action on Disability: The Right to Independent Living* (2019) which I now produce as Exhibit [RD/2 - INQ000177837]. The Framework acknowledges the persistence of poverty and exclusion faced by many Disabled people in Wales, and the devastating impact of UK Government's Austerity policies and Welfare reform in this regard (at page 1). A key principle of *Action on Disability* is that intersecting inequalities impact Disabled people's ability to be resilient to adversities, such as poor health outcomes, and insecure housing. It details a framework and an accompanying action plan which sets out how the Welsh Government will take forward the principles of the UNCRPD (at page 7). On top of this, it recognises the importance of continual engagement with disabled people through the mechanism of co-production (at page 8 & 13).

15. Disability Wales worked with the Welsh government to inform its Independent Living Framework, which committed to mitigating the impacts of poverty and improve living conditions for affected Disabled people (at page 40). We also engaged with the Welsh Government on the importance of Disabled people being active participants in their own health (at page 42). This informed a 12-point Government plan to ensure equitable and meaningful healthcare access is available, including a commitment to accessible health information and resources for D/deaf people.
16. Despite commissioning a Framework rooted in understanding systemic barriers and intersecting inequalities, these holistic principles do not appear to have been factored into emergency preparedness or pandemic planning. Political and health communications were clearly ill-prepared to adjust to the different needs of d/Deaf people. The disproportionate risks and impacts faced by Disabled people during Covid-19 were initially medicalised. This approach fails to correspond with the Welsh Government commitment to the Social Model, as outlined in the report (at page 1). We have seen no evidence that the Social Model was meaningfully utilized in the emergency planning which took place prior to January 2020.
17. Following January 2020, DW was actively involved in working with Welsh Government in responding to the pandemic including corresponding with government and attending meetings with them. Details of these are set out in the chronology appended to our Module 2 Rule 9 response letter dated 15 December 2022. I will provide further detail in relation to those communications and meetings in my statement for Modules 2 and 2B of the Inquiry. However, for now, I would invite the Inquiry to obtain from the Welsh Government that correspondence, the minutes of those meetings and any associated documents including those detailing actions arising from them, and to assess their relevance to issues which fall for examination in Modules 1, 2 and 2B.
18. The inquiry has asked, in relation to the requests above around engagement with government prior to and following January 2020, what correspondence

we sent to the government, what (if any) was the response to this correspondence; and what documentation (if any) was brought to our organisation's attention by government? We have also been asked to provide any related correspondence or documentation.

19. I would refer to the Disability Wales Module 2 Rule 9 response dated 15 December 2022 for details of correspondence and meetings. We are continuing to collate associated documents which are likely more relevant to Modules 2 and 2B and so can be exhibited to a statement for those modules.

20. In addition to those matters set out in our Module 2 Rule 9 response, and of relevance to Module 1, Disability Wales, together with other umbrella disability and carer organisations in Wales published a statement on 19 March 2020 which is now produced as Exhibit [RD/3 - INQ000177838] and available on our website: <https://www.disabilitywales.org/statement-on-covid-19/>. This statement called on the UK and Welsh Governments to act decisively to safeguard the well-being and survival of Disabled people and others categorised as being at high risk of contracting the virus in the face of the Covid-19 pandemic. We expressed our concern that necessary measures to minimise fatalities were not in place. We pointed towards a chronically underfunded and neglected healthcare system that was institutionally vulnerable to cope with the unfolding crisis. Ten years of austerity had also resulted in an overstretched social care workforce that was unable to be responsive to worker shortage. We warned that much of the advice on how to avoid infection (e.g. self-isolation, social distancing) is not accessible for Disabled people. We also highlighted the importance of a fast Government support response for people who will need daily social and health care during Lockdown.

21. On 24 March 2020, together with other organisations, we published a letter criticising the Suspension of Social Services and Well-being Wales Act (2014). This is now produced as Exhibit [RD/4 - INQ000177839]. The implication of the suspension was that duties to assess and meet eligible needs of Disabled

adults and young people in the 2014 Act were downgraded to powers. In England, a duty to meet need will arise if a failure to provide care or support would be a 'breach of an individual's human rights'. This contrasts with Wales, where a duty arises only where a failure to provide would mean that the individual may be at risk of abuse or neglect. Resultingly, we were concerned there was a lack of express requirement to avoid breaches of the European Convention on Human Rights in Wales. Our letter expressed that this would cause crucial services to be withdrawn without formal human rights assessment. We called upon the Government to consider the risks this would pose and clearly warned that the move would inevitably leave thousands of Disabled people without essential support. It appears that none of these matters were taken into account in pandemic planning.

22. The Inquiry has asked whether local government actively engaged our organisation in emergency preparedness, prior to January 2020. The answer to this is 'no'.
23. The Inquiry has asked us to provide a list of any articles or reports our organisation has published or contributed to, and/or evidence it has given (for example to Parliamentary Select Committees) regarding pandemic planning and emergency preparedness, in the context of the group(s) which our organisation supports and has asked for links to those documents where possible. I would refer the inquiry to the 'Locked Out' report referred to above.
24. The Inquiry has asked, with the benefit of hindsight into the UK's response to the Covid-19 pandemic, which decisions we consider the government should have made differently, and why. I intend to provide a further statement on these issues in so far as they fall for examination in Modules 2 and 2B of the Inquiry. However, some examples include the following each of which ought to have been properly considered in pandemic planning:

- 24.1. The introduction of the Coronavirus Act and the suspension of duties under the Social Services and Wellbeing Wales Act. We criticised this for reasons set out in the statement at RD/4.
- 24.2. The 'shielding list', which gave priority to some in areas such as shopping deliveries and access to medicines, but failed to consider all Disabled people's social needs (e.g. people with visual impairments unable to socially distance). A similar approach was taken with vaccination prioritisation, with people with learning difficulties placed lower on the list, despite apparently being substantially at risk of death from Covid-19.
- 24.3. The rules governing the use of face masks and the uneven provision of British Sign Language (BSL) in Government pandemic information briefings that gave little or no consideration to Deaf/disabled people's communication needs.
- 24.4. The reorganisation of public spaces in towns and cities, which often led to closure to all traffic and introduction of new pavement furniture or cycle routes, where insufficient attention was paid to accessibility and orientation requirements of people with limited mobility or visual impairments.
25. The Inquiry has asked what lessons can be learned for future pandemics and why we hold those views. I intend to provide a further statement in Module 2 and 2B addressing these issues in so far as they relate to the matters for examination in those modules. However, lessons include the following for reasons set out in the Locked Out report:
- 25.1. Ensuring decision makers reflect the diversity of wider society.
- 25.2. Actively engaging and involving representation from the community at all levels of planning and preparedness and ensuring these voices are represented and given equal weight and value when responding to an emergency.
- 25.3. Having access to robust data and drawing on this and the lived experience of stakeholders to ensure appropriate analysis of the situation and devising solutions accordingly.

26. The Inquiry has asked whether there are any other organisations which we believe may hold relevant information or material in relation to the questions asked above. We would invite the inquiry to make contact with other Disabled People's Organisations across the UK to seek further information.

Statement of Truth

I believe that the facts stated in this witness statement are true. I understand that proceedings may be brought against anyone who makes, or causes to be made, a false statement in a document verified by a statement of truth without an honest belief of its truth.

Signed:

Personal Data

Rhian Davies

Dated: 28th April 2023