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Public Health Seattle & King County,
Disability Empowerment Center & Lifelong Aging and Disabilities Services

Qualitative Assessment of the Impacts of COVID-19 for people living with disabilities in King County

September 2022

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Background and goals

Public Health Seattle & King County (PHSKC) conducted a [social, economic, and overall health evaluation](#) to look at impacts of COVID-19 and the mitigation strategies taken to slow its spread in King County. Most of the data sources used by PHSKC to monitor key economic, social and health indicators unfortunately do not include data disaggregated by disability status.

To answer the question of what impacts COVID-19 brought for people living with disabilities, PHSKC partnered with community-based organizations (CBOs) to conduct a participatory qualitative study from December 2021 to July 2022. Two CBOs that serve people with all disability types joined PHSKC in doing this work: the Disability Empowerment Center and Lifelong Aging and Disabilities Services.

This work is funded by Public Health-Seattle and King County, the Washington State Department of Health, and the Centers for Disease Control and Prevention's (CDC's) Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases cooperative agreement (CK19-1904).

Study Description, Methods, and Limitations

Per its participatory approach, the study involved community members from project design to data interpretation. The different phases of community engagement in the study were:

- Phase I - December 2021

Listening session with 2 local community-based organizations (CBOs) that serve people living with disability in the county.

The goals were to (1) collect insights on the impact of COVID-19 for people living with disabilities, to help inform protocols; and (2) discuss in more detail the process we drafted to collect the data, and what adjustments were needed.

- Phase II - February to April 2022

Listening session with the King County Disability Consortium (KCDC), whose members include the 2 CBOs identified in Phase I;

Semi-structured interviews conducted by interviewers selected by CBOs with 35 adult community members to hear about how COVID-19 has impacted them. Participants were compensated for their time.

- Phase III - June to July 2022

Data interpretation session with KCDC. The PHSKC team presented the preliminary findings to community members, and facilitated a discussion to determine whether findings were reflective of their experience and/or if the data needed to be better contextualized before being disseminated.

Feedback opportunity was also offered to all interviewees that indicated, during the interview, that they would like to review preliminary findings. PHSKC team built a webpage with a closed caption video of the presentation of findings, an accessible slide deck and a short survey requesting feedback.

Data sources and sampling

- 1) 2 listening sessions with the King County Disability Consortium (KCDC) and
- 2) 35 interviews with people living with disabilities in King County in April 2022.

Staff selected by partner CBOs conducted the interviews. PHSKC staff conducted the listening sessions and analyzed all the data collected for the study using Dedoose (a software for qualitative analysis). The interview sample consisted of:

- 26 people receiving services through the partner CBOs and

- 9 University of Washington School of Social Work students identifying as living with disabilities.

Limitations

The limitations of this study include the sample size, which was not large enough to generalize findings nor to fully explore intersectionality – i.e., the combined impact across social categories such as race, ethnicity, gender, sexual orientation, socioeconomic status. Moreover, although the study sheds light on some aspects of the impacts of COVID-19 that are particular to certain types of disability, it is not comprehensive of all the different ways each type of disability influences how people experience such impacts.

Executive Summary

Themes that came up in the data

Impacts

- Work/Employment
- Finances
- Food security
- Housing
- Mental health
- Physical health
- Physical and Emotional Safety
- Access to services
- Transportation
- Education
- Negative impacts
- Positive impacts
- Confluence or chain of impacts
- How impacts differed for people living with disabilities

Supports

- Things that were helpful in dealing with COVID-19 impacts
- Barriers to accessing available support programs
- Supports that *would have* been helpful to have

Other themes

- Vaccination
- Childcare
- Disenfranchisement
- Reactions about government policies
- Concerns about the near future

Some of the key takeaways from the impacts of COVID-19 reported

- Impacts on **mental health** were the most commonly reported by the 35 people interviewed
- Accounts about impacts on **work/employment** and **financial struggle** were also common. Having to rely on friends, family and financial aid to get by during the pandemic was an experience shared by a number of people
- Experiences of **food insecurity** security were common amongst interviewees:

Of the 35 people interviewed:

- 21 had a time where their food didn't last, and they didn't have money to get more. Of these 21 people, 10 had not had a similar situation before the pandemic
- 14 had someone in their household eat less than they felt they should because there wasn't enough money to buy food. Of these 14 people, 9 had not had a similar situation before the pandemic

Quote: *“Because I've already lost my job, I've already lost friends, like I've already, you know, etcetera, etcetera just lost a lot, so I--I've had like suicidal depression, too... It's definitely been making me feel kind of like suicidally depressed at times and it's, it just, it's not good.”* - Interviewee

- **Access to services** was a common theme, particularly around (1) difficulty getting health care, due to the system being overwhelmed and the fear of getting infected with COVID-19; and (2) being unable to find caregivers or feeling worried about the prospects of not having caregivers
- Peoples' stories reflect how some impacts of COVID-19 were experienced in a **compounded** way

Quote: *My mobility got worse because I couldn't get out... Because I wasn't able to get out and get to my gym after they closed down because of Covid... I wasn't able to continue to exercise which helped my mental health but[...] also physically kept me going, so when I got sick I just kind of dovetailed. I mean, it just went downhill fast... - Interviewee*

- Most impacts reported were negative, but folks also identified **positive outcomes** from the pandemic – e.g., more financial support available, more telework opportunities, and increased awareness of the importance of mental health
- The stories reflected in the data suggest ways in which people living with disabilities experienced the impacts of COVID-19 with **additional challenges** – due to unaddressed issues that existed before the pandemic and insufficient support.

How did COVID-19 and efforts to slow its spread impact people living with disabilities in King County?

Insights from interview questions

Of the **35** people living with disabilities who were interviewed in April 2022:

- 34** (or 10 in 10) reported having their **mental health** impacted by COVID-19
- 29** (or 8 in 10) reported having their **physical health** impacted by COVID-19
- 28** (8 in 10) reported having their **finances** impacted by COVID-19
- 21** (or 6 in 10) reported having their **work/employment** impacted by COVID-19
- 15** (or 4 in 10) reported having their **housing situation** impacted by COVID-19

Work/Employment

21 in 35 (or 6 in 10) reported having their **work/employment** impacted by COVID-19

Of the 35 people interviewed:

- 8** stopped working to care for self or others in the household
- 6** lost my job, and got a new one
- 6** other situation
- 4** my workplace closed due to COVID
- 4** got a new job
- 4** sought out new or additional sources of income
- 4** got furloughed (laid off, temporarily) or had work hours cut
- 3** lost my job, and have not found another one yet
- 2** lost my job, and am not looking for another right now
- 1** got a pay (or hours) cut

Types of impact reported:

Quote: "Because I'm immunosuppressed, at high risk for COVID, I decided to just work online. And that really impacted the hours that I'm working. I'm working less because of that. They don't have a lot of the online work for me to do. Not as much as when I was working in-person." -Interviewee

- Having to quit/not return to work/change jobs due to the need to protect against COVID-19
- Having work hours cut or being furloughed
- Having workplace close
- Mental health issues related to COVID leading to loss of job

- Increased difficulties to get a new job
- Having to shift to working from home
- Decreased demand for and the ability of business owner to provide services
- Getting more flexibility at work, e.g. being allowed to work from home (positive impact)
- Having more work opportunities available with increase in telework (positive impact)

Participants were also asked: “What is your current source of income?”

15 respondents answered “I receive benefits: SSI/SSDI (Social Security/Disability)”

8 respondents answered “I don't work and I am NOT looking”

7 respondents answered “I am unable to work”

7 respondents answered “I receive benefits: Other”

6 respondents answered “lost my job, and got a new one”

6 respondents answered “I don't work but I am looking”

4 respondents answered “my workplace closed due to COVID”

3 respondents answered “lost my job, and have not found another one yet”

2 respondents answered “lost my job, and am not looking for another right now”

0 respondents answered “I receive benefits: TANF (Temporary Assistance for Needy Families)”

0 respondents answered “I receive benefits: VA Benefits (Military or Veteran's Assistance)”

Quote: “I will add that some positives that came out of it – that people who have disabilities... would have liked to have seen adapted a lot faster that [the] pandemic made possible – was the push towards remote work. I don't drive or anything like that. So going into work I was always very limited... Now that there are so many options out there that are purely remote that gives me a lot more opportunity to be able to find employment.” -KCDC

Finances

28 in 35 (or 8 in 10) reported having their **finances** impacted by COVID-19

Of the 35 people interviewed:

18 cut back on savings

17 did not have enough money to buy food (on one or more occasions)

16 accumulated more debt than normal (had more/higher bills than normal)

12 did not have money to pay for my medication/treatment

12 delayed paying other bills

12 delayed paying my rent or mortgage

8 provided financial support for family member or friend

3 lost access to my health insurance

Types of impact reported:

Quote: *“The cost of living took off. You're not working and you just get that check once a month and it goes so fast. It's hard to survive.” -Interviewee*

- Having to rely on family or friends for financial support
- Applying for financial support from relief programs
- Struggling or not being able to pay rent
- Using savings to pay bills
- Cutting back on savings
- Accumulating debt
- Not being able to afford mental health services
- Not being able to afford medical supplies
- Having expenses from medical procedures increase financial hardship
- Having to spend money to get food delivered
- Having more financial support available (positive impact)

Participants were also asked: “Have you received funds from a relief program related to COVID-19 (e.g. utility discount, rent assistance)?”

10 respondents answered “No, I didn’t need it”

9 respondents answered “Yes, I applied by myself”

8 respondents answered “Yes, a third party helped me (i.e. friend, family member, CBO)”

6 respondents answered “No, I didn’t know about these resource”

2 respondents answered “No, I applied but did not receive (e.g. did not meet the criteria)”

Quote: *“...with my lack of job stability because of the pandemic and not having employers that are aligned with my safety standards... I've racked up I think almost \$10,000 in debt and credit card debt being in between jobs and needing to support my family and pay rent. And um you know, I had to turn to other ways of income being, you know, doing Instacart.” -Interviewee*

Food security

Themes that emerged:

- Not having enough food
- Getting close to not having enough food

- Having access to support services helped with food security (relates to supports to help address COVID-19 impacts)
- Food maps made available by government agencies were not released accessibly (relates to supports to help address COVID-19 impacts)

Quote: *“Food has been so expensive. They increased the food stamp amount to the maximum but that didn’t even last a month. Then the rest of the month, I had to rely on food banks, but food banks aren’t getting the donations that they used to, so they’re short on food and yeah, it’s been a real struggle. There have been times when I lose weight, because I’m forced to eat only one meal a day because I can’t afford to eat more than that.” -Interviewee*

Of the 35 people interviewed:

21 had a time where their food didn't last, and they didn't have money to get more. Of these 21 people, **10** had not had a similar situation before the pandemic

14 had someone in their household eat less than they felt they should because there wasn’t enough money to buy food. Of these 14 people, **9** had not had a similar situation before the pandemic

Housing

15 in 35 (or 4 in 10) reported having their **housing** situation impacted by COVID-19

Of the 35 people interviewed:

- 8** delayed paying my rent/mortgage
- 7** had to move to a different home
- 7** had to apply for rent assistance programs
- 4** chose to move to a different home
- 3** became homeless

Types of impact reported:

- Having the price of rent increase
- Delaying paying rent or mortgage
- Having to apply for rent assistance programs
- Having to move to a different home
- Feeling concerned about being evicted
- Becoming homeless
- Being able to get a house and no longer be homeless (positive impact)

Quote: *“I lived with 11 other people... about the time before Delta became a big variant of Covid. And it was a lot.... I couldn't do it. I had to go back to my mom and that that was a lot too.”-Interviewee*

Participants were also asked: “What is your current housing situation?”

30 respondents answered “I live in a home that I rent (or someone in my household rents)”

3 respondents answered “I live in a home I share with others, but do not own/rent”

1 respondent answered “I couch surf (staying with friends/family for short periods of time)”

1 respondent answered “Other”

0 respondents answered “Prefer not to answer”

0 respondents answered “I sleep in a car/tent”

0 respondents answered “I live in a shelter”

0 respondents answered “I live in a home that I own (or someone in my household owns)”

Quote: *“It's made me have a house. I think that one of the things that was sad for so many people. So many people lost a lot. But for the homeless, I think it helped a lot of people get housed. And I seen it, and I didn't think that I'd be one of them, but I was.” -Interviewee*

Mental Health

34 in 35 (or 10 in 10) reported having their **mental health** impacted by COVID-19

Of the 35 people interviewed:

33 felt anxious or depressed more often

27 started having less healthy habits

17 lost access to counselor/support system

13 had increased access to counselor/support system (positive impact)

11 started having healthier habits (positive impact)

9 did not have continued access to necessary medication for mental health

3 have felt anxious or depressed less often (positive impact)

Types of impact reported:

- Feeling isolated
- Having COVID worsen existing mental health conditions – both personally and for people in general
- Being worried about contracting COVID-19

- Being overwhelmed by all the changes in one's life
- No longer being able to do activities that used to bring joy, e.g. meeting friends and going to church
- Being impacted by child's worsening mental health state
- Being in a toxic relationship and unable to move out
- Having mental health services shift to virtual
- Deciding to seek mental health care (positive impact)
- Taking steps to be healthier, e.g. quitting substances (positive impact)
- The pandemic has brought more awareness to the importance of mental health (positive impact)
- Having access to mental health services helping cope with the pandemic (relates to supports to help address COVID-19 impacts)

Quote: *"I think the main thing I've noticed in the pandemic is particularly around mental health, that's where I feel it the most. The longer I've been in the pandemic I just feel like it really adds to burnout and everything else going on and so they're just really - there are days where it's just really hard to get up in the morning..." -Interviewee*

Physical Health

29 in 35 (or 8 in 10) reported having their **physical health** impacted by COVID-19

Of the 35 people interviewed:

20 had surgery or other medical procedure delayed because of the pandemic

17 avoided seeking health care because of concern about getting COVID-19

13 had other impacts on your physical health due to the pandemic

Types of impact reported:

- Getting COVID and, for some, having it worsened other health issues
- Measures to slow the spread of COVID-19 impacted the ability to keep healthy habits such as exercising, being gym closures a common example
- Quitting smoking (positive impact)
- Getting support from healthcare providers to stay healthy (e.g. offering online yoga sessions) (relates to supports to help address COVID-19 impacts)

Quote: *"[I] quit smoking... I don't know if it is healthier, it was just a decision I made... [In] some ways it's the only part of my life that I can have full control over to help me get through this, if that makes any sense." -Interviewee*

Quote: *"[Having COVID-19] aggravated the Crohn's, which dovetailed into like blood clots in my lungs and it, like I say, it's been an interesting almost 24 months for me, health-wise." -Interviewee*

Participants were also asked: “Have you or anyone you live with been diagnosed as having COVID-19?”

2 respondents answered “Yes, someone I live with

3 respondents answered “Yes, both myself and at least one other person I live with

4 respondents answered “Yes, I have

26 respondents answered No one in my household or where I live

Participants were also asked: "After having COVID-19, have you had any lingering side effects (also known as 'long COVID')?"

4 said “No”

2 said “Yes”

Physical and Emotional Safety

Types of impact reported:

- Feeling unsafe riding public transportation
- Being abused by caregivers
- Experiencing sexual assault during the pandemic
- Need for emergency shelters and specific programs for victims of domestic violence (relates to supports to help address COVID-19 impacts)

Quote: “...there weren't many caregivers available... And so I've gone through some caregivers that have been bullies, dangerous, drugged me done all kinds of stuff.”- Interviewee

Quote: “I have felt anxious and depressed more often. I have had less healthy habits, eating less. Less exercise, less hobbies. I lost access to counselors and my support system. I lost access to medications for mental health as well as losing my therapist. I went through a sexual assault from someone that I had known for four years during the pandemic. I had that question from someone else a while ago and I found it interesting that sexual violence increased during the pandemic.” - Interviewee

Quote: “Some people are being aggressive. I've been assaulted twice on the bus.” - Interviewee

Access to services

Access to services refers to accessing services the respondent needed during the COVID-19 pandemic to care for their health – e.g. access to caregivers and medication.

Types of impact reported:

- Decrease in availability of services, as healthcare systems were overwhelmed

- Losing access to services or having services delayed
- Not being able to find caregivers and/or being worried about the prospects of not having caregivers
- Feeling unsafe to seek care at health care facilities for risk of exposure to COVID-19
- Having to access services online was a barrier to get care for some people
- Not having information about available resources produced accessibly
- Having more access to services, particularly due to telehealth (positive impact)
- Having some providers proactively support the needs of people living with disabilities (relates to supports to help address COVID-19 impacts)

Quote: *"I was in a partial hospitalization program when the pandemic started and so they moved to telehealth And as a result of that I lost access to care medication along with other things."*-Interviewee

Quote: *"I feel like there's just less support available in general. It's been really scary not being able to access mental health care and stuff like that for myself and my child."*-Interviewee

Quote: *"Also, caregivers were suddenly dropping like flies, and there were no replacements. So, a large percentage of my COVID fund was trying to search for help, trying to search for caregivers."* -Interviewee

Quote: *"I think one of the most frustrating things was there were resources out there. Because they were not produced accessibly we couldn't share those with people."*-KCDC

Transportation

Types of impact reported:

- Feeling unsafe to take public transportation for fear of getting COVID-19
- Decrease in available specialized transportation services, particularly in volunteer-based services.

Quote: *"Drive up and go shopping is great, if you have a car. If you don't have a car, and you are at increased risk of contracting Covid, it may be too risky to take public transit, further increasing isolation."*-KCDC

Quote: *"The domino effect in terms of stay-at-home orders and social distancing orders [is that] a lot of the clients we work directly with on my team are people with specialized transportation needs. People with disabilities, older adults, folks with limited mobility. What we saw and what we continue to see during the pandemic especially early on [is] a reduction in available services, which led to longer wait times, more uncertainty around a service being able to pick you up and drop you off where you needed, more anxiety and worry around safety while on those transportation whether it is a shuttle or individual's car. Particularly volunteer-based services have been impacted and those are the services that in years previous have come highly recommended and were preferred because they offered a sense of community and connection to a lot of our clients... A lot of volunteers decided to stop driving for their own safety for their own health and wellness..."*-KCDC

Education

Types of impact reported:

- Delaying going back to school for fear of getting COVID-19
- Brought hardship for children with disabilities to continue their education during stay-at-home orders, given challenges to attend school virtually
- Lack of support for primary caregivers caring for the education of children with disabilities (relates to supports to help address COVID-19 impacts)

Quote: "It has impacted my timeline for going back to school. Because I don't want to go back to nursing school when the pandemic is in full swing." -Interviewee

Quote: "I don't think that the schools were equipped to help children with disabilities succeed; and with their IEP plans [Individualized Educational Plan] and putting that on the back burner and not giving kids their hours that are needed, and having that put on the parents even more to make sure they child is getting what they are owed while also even working or not having access to internet or a computer. So, I think there was a huge educational impact when it came to [mitigation stay-at-home orders] – and stay-at-home orders are great, and we should definitely stay home and be safe... I'm not sure if the schools could have done more to help families." -KCDC

How impacts of COVID-19 differed for people living with disabilities

Quote: “COVID-19 impacts people with disabilities significantly differently because they are already at high risk for contracting, getting sick from, and dying from COVID-19. We all have different forms of care that we need and seek from the medical system, and when the system is overburdened and at capacity, people with disabilities lose their essential support and critical care that they need to survive, to live, to thrive.” -Interviewer

- Getting **information** about COVID-19 and resources to deal with its impacts was difficult as communication pieces were not produced accessibly

Quote: “It was all different for people living with disabilities because we couldn't get that info. We couldn't find the things we needed to find out. Even if an organization like Alliance wanted to share something, we couldn't share it because it wasn't accessibly created.” -KCDC

- **Accessing care** could be very challenging:
 - Not being able to find caregivers and/or being worried about the prospects of not having caregivers
 - Feeling unsafe to seek care at healthcare facilities for risk of exposure to COVID-19
 - Having vaccination sites that are not accessible
 - Having to access services online was a barrier to getting care for some people
- Increased **isolation** for those who live with a disability that makes it harder or not advisable to go out (e.g. folks that have mobility restrictions, are immunocompromised or have other medical conditions)
- Increased isolation for those who have mobility disabilities and have a housing situation that is not supportive to their needs

Quote: “There were times where the elevator broke and I couldn't even leave the floor I was on... So, yeah. I'm already isolated to bed and... getting my wheelchair was pushed back two years because of covid specifically. Like I just couldn't be seen in the clinic or I couldn't have people here to come and measure me. So, I was like in a chair I couldn't trust to leave the property because the battery would die so I was truly confined to the property, to my apartment, to the hallways.” -Interviewee

- Using **virtual platforms** to deal with social isolation was not an option for folks with certain types of disability

Quote: "Many people have combated isolation by being on ZOOM. As a person with a brain injury, screens are my enemy. Thus, resulting in more isolation and depression."-KCDC

- Similarly, virtual platforms were also not a good alternative for education or telehealth for some people with intellectual or developmental disabilities

Quote: "Many people with intellectual and developmental disabilities really suffered in this pandemic. Factors include less or no ability to engage in virtual activities including education, therapy, and medical care." -KCDC

- Parents of children with intellectual and developmental disabilities had a challenging time **caring for their children** and continuing their education during the pandemic
- **Routine activities** such as grocery shopping or using the public transportation brought greater risk for those who are immunocompromised or have certain medical conditions
- Having to change **work/employment** situation due to the higher risk for complications from COVID-19

Quote: "Because I'm immunosuppressed, at high risk for Covid. I um you know, decided to just work online. And that really impacted the hours that I'm working. I'm working less because of that."- Interviewee

- Some folks who are immunocompromised had to deal with the **financial burden** that came from taking the necessary protective measures

Quote: I have an immune condition... So, I was spending tons of money to buy N-95s. ...masks, disinfectants, cleaning supplies, and all that stuff to keep things as sanitary as possible... My immunologist didn't want me to leave the house unless it was absolutely necessary. So, things had to be delivered, and you can't use coupons at the grocery store when you're getting things delivered. And then you... have to spend 75 dollars or more [per order]."- Interviewee

- Masks made **communication** more challenging for those with a hard-of-hearing disability

Supports

Support refers to measures, resources or policies that supported or could have supported the community in dealing with issues related to COVID-19. It includes both government-led and individual-led initiatives.

Themes that emerged in the data:

- Things that were helpful to deal with COVID-19 impacts
 - Receiving financial support from family and friends
 - Receiving financial support from relief program funds
 - Having a simplified process and/or getting assistance to apply to financial support programs
 - Having positive interactions with staff assisting in program entry points
 - Having school staff help connect with available support
 - Having healthcare team contact patients to inform that COVID-19 vaccine had become available to them
 - Having access to a mental health counselor
 - Having easy access to vaccination (people with no mobility issues)
 - Having volunteer programs provide transportation and food delivery
 - Having dedicated shopping hours for high-risk groups at grocery stores

Quote: *“So, I think they paid like \$600 or something for rental assistance. That one was really easy because they didn't ask for any annoying paperwork. They didn't make me jump through a million hoops or anything like that. So, they were just nice people. They took my word for it. They didn't give me a hard time. So it was, they were actually nice to deal with.”-Interviewee*

Quote: *“Early pandemic we saw a lot of volunteer programs and specialized transportation services pivot to food delivery which was very helpful.”-Interviewee*

Quote: *“I had one of the success coaches at my school help me find those resources.” -Interviewee*

Quote: *“I felt like they made it easy to access vaccinations.” -Interviewee*

- Barriers to accessing the available support programs (e.g. unemployment benefits, rental assistance programs)
 - Lack of awareness about what was available, at times linked to not having information about resources produced accessibly
 - Being unclear about the application process
 - Feeling like a struggle when trying to apply for assistance
 - Not meeting certain application requirements, e.g. having a previous heating bill to receive utility assistance
 - Lack of support from landlord to apply for rental assistance
 - Feeling uncomfortable receiving assistance

Quote: “...fighting with insurance to get [medication]... Yeah, that was not fun, and then fighting with the people for unemployment. And I’m sick during this period, I mean, it’s like insane, I should not have been dealing with all of that at once.” -Interviewee

Quote: “You know, someone told me like ‘you should apply for food stamps because you don’t have anything in your house’. You know, because I wasn’t able to go to a food bank, I wasn’t comfortable with that [applying for food stamps]...” -Interviewee

- Supports that would have been helpful to have
 - Having economic impact payments (or “stimulus money”) made available quicker and more frequently
 - Having higher dollar amount per household in food stamps
 - Having more available resources for people suffering from domestic violence
 - Ensuring that everyone has access to health care, including mental health services
 - Having more support programs and emergency shelter for people experiencing domestic violence
- The need to anticipate unique needs and provide helpful guidance to assist people living with disabilities
 - Examples: producing accessible public health communication, distributing free infection prevention supplies, recognizing the need for clear masks to aid in communication

Quote: “Extra money would have helped. I’ve seen estimates that it costs people with disabilities an average of \$18,000/year for unreimbursed medical costs, and I suspect the pandemic significantly increased that. Being able to afford a cab, for those who don’t drive is expensive, and could have lessened isolation.”-KCDC

Quote: “...making sure that everybody has access to mental health services free of charge as well. Because I know that depression... spiked a lot during the pandemic and people didn’t know where to go for help.” -Interviewee

Other Themes

Vaccination

Themes that emerged in the data:

- Vaccination sites not being accessible
- The requirement of mask wearing made it difficult for interpreters assisting people to get vaccinated
- Need to improve the educational campaigns about vaccines (relates to supports to help address COVID-19 impacts)
- Being alerted by healthcare provider about the availability of the vaccine (positive impact)
- A respondent shared that the reason for being vaccinated was it being a requirement to go into restaurants and other places of business.

Participants were also asked: "Have you received the COVID-19 vaccine?"

24 respondents answered "Yes, I have had 2 doses and least 1 booster dose"

8 respondents answered "Yes, I have had 2 doses"

3 respondents answered "No"

Participants were also asked: "Why didn't you get vaccinated/complete the vaccination/ take a booster?"

Of the 11 who did not respond "Yes, I have had 2 doses and least 1 booster dose":

5 respondents said "I am not sure I want a booster"

2 respondents said "I am unable to get a COVID-19 vaccine due to my medical condition"

1 respondent said "I do not plan to get a COVID-19 vaccine"

Quote: *"...some of the pandemic related support such as vaccination sites were not well configured to support things such as wheelchairs, as I have found out myself on numerous occasions. Furthermore, it is harder to enforce social distancing while in a wheelchair making a companion almost a necessity."* -KCDC

Disenfranchisement

Disenfranchisement refers to the feelings of frustration with the inequities of not attending to the needs of the disability community to ensure folks are safe and healthy.

Themes that emerged in the data:

- People living with disabilities not receiving proper accommodations in various settings

- The pandemic highlighted the insufficient attention to the needs of the disability community that already existed before the pandemic
- Having COVID-19 data not be disaggregated by disability status
- Not having enough information about how COVID-19 impacts different types of disability

Quote: *“With COVID, we saw impacts by race and other things. We were completely left out of the picture. That was hard to take.” -KCDC*

Quote: *“We must request and receive reasonable accommodations at work, at school, at medical settings, and at other settings so that we can feel more safe, comfortable, and healthy. We want to be able to contribute to the society, and it's frustrating when people don't want to support people with disabilities.”-KCDC*

Quote: *“I am so tired of being treated as disposable and my government reinforcing that... I don't have any more energy to spend arguing that disabled lives matter.”-KCDC*

Quote: *“...we are not collecting statistics on people with disabilities... You can't recognize us as a community until you look at our data and collect data on us especially in this data-driven world. We are making funding decisions based on data. If we are not collecting information about us, then we are not included in those decisions or disproportionately unequally included.”-KCDC*

Reactions about government policies

Themes that emerged in the data:

- Mistrust in government institutions
- Discontentment with lack of accessible information about COVID-19 and the resources
- Discontentment with lockdowns, vaccination, and mask requirements
 - Mask wearing bringing communication challenges for those with a hard-of-hearing disability
- Appreciation for government response to the pandemic:
 - Policies that helped protect the community against COVID-19, particularly the mask mandate and social distancing
 - Other policies e.g. the eviction moratorium and the stimulus checks
- Discontentment with end of the mask mandate

Quote: *“At the very least, please be transparent and actually tell the public the truth, that the mask mandate is not going away because it's actually safer. ...lots of people trust you [the WA state DOH] and follow the mask mandates, and they believe that the mask mandates will only be lifted when it's safe, so therefore the mask mandates being lifted means it's safe. People really believe that. But it's not true. It's not any safer.”-KCDC*

Quote: *“Other than that, the government did a good job. They give us money. They give us food, they let the house- they mandate that you can stay the in the house and not be homeless. They said they can't they can't kick you out, the landlords. They did a good job.” -Interviewee*

Concerns about the near future

Themes that emerged in the data:

- Concern about “going back to normal”
- Concern about the end of financial supports
- Concern about lasting impacts for the disability community

Quote: *“I was already not receiving, no getting any money and it [COVID-19] made it easier for me to get ADB [Aged, Blind or Disabled Cash Assistance]... But as the pandemic goes on more you can see them start to close the wallet and to start to say ‘okay everything’s fine now’ and it’s become business as usual.”- Interviewee*

Quote: *“I feel like the push for everything to kind of go back in person has been happening kind of rapidly, more rapidly than I'm comfortable and I'm like dealing with it wearing masks and doing the things I need to do, but it kind of feels like there's this attitude that everything is over when it's not and that makes me uncomfortable.”- Interviewee*

Quote: *“I'm very concerned about communities not bouncing back from this in the same way they were before. Like HIV/AIDS epidemic, when it first started, like where people were dying and the government wasn't doing anything... they just didn't care because they were considered like a disposable population.”- Interviewee*

Demographics of the 35 community members interviewed

Disability

Types of disability

Note: Disability categories are not mutually exclusive.

32 respondents self identified as having Mental Health condition (depression, anxiety, bipolar, schizophrenia, etc.)

29 respondents self identified as having Other disability or chronic condition (dyslexia, HIV/AIDS, cancer, diabetes, etc.)

19 respondents self identified as having Developmental or intellectual disability (Down syndrome, Autism, ADHD etc.)

15 respondents self identified as having Mobility disability (use a wheelchair, walker, cane, prosthetic, etc.)

8 respondents self identified as having Sensory disability (blindness, low-vision, d/Deaf, hard-of-hearing, DeafBlind, etc.)

How much would you say your disability impacts your ability to perform daily activities?

1 respondent said their disability has Insignificant impact in their ability to perform daily activities

2 respondents said their disability has Minor impact in their ability to perform daily activities

10 respondents said their disability has Major impact in their ability to perform daily activities

10 respondents said their disability has Moderate impact in their ability to perform daily activities

11 respondents said their disability has Severe impact in their ability to perform daily activities

Gender

Note: Gender categories are not mutually exclusive.

Number of times each category was selected:

22 Female

8 Nonbinary or genderqueer

4 Male

4 Transgender or other gender

Sexual orientation

Note: Sexual orientation categories are not mutually exclusive.

Number of times each category was selected: 1 Asexual

- 8 Bisexual or pansexual
- 1 Gay, lesbian, or homosexual
- 18 Heterosexual or straight
- 9 Queer

Race/ethnicity

Note: Race/ethnicity categories are not mutually exclusive.

Number of times each category was selected:

- 3 AIAN
- 5 Asian
- 8 Black
- 1 Hispanic
- 2 NHPI
- 23 White
- 2 Another race
- 2 Prefer not to answer

Age

- 3 respondents were in the 18-24 age group
- 14 respondents were in the 25-34 age group
- 2 respondents were in the 35-44 age group
- 5 respondents were in the 45-54 age group
- 4 respondents were in the 55-64 age group
- 7 respondents were 65 or older

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