# Covid-19 – a global epidemic

Chris Kubwimana, a Deaf Burundian who works in London, reflects on how Covid-19 has impacted his

#### Deaf community in his home country

Chris Kubwimana, a Deaf Burundian who works in London, reflects on how Covid-19 has impacted his Deaf community in his home country

[Photos] The concept of the Latin phrase 'Nihil de nobis, sine nobis' or 'nothing about us without us', coined in the 1990s, is a powerful and famous slogan. It originated from the disability rights movement but has shifted to other interesting groups, whose aims or aspirations focus on the liberation from systemic worldwide oppression.

Nowadays, 'leave no one behind' is a catchphrase which also seeks to promote an inclusive agenda and encourage countries to

undertake the surveys necessary to identify those at high risk of being left behind. We can dispute these wellmeaning slogans, but the reality is that disabled people globally, including deaf people, are left behind in a crisis.

In a global crisis like Covid-19, more than one million people with disabilities, including deaf people, are largely "left feeling abandoned, ignored and devalued".

Since the World Health Organisation (WHO) declared the Covid-19 outbreak as a global epidemic earlier this year, it has, unimaginably, claimed more than one million lives and sadly the death toll is still rising. Some parts of the world are hit harder than others. For example, amongst other countries, the UK, perhaps, felt the force of the virus's impact with a full lockdown that commenced in March 2020. At the time of writing this article, in England we are going through a three-tier system, with different areas facing different restrictions.

In contrast, a country like Burundi, which has also had confirmed Covid-19 cases, did not experience a lockdown



at all. However, unlike the UK where borders have been reopened, since March, Burundi remains largely closed to the outside world.

The WHO and world governments have introduced many preventive measures, including a directive guidance that includes "Disability considerations during the Covid-19 outbreak". It highlights that "actions need to be taken to ensure that people with disabilities can always access health-care services, water and sanitation services and public health information they require, including during the Covid-19 outbreak".

The directive guidance is clear, it recommends that public health information and communication is accessible – including captioning and sign language for all live and recorded events and communications. This includes national addresses, press briefings and live social media.

For more than one billion people living with disabilities





#### International

worldwide, including deaf people, this seems plausible, acceptable, or adequate in theory, though the reality suggests otherwise.

The deaf community in Burundi is an example to be taken into account: a country that DeafReach UK works in jointly with Aurora Deaf Aid Africa. Initially, the government of Burundi overlooked the significance and gravity of Covid-19 even after the virus was confirmed in the country. Burundi even went on to expel the WHO's officials.

However, things changed dramatically following the new incoming government in July 2020. The government, in order to

contain the spread of the disease, put in place a series of preventative measures including quarantine sites, screening tests and the closure of borders. The results of a rapid assessment conducted by the Food and Agriculture Organisation of the United Nations (FAO) on the impacts of Covid-19 on agriculture and food security were expected in July. However, the negative effects on food accessibility due to increased prices have already been observed (for example, maize is 37–61 percent above prices from the same time last year).

Despite the efforts of the government and international non-governmental organisations (NGOs) operating in the country, there is still a sense of claustrophobia amongst the Burundian population, let alone the deaf community. The Deaf community has reported intensified experiences of anxiety, fear and even paranoia during this pandemic. This is due to the lack of access to vital information about Covid-19.

Whilst there is no formal research into deaf people's experiences during this epidemic, their narrative and anecdotal accounts show that they are feeling largely isolated, ignored, left behind and unaccounted for. The government holds regular workshops and daily briefings via live television broadcasts to update the country on its Covid-19 response initiatives. However, the Deaf



community feels that it's as if they don't exist. They are never invited to participate in any Covid-19 awareness events nor provided with any information in sign language, and the daily TV briefings do not have sign language interpretation. People within this community simply do not know what is happening around them or where to go to seek help. Their immediate families and friends are unable to help either due to communication barriers.

# DeafReach UK: supporting the Deaf community in Burundi

DeafReach UK, which amalgamated with Aurora recently, is a humanitarian not emergency organisation, and does not prioritise emergency appeals; however, it feels that it is vital and compelling to do something for the deaf community in Burundi. This was due to the recent major events that occurred in Burundi, ie several floods that left many people dead and others displaced, alongside the ongoing Covid-19 pandemic.

We realised that the Covid-19 crisis exacerbated the existing situation for deaf people in Burundi. We also realised that deaf girls and women suffer quadruple discrimination – by gender, by disability, by geography, and by unmet health care needs.



From our contact with the deaf community in Burundi and

other organisations working in emergency aid, we recognise major health issues faced by deaf women such as 'period poverty', which has been exacerbated by the coronavirus pandemic. Deaf girls and women tell us that amongst the items that they need the most are sanitary towels, wipes and soap, so that they can manage their periods hygienically and with dignity and humanity.

We understood this need and engaged our efforts with a local partner in Burundi. The first program was devised to inform vulnerable deaf people in the capital Bujumbura about the virus

#### International



and ways to prevent it from spreading. This was done through a workshop in sign language, held in July 2020, and also included a wider plan to spread information and awareness amongst deaf people nationwide. Other assistance provided included face masks, food, hygiene kits for deaf girls and women. This program was delivered and implemented by the Burundi 'Association Action pour l'Encadrement et la Promotion des Sourds-Muets au Burundi' (AEPSM-Burundi).

A second similar Covid-19 assistance program for the deaf community in Burundi was held in October 2020 in the capital Gitega, the second capital city of Burundi. This was delivered by 'Association pour l'Auto-Development de Femmes Sourds du Burundi (ADFSB) with support from the Burundi National Association of the Deaf (BNAD).

Despite these best efforts, the needs of deaf people in Burundi are largely unmet. They are an extremely vulnerable group and exposed to great risks with no social protection in place. With no social services in place to help to reduce their exposure to risks or to enhance their capacity by empowering them economically or socially, they remain at great risk of exclusion.

Covid-19 only exacerbated the already existing major issues. The worst scenarios are a denial of basic human rights, such as lack of provision for education and lack of access to information and employment. It should also be noted menstruation is a taboo topic in myriad

#### parts of Burundi's society.

Burundi is a poor country. It could be excused for being one of the poorest countries on the planet; however, it is failing to identify and to provide services to those that are at high risk, such as the Deaf community. This is unacceptable, particularly given that Burundi is a signatory of international treaties, such as the Convention on the Rights of Persons with Disabilities (CRPD).

The Deaf narrative in Burundi is that the community feels excluded from life's spheres, excluded from education, excluded from employment and training and, even more so, excluded from humanitarian responses including the Covid-19 pandemic.

The WHO has some practical steps that are also applied to the deaf community globally to help to bridge the gaps and remove barriers; this includes ensuring that public information and communication are accessible. For deaf communication this means the provision of workshops, captioning or sign language interpretation for

all live TV press briefings and live social media. Other steps include working with deaf people directly and also their representative organisations in order to identify actions essential to protect deaf people who are at high risk. The WHO recommends the provision of good hygiene and sanitation, where washing facilities and supplies are made available and accessible.

According to deaf people's experiences in Burundi these simple steps are non-existent.

Deaf people and other people with disabilities, not only in Burundi but globally, deserve attention in a crisis and they deserve better than this.

DeafReach amalgamated with Aurora and both organisations now work as one and work with deaf, and deafblind people and their families in Burundi, Rwanda, Uganda and DR Congo. If you want to know more about our work, contact us on info@deafreach.org



Chris Kubwimana is the DeafReach Trustee responsible for Aurora-led projects in Burundi and Rwanda.

## **BATOD Magazine**

### This article was published in the January 2021 issue. © BATOD 2021

