



**THE CHALLENGES OF PERSONS WITH HEARING IMPAIRMENT
AMIDST COVID-19 PANDEMIC: IMPLICATIONS ON
EQUITY & INCLUSION**

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Abstract

The paper traced the origin of COVID-19 to the Republic of China in the year 2019 and identified its major signs and symptoms as well as its major risk factors. Psychological Implication of the pandemic is also traced. The major challenges of persons with hearing impairment such as lack as rich sign language vocabulary and access to appropriate health care services among others were discussed. The paper also discussed the implication of COVID-19 on the principle of equity and inclusion. The principle recognises fairness to all persons who disadvantaged than others in access services and facilities. The paper also discussed a way forward and calls for the development of rich vocabulary of sign language to cope with the dynamics of the pandemic.

Keywords: Deaf community, Equity, Inclusion, Sing Language, COVID-19

Introduction

Nigeria as a global community is being ravaged by COVID-19 pandemic which has worldwide effect. COVID-19 otherwise known as Corona virus caused by severe acute respiratory syndrome corona virus 2 (SARS-CoV-2). Corona viruses belongs to colony of viruses that are capable of causing common illnesses ranging from common cold, severe acute respiratory syndrome (SARS) and Middle East respiratory syndrome (MERS). Until 2019, a strange coron avirus was identified as the cause of a disease outbreak in Wuham, China (Mayo Clinic, 2021). The disease is popularly known as COVID-19 and was declared by World Health Organization (WHO) in March, 2020 as a pandemic.

COVID-19 has an incubation period of 2-14 days before exposure. According to Mayo Clinic (2021) its common signs and symptoms include but not limited to the following:

- Fever

- Cough
- Tiredness
- Loss of taste or smell
- Shortness of breath or difficulty breathing
- Muscle aches
- Sore throat
- Running nose
- Nausea
- Vomiting
- Diarrhea
- Rash

The severity of these symptoms range from very mild to severe. Some persons may experience few signs, while others may not experience any symptoms at all. It is also established that individuals who are advanced in age have higher risk of serious complications from Corona Virus and the risk increases with age. Those who have existing health challenges like diabetics, high blood pressure, weak immune system occasioned by HIV/AIDS, Sickle cell, Cancer, among others also have higher risk of the virus. It must be noted that there are majorly 2 risk factors for COVID-19. Viz:

- Close contact of less than 6ft to someone who is COVID-19 positive
- Being coughed or sneezed on by an infected person.

In Nigeria, first confirmed case was announced on 27th February, 2020, when an Italian citizen in the city of Lagos was tested positive. Since then the number of confirmed cases has risen to thousands. After the confirmation, several measures were announced to curtail the spread of the virus including lockdown and massive enlightenment of the general public. This period marked the beginning of exclusion as most if not all enlightenment programs were rather exclusive of persons with hearing impairment.

Meanwhile, hearing impairment according to IDEA is a condition whether permanent or fluctuating, that adversely affects a child's educational performance. While, deafness refers to hearing impairment that is so severe to the extent that the child cannot process sound through hearing with or without assistive/adaptive technology devices (Montana Gov, nd). Thus in this paper, persons with hearing impairment refers to those whose condition prevents them from receiving sound in all or most of its forms but may respond to auditory stimuli.

Psychological Status of Persons with Hearing Impairment during COVID-19

Keeping borders open and allowing free movement was a major cause for the fast spread of Corona Virus globally. However, lockdown measures were adopted literary throughout the world during the pandemic could not effectively combat the spread of COVID-19. Many nations insisted on a 14-day isolation period for those who were suspected to have contact with COVID-19 patients. Various quarantine measures were announced by different countries in an attempt to restrict the spread of the virus ranging from ban on the operation of public transport and other crowded public places such as shopping malls, cinemas and worship centers among others. Prolonged lockdown and movement restriction had a negative impact on persons with hearing impairment mental health.

Salwa and Emad (2021) reported cases of divorces, unwanted pregnancy, domestic violence and negative manifestations of mental dysfunction during the period of COVID-19 among persons with hearing impairment. This was occasioned by confinement at home for an unexpected but extended period of time, the fear of job loss, and an impending economic crisis and media coverage which often persons with hearing impairment were not carried along. Corona Virus-induced changes, made persons with hearing impairment to go through stages of coping that must correspond to their characteristics. Unfortunately, COVID-19 pandemic made it difficult even to communicate with members of the deaf community as movement was restricted and the pandemic required a new vocabulary that is hitherto unknown in sign language thereby making public enlightenment difficult among persons with hearing impairment

The experience of past outbreak indicated that changes in the human psyche correlate with isolation. To be restricted in an environment during pandemic make individuals generally experience a range of negative emotions such as fear of their parents, siblings and other close relations and friends getting infected, aggression, anxiety, and fear of future chaos. One can only imagine the implication of this scenario on members of the deaf community. They suffer permanent stress during the period of the confinement as well as feelings of loneliness, and uncertainty. The situation was aggravated by not necessarily adequate information and awareness.

Hearing loss and its impact on oral communication can impair social interaction and thus lead to various types of mental disorder. COVID-19 has damaging impact on people with hearing impairment owing to sensory limitations to process information and express their feelings, members of the deaf community experience a wide range of psychological traits that make them more

vulnerable than their hearing peers. This has far-reaching consequences that are job-related and bother on social adaptation strategies.

Challenges of Persons with Hearing Impairment during COVID-19

Persons with hearing impairment are faced with the following challenges as COVID-19 continues to ravage according to Naami & Mfoafo-M'Carthy (2020):

Lack of proper sign language: A universal signing vocabulary does not exist for the new SARS-CoV-2 virus. Sign language is the first language understood by the deaf community. As per different levels of understanding, written language does not convey information and can perpetuate misinformation leading to misguided actions. During the COVID-19 era, touching the face and the mouth is discouraged to prevent the transmission of coronavirus. Due to this, the essence of sign language is lost, missing important information. The general population dealing with the deaf community is unaware of the sign language except for few close contacts and instructors. The frontline warriors providing essential services do not have time to learn a new language for helping the deaf community.

Sign language interpreters, familiar with the new vocabulary for the SARS-CoV-2 virus, should be there at all press releases and official government announcements regarding the pandemic. This will help the deaf and hearing-impaired population to understand the current scenario of the pandemic and preventive measures against the disease.

At press conferences, sign language interpreters are often the only persons without a face mask because sign language requires the use lips and facial expression when signing for persons with hearing impairment. It is recommended that a transparent screen may be provisioned for ensuring safety and providing unobstructed view to the hearing impaired to facilitate understanding of lip reading.

Deaf leaders and skilled interpreters approved by the deaf community can work together to provide "live interpretations" of news on their personal social media platforms.

Lack of communication with deaf children at home: At the peak of first and second wave of COVID-19, the country was locked down. This means students with disabilities generally were sent home amid the COVID-19 pandemic.

Meanwhile, most of the parents are unable to fully communicate with their deaf children because they are not fluent in sign language. It is likely that these children are experiencing confusion, anxiety, and depression due to the coronavirus scare and the absence of familiar environment due to the lockdown.

Appropriate arrangements should be made for deaf instructors and sign

language interpreters in schools who can conduct sign language classes on weekends for parents. They can provide guidance to the children's parents and children on how they could be prepared mentally and emotionally to deal with the pandemic. This can help the deaf students to continue the study at home. Instructors can train parents for using additional visual resources with their deaf children such as reading storybooks or doing hands-on activities using sign language.

People should be made aware of the availability of surgical masks with see-through window panel showing the wearer's mouth. Innovations are being provided through YouTube channels to create do-it-yourself masks with clear windows. These masks should be monitored for cost-effectiveness by the government.

Barriers related to health-care system: Hearing-impaired and deaf population face challenges due to lack of consultation with health-care providers, including testing for hearing as facilities are overwhelmed with COVID-19 and other emergency conditions. By extension, little or no attention is given towards addressing health challenges of individuals with hearing impairment. Further, there are restrictions on getting an interpreter or a family member to accompany them to health facility due to the lockdown measures. All these can lead to confusion and stress on the hearing impaired.

Assistive devices used by individuals hearing impairment need constant maintenance. Many people who wear hearing aids have damaged their devices or lost them because most masks are worn behind the ears. The lack of availability of services for fitting and maintenance of these devices plus lack of batteries are preexisting barriers in many low-income settings. Because of the movement restrictions imposed to curtail the spread of COVID pandemic, these services are shut, causing extreme inconvenience to the users.

Doffing for personal protective equipment (PPE) kits used by health-care personnel has strict protocols to be observed, which makes it difficult for personnel to doff the PPE for communication to address the problems of persons with hearing impairment. The long hours on queues seeking for medical consultation is enough frustration for persons with hearing impairment.

Implications for Equity and Inclusion

The principle of equity **relates to fairness**. The principle recognises that some persons are more disadvantaged than others in being able to access services and facilities. It is therefore a responsibility to address this lack of equity (Eloquent, On

2020). On the other hand, disability inclusion entails understanding the relationship between the way people function and the extent they participate in the affairs of society and ensuring that everyone has equal opportunities to participate in every aspect of life to the best of their abilities and desires (National Center on Birth Defects and Developmental Disabilities, 2020).

Disability inclusion allows people with disabilities (PWDs) to benefit from the opportunities that are available for people without visible disability in the health promotion and prevention programs to experience same. This implies that activities must be outlined to ensure fairness and equal distribution of opportunities for all including individuals with hearing impairment all sectors of the society amidst COVID-19 pandemic. Specifically, COVID-19 has the following implications on persons with hearing impairment as discussed by :

Facemask: The new normal under COVID-19 pandemic is wearing facemasks to prevent disease transmission. As a result of this preventive measure, members of the deaf community feel excluded from full participation in most affairs of society. This is because persons with hearing impairment rely largely on sign language in combination of lips reading and facial expressions for full comprehension of what is being communicated. While, those with hearing aids or cochlear implants during rehabilitation rely on lips reading to better procession of sound and to comprehend what is being heard. Anyone with hearing impairment will have difficulty with muffled speech due to facemask. This implies that the use of face masks affect the extent to connect and relate with members of the deaf deaf community.

Facial masks worn by essential service workers, health functionaries, and public service providers pose a barrier for the hearing impaired in getting essential services such as groceries, health care and other essential public services.

Lack of information: Persons with hearing impairment are deprived of accurate and reliable information on COVID-19 due to lack of availability of sign language specialists during lockdown and inability to comprehend lips reading and facial expression due to masks in direct communication. The public should be aware of recognition, reporting, and containment of COVID-19 to bring the pandemic under control.

Social Distancing: The 6-feet recommendation for physical distancing during the pandemic poses a problem for the hard of hearing population due to inaudible voice, resulting in social isolation and mental health implications. Members of the

deaf community may not understand the verbal communication by the next person and hence may not reply to them, thereby creating a feeling of social isolation. A companion or a family member, familiar with the sign language, should be there as much as possible who will help in required situations to act as a mediator.

To avoid confusion on telephonic conversations due to persons with hearing impairment used to schedule appointments, shop for grocery and attend important meetings in person to avoid confusion through telephonic conversations due to hearing impairment. However, due to the lockdown and social distancing in the COVID-19 era, all activities need to be done through phones or online, which is affecting the social, mental, and work profiles of persons with hearing impairment.

Stigma and discrimination as a barrier: Persons with hearing impairment are most often isolated on the grounds of old age, lack of hearing, hearing aid use, and sign language. They are unable to participate in conversations due to stigma, making them feel lonely and socially excluded. The implications of this are chronic stress and depression. During the pandemic, lack of information, using face mask, and inaccessible health care for the hearing impaired can add on to the pre-existing stress, making their mental health more vulnerable.

The way forward

- Government needs develop guidelines for communication with health-care providers during the COVID-19 pandemic. A list of COVID-19 resources that are available for deaf and hearing-impaired individuals should be provided including linkage to health-care facilities for emergency consultations.
- Videos providing necessary information, signs, symptoms, preventive and control measures of COVID-19 at home need to be published in sign language by the government for individuals with hearing impairment.
- A telephone line dedicated to COVID-19 matters for persons with hearing impairment and user-friendly links on the Internet for obtaining timely information from medical experts.
- There is no special arrangement to offer accessible and appropriate services to the deaf population in health institutions. Deaf leaders and sign language interpreters need to work in synergy to create a community with interpreters who are willing to volunteer their interpreting services for members of the deaf community.
- There is need for an application (software) where an operator transcribes calls/texts to individuals with hearing impairment. This can help them to

communicate with members of the larger community.

Conclusion

The recommendations require urgent responses to the vulnerable members of the deaf community. In line with the principles of equity and inclusion for PWDs, there is need for access to equitable and qualitative education and health services by all disability notwithstanding. COVID-19 is considered both a challenge and an opportunity to review and implement more inclusive legislation, policies and actions in all sectors. It is only within this framework that the core values of equality and inclusion can be ensured for PWDs.

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