The Center for Health Equity (Center) developed a set of recommendations to improve access to COVID-19 vaccinations for individuals living with disabilities. These recommendations were based on feedback from key community stakeholders with lived experience and organizations that serve communities with disabilities. While their comments specifically addressed current COVID-19 vaccination efforts, their guidance may be applied to COVID-19 testing and broader emergency response activities.

Apply a human-centered design\(^1\) approach.

- **Exceed, don’t just meet,** the legal requirements mandated by the Americans with Disabilities Act (ADA). Compliance does not always equal access. Intentionally design interventions with disabled communities in mind.

- Recruit and equitably compensate real life users who are disabled to evaluate accessibility. For example, avoid relying solely on compliance software to validate that your website code is 508 compliant. It is not the same as assessing the actual user experience.

- Be aware and mindful of intersectionality. Disabled individuals may experience additional barriers due to other personal circumstances and identities (e.g., immigration status, limited English proficiency, income level, race/ethnicity).

Ensure fair access to information and vaccination appointments.

- Offer a “text-only” version of documents and/or include ALT-TEXT (alternative text) that describes embedded images in documents. Also ensure social media posts with graphics or other images include ALT-TEXT (alternative text) or image descriptions to accommodate blind or low-vision followers.

- When creating social media video content, include closed- or opened-captioning. Avoid relying on auto-generated options through the media platforms.

- Ensure webpage/website compatibility with cell phones. Many people do not have the resources for home Internet and computers or are more familiar with using cell phones to navigate the Internet and access information online.

- For online appointment systems, ensure the vaccination appointment webpage and registration portal is compatible with screen readers. Arrange content/design code so the assistive technology (screen reader) reads the important information first (e.g., phone number for assistance).

\(^1\) Human centered design is a “creative process that starts with people and ends with innovative solutions tailored to their needs.” Definition adapted from [https://upliftfs.org/what-is-human-centered-design/](https://upliftfs.org/what-is-human-centered-design/)
• Have alternate ways to make vaccination appointments beyond an online system to accommodate those without access to the Internet or who may have trouble navigating the online system. This may include having call center operators or working with agencies that serve disabled communities to assist people with scheduling appointments.

• Provide more consistent information regarding eligibility for people with disabilities and underlying health conditions. Some doctors consider a respiratory issue a comorbidity issue, while others do not, which leads to vaccine eligibility confusion.

Ensure vaccination sites are accessible.

Transportation

• Keep accessible parking spots and other access areas clear. Oftentimes they are used for loading/unloading, set up, storage, or objects are left obstructing the path of travel, such as signage, trash bins, cones, carts, etc. because of proximity to program areas or they are the most spacious.

• Provide free Metro/bus rides, ACCESS and other paratransit service coupons (or free trips), or partner with ridesharing companies or disability organizations that offer transportation services to provide free rides for disabled individuals to and from vaccination sites. Transportation is a major barrier for some communities with disabilities.

• Accommodate ACCESS and other paratransit at vaccine sites; however, not everyone who is disabled is eligible for paratransit. Ensure all vaccine sites, including “drive-thru” sites, have a pedestrian option for disabled people.
  o Keep in mind that disabled people may live closest to a mega, drive-thru only vaccination site and can get there independently by walking/rolling or on a short ride by bus. It’s recommended to build this accessibility consideration into site selection and planning to ensure safety.
  o Ensure the path of travel from sidewalk/bus stop to inoculation area is clear and fully accessible for mobility devices and service animals, with appropriate signage throughout.

Communication

• Position access signage at sitting level, where possible, and ensure signs are large, clear, visible and unobstructed.

• Strive to have inclusive language and representation in all site signage. Use current accessibility icons (e.g., www.accessibleicon.org or ). See below for examples:

<table>
<thead>
<tr>
<th>Instead of…</th>
<th>Consider using…</th>
</tr>
</thead>
<tbody>
<tr>
<td>Handicapped Parking Only</td>
<td>Accessible Parking Only</td>
</tr>
<tr>
<td>Walk-ins Welcome</td>
<td>Onsite Registration Welcome or Same-Day Vaccinations Available</td>
</tr>
<tr>
<td>Park and Walk to Vaccination Site</td>
<td>Park and Go to Vaccination Site</td>
</tr>
</tbody>
</table>
• Add visual cues that don’t require reading (e.g. “Go to the line with the red heart-shaped balloon,” “Stand in the Moderna line, which starts where the circle is drawn in chalk on the ground”).

• Provide print handouts with content in plain language and large print. Documents should have at least 14-point to 16-point font.

• Ensure print material is readily accessible in alternate formats, including braille, large print, audio, and digital. These formats should be available, even in small amounts.

• Have speech-to-text and American Sign Language (ASL) visual interpretation services available. Lip reading should not be a substitute for appropriate language assistance in a medical setting. There are many folks who are hearing impaired that cannot read lips (plus we all have masks on!) and only about 40% of words can be lip-read in good conditions.

Support Services and Other Accommodations

• Conduct an accessibility site review when considering new vaccination sites. This may include monitoring for level, even ground (no slopes or steps), wide pathways and doorway entrances to accommodate wheelchairs and other devices, and accessible restrooms.

• Offer sheltered seating for folks with mobility or other physical disabilities when the wait times are long (or provide a fast track option). Wait time, uneven ground, lack of seating, no shelter for inclement weather, and unexpected delays act as serious barriers for folks with disabilities.

• Never assume that people with disabilities are not independent or rely on or have aides for assistance. Many folks who are physically disabled and rely permanently on a motorized wheelchair can drive their own modified vehicle and move about independently. The site cannot rely on caretakers being present.

• If there are people walking up, who are accompanied by support personnel, have space available in the waiting/observation area for both people to stay together while remaining distant from others.

• For accommodations (e.g., sources of electric power for wheelchairs), vaccination site staff should be aware and educated about these requirements. Just because there are sources of electric power, doesn’t mean the staff/volunteers realize it is okay for someone to use them.
Provide supportive customer service that treats everyone with respect.²

- Speak directly to people with disabilities; don’t avoid eye contact or speak only to their companions or caretakers. Likewise, if speaking through an ASL or other interpreter, direct your attention to the individual with the disability, not to the interpreter.

- When speaking with a person who is blind or has low vision, use specific words to give information or directions. The person may not be able to see you pointing, nodding, etc. Also remember to give directions from their perspective (e.g., your “right” might be their “left”). Offer to read printed material out loud if necessary.

- If you are speaking with a person in a wheelchair or of short stature, sit down if there is a chair available or step back a couple of paces so they don’t have to strain their neck to look up at you.

- Be patient and give full attention to people who may have difficulty communicating. Some people need more time to express themselves. If you don’t understand someone, don’t pretend you do. Ask questions to clarify.

- People may need more or less assistance than initially assumed, especially since many disabilities are not obvious. Listen, ask for instructions, and respect the person’s wishes when you are offering or are asked for assistance.

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² Adopted from Mid-Atlantic ADA Center’s Serving Customers with Disabilities Toolkit.