



NUMBERS AND PEOPLE SYNERGY

# TOOLKIT FOR THE GREATER INCLUSION OF PEOPLE WITH DISABILITIES

IN THE POST COVID-19  
WORKPLACE

## TABLE OF CONTENTS

<b>1</b>	Introduction	3
<b>1.1</b>	Disability Rights	3
<b>1.2</b>	COVID-19 effects on PWDs	4
<b>1.3</b>	Invisible disabilities in the Workplace	6
<b>1.4</b>	Disability mainstreaming in the COVID-19 pandemic	6
<b>2</b>	Making the workplace more accessible	8
<b>2.1</b>	Considerations for reasonable accommodation	8
<b>2.2</b>	Principles guiding inclusive design	13
<b>2.3</b>	Accessible Technology versus Assistive Technology	17
<b>3</b>	Conclusion	18

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This Report was prepared by Numbers and People Synergy, led by Katie Acheson, Gemma Wood and Chrissy Dumaduma.



# 01\_ INTRODUCTION

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**The United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) recognises disability as an evolving concept that results from the interaction between persons with impairments and the attitudinal and environmental barriers that hinder their full and effective participation in society on an equal basis with others.<sup>1</sup>**

An impairment does not necessarily lead to a disability when there is a completely inclusive and comprehensively accessible environment. Some causes of impairment can be attributed to several factors including, but not limited to; accidents, wars, natural disasters, congenital causes, complications during childbirth, or medical negligence. Impairments are mostly irreversible and are lifelong and must be supported by rehabilitation and habilitation. However, the causes of disability are preventable and can be addressed by identifying and removing barriers to participation; be they attitudinal, social, political, economic, communication, physical, policy, transportation, and/or programmatic.<sup>2</sup>

## 1.1\_ DISABILITY RIGHTS

Despite there being many forms and experiences of disability, there is an agreed understanding of what disability means in terms of universal human rights. The 2007 UNCRPD recognises people with disabilities (PWDs) as active subjects, capable of claiming their rights and making decisions about their lives based on their free and informed consent. The principles laid out in Article 3 of the UNCRPD are:

- A** Respect for inherent dignity, individual autonomy including the freedom to make one's own choices, and independence of persons
- B** Non-discrimination
- C** Full and effective participation and inclusion in society
- D** Respect for difference and acceptance of PWDs as part of human diversity and humanity
- E** Equality of opportunity
- F** Accessibility

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<sup>1</sup> United Nations (UN), 2007, Convention on the Rights of Persons with Disabilities: resolution/ adopted by the *General Assembly*, A/RES/61/106, available at: <https://www.refworld.org/docid/45f973632.html>

<sup>2</sup> United Nations (UN), 2007, Convention on the Rights of Persons with Disabilities: resolution/ adopted by the *General Assembly*, A/RES/61/106, available at: <https://www.refworld.org/docid/45f973632.html>

; World Health Organization (WHO), 2001, *International classification of functioning, disability and health*, WHO, Geneva.



- G** Equality between men and women
- H** Respect for the evolving capacities of children with disabilities and respect for the right of children with disabilities (CWDs) to preserve their identities.

As much as we have all the legal instruments available to protect and uphold the rights of PWDs, the barriers that PWDs face can be more frequent and have greater impact.<sup>3</sup> The World Health Organisation (WHO) describes the barriers to be more than just physical obstacles.

## 1.2\_ COVID-19 EFFECTS ON PWDS

In March 2020, the WHO declared the outbreak of a novel coronavirus disease, COVID-19, to be a pandemic, due to the speed and scale of transmission. The WHO and public health authorities around the world are taking action to contain the COVID-19 pandemic.<sup>4</sup> PWDs are impacted more significantly by COVID-19. This is as a result of barriers to implementing the recommended basic hygiene measures such as handwashing, social distancing and avoiding touching objects and surfaces. For example: handwashing materials like hand basins, hand soap dispensers, hand towels/hand dryers may be physically inaccessible, or a person may have a physical difficulty applying soap properly; enacting social distancing is difficult due to additional support needs or because the PWDs are institutionalised; touching items, surfaces or objects may be necessary to obtain information from the environment, or for physical support

People with disability may be at greater risk of developing more severe cases of COVID-19 because there are greater barriers to accessing health services and public health information. This may be due to COVID-19 exacerbating existing health conditions, particularly those related to respiratory function, immune system function, heart disease or diabetes. PWDs may also be disproportionately impacted by the outbreak because of serious disruptions to the services they rely on.<sup>5</sup> The Centre of Research Excellence in Health and Disability in Australia observed that persons with disabilities are at a greater risk, having noted the death of a disabled 16 year old boy in China who died from starvation whilst his father was quarantined in hospital.<sup>6</sup> Information about COVID-19 is often not available in formats that are accessible for the Deaf and unfortunately, not many deaf persons have access to media. As a result, the Deaf are likely to be further excluded from accessing important COVID-19 related information and therefore unable to practise preventative measures that would ensure their safety and minimise the spread of COVID-19.

<sup>3</sup> Centers for Disease Control and Prevention, *Disability and Health Data System* (DHDS), National Centre on Birth Defects and Developmental Disabilities, available at: <https://www.cdc.gov/ncbddd/disabilityandhealth/dhds/index.html>

<sup>4</sup> World Health Organisation (WHO), 2019, *Coronavirus disease* (COVID-19) pandemic, available at: [www.who.int/emergencies/diseases/novel-coronavirus-2019](http://www.who.int/emergencies/diseases/novel-coronavirus-2019)

<sup>5</sup> World Health Organisation (WHO), 2019, *Coronavirus disease* (COVID-19) pandemic, available at: [www.who.int/emergencies/diseases/novel-coronavirus-2019](http://www.who.int/emergencies/diseases/novel-coronavirus-2019)

<sup>6</sup> CRE-DH, 2020 *An Important Message About People With Disability And The Covid-19 Response 2020*, Centre of Research Excellence in Disability and Health, available at: <https://credh.org.au/covid-19-and-people-with-disabilities>



**FIGURE 1: AN ILLUSTRATION SHOWING AN INACCESSIBLE WASHING FACILITY FOR WHEELCHAIR USERS.**



Source: World Health Organisation (WHO), 2019, Coronavirus disease (COVID-19) pandemic, available at: [www.who.int/emergencies/diseases/novel-coronavirus-2019](http://www.who.int/emergencies/diseases/novel-coronavirus-2019) (accessed 15 July 2020).

**FIGURE 2: AN ILLUSTRATION SHOWING BARRIERS PWDS FACE IN PREVENTING THE NOVEL COVID 19.**



Source: World Health Organisation (WHO), 2019, Coronavirus disease (COVID-19) pandemic, available at: [www.who.int/emergencies/diseases/novel-coronavirus-2019](http://www.who.int/emergencies/diseases/novel-coronavirus-2019) (accessed 15 July 2020).

### 1.3\_ INVISIBLE DISABILITIES IN THE WORKPLACE

Workers with invisible disabilities (e.g. diabetes, depression, dyslexia) encounter unique challenges compared to workers with other concealable afflictions and workers with visible disabilities. These challenges occur not only when it comes to decisions regarding disclosure of the invisible disability in the workplace, but also in dealing with issues that may arise post disclosure. Due to the stigma associated with disabilities, employees with mental health problems report that once their mental illness becomes known, they experience discrimination from coworkers, feel socially marginalised, have to cope with negative comments from colleagues, and have to return to positions of reduced responsibility.<sup>7,8</sup> Consequently, the disclosure of disabilities in the workplace likely has implications for the individual worker's health, social relationships and work performance as well as for an employee's organisational outcomes.<sup>9</sup>

World-wide, unemployment rates among people with psychosocial disabilities range between 80% and 90%,<sup>10</sup> making this group one of the highest recipients of social security benefits in the world. Most people with these disabilities still desire and are functionally able to work<sup>11</sup>, but they are excluded from the workforce because of the stigma of disability. Limited information on mental health literacy among employers is one of the major barriers to people diagnosed with mental health and related disability, making a successful return to work or sustaining employment difficult.<sup>12</sup>

### 1.4\_ DISABILITY MAINSTREAMING IN THE COVID-19 PANDEMIC

Mainstreaming challenges discrimination by supporting basic services to ensure that PWDs are included and enjoy equal access to those services. The UN defines disability mainstreaming as a process of assessing and addressing the possible impact of any planned action on PWDs. It is a way to promote inclusion and also to address the barriers that exclude PWDs from the equal enjoyment of their human rights.<sup>13</sup>

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<sup>7</sup> Stuart, H 2006, *Mental illness and employment discrimination*, Current opinion in psychiatry, vol. 19, no 5. pp. 522-526.

<sup>8</sup> Wahl, O F 1999, *Mental health consumers' experience of stigma*, Schizophrenia Bulletin, vol. 25, no. 3, pp. 467-478.

<sup>9</sup> Santuzzi, A, Waltz, P, Finkelstein, L, Rupp, D 2014, *Invisible Disabilities: Unique Challenges for Employees and Organizations*, Industrial and Organizational Psychology.

<sup>10</sup> Kirby, M 2006, *Out of the shadows at last-transforming mental health, mental illness and addiction services in Canada*, Final Report of the Standing Senate Committee on Social Affairs, Science and Technology.

<sup>11</sup> Anthony, W A, 1994, *Characteristics of people with psychiatric disabilities that are predictive of entry into the rehabilitation process and successful employment outcomes*, Psychosocial Rehabilitation Journal, vol.17, pp. 3-14.

<sup>12</sup> Kirby, M 2006, *Out of the shadows at last-transforming mental health, mental illness and addiction services in Canada*, Final Report of the Standing Senate Committee on Social Affairs, Science and Technology.

<sup>13</sup> United Nations Relief and Works Agency (UNRWA), *UNRWA human development and humanitarian services*, United Nations Relief and Works Agency, available at: [www.unrwa.org](http://www.unrwa.org)



The WHO recommends universal measures for preventing transmission of COVID-19 that apply to all workplaces including; hand hygiene; respiratory hygiene; physical distancing; limiting work-related travels; regular environmental cleaning and disinfection; risk communication, training, and education; and management of people with COVID-19 or their contacts.<sup>14</sup> Each prevention measure in the workplace should address barriers and specifically plan for the inclusion of PWDs.

To address barriers that exclude PWDs, there is a need to keep in mind the uniqueness of each individual. As individuals spread out from the hypothetical average, the needs of individuals that are outliers, or at the margins, become ever more diverse. As such, a mass solution does not work well in all cases. It is important that one-size-fits-all configurations and designs are not used. Inclusive design recognises the importance of self-determination and self-knowledge.

Individualised risk assessment of exposure to COVID-19 and planning for preventative measures in workplaces are pivotal for creating safe work environments for all employees and the inclusion of PWDs. Since each role within a workplace will have different levels of risk, individual risk assessments should be carried out for each specific work setting and each job or group of jobs. It is vital to consider the environment, the task, the threat - if any (e.g. for frontline staff), the resources available (e.g. personal protective equipment)<sup>15</sup> and how these apply to PWDs. All workers should have equal access to protective equipment as well as to COVID-19 prevention, treatment and care, referral, rehabilitation, social protection, and occupational health services, including mental health and psychosocial supports.<sup>16</sup>

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<sup>14</sup> World Health Organisation (WHO), 2020a, *Considerations for public health and social measures in the workplace in the context of COVID-19*. Available at: <https://www.who.int/publications/i/item/considerations-for-public-health-and-social-measures-in-the-workplace-in-the-context-of-covid-19>

<sup>15</sup> World Health Organisation (WHO), 2020a, *Considerations for public health and social measures in the workplace in the context of COVID-19*. Available at: <https://www.who.int/publications/i/item/considerations-for-public-health-and-social-measures-in-the-workplace-in-the-context-of-covid-19>

<sup>16</sup> World Health Organisation (WHO), 2020b, *Preparedness, prevention and control of coronavirus disease (COVID-19) for refugees and migrants in noncamp settings*, Available at: <https://apps.who.int/iris/rest/bitstreams/1275039/retrieve>



## 02\_ MAKING THE WORKPLACE MORE ACCESSIBLE

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One of the ways of making workplaces more “accessible” to PWDs is for employers to make reasonable accommodations to meet the needs of the PWDs. Reasonable accommodations include effective measures that remove or mitigate barriers encountered by the worker. It is also important to assess the reasonableness of that accommodation. Article 2 of the UNCRPD states that “Reasonable accommodation means necessary and appropriate modification and adjustment not imposing a disproportionate or undue burden”.<sup>17</sup> Disproportionate burden and undue hardship convey the idea that employers can be expected to incur some expense or inconvenience when making adjustments and accommodations. Some factors that are commonly used to assess whether a requested accommodation would pose a disproportionate burden include: the cost of the accommodation; the size and economic turnover of the enterprise that provides the accommodation; functioning and structure of the organisation; whether the accommodation benefits more people than the individual making the request; the existence of public funding, which could cover or reimburse the employer for the partial or total cost of the accommodation; occupational safety and health requirements; and the anticipated duration of the employment relationship.<sup>18</sup> If a worker has been hired on a short or temporary contract, then the employer may not be expected to invest in major changes unless these changes would benefit other workers.

### 2.1\_ CONSIDERATIONS FOR REASONABLE ACCOMMODATION

It is within an employee’s rights under Article 5 of the UNCRPD to request reasonable accommodations be made to a workplace to be able to perform job functions. Reasonable accommodations will include technical solutions, working arrangements, training measures and awareness raising measures.<sup>19</sup> While physical considerations such as installing ramps, appropriate furniture and the like may be common practice it is also important to consider the wider implications of creating reasonable accommodations. Open plan work environments can overstimulate people with auditory and visual sensitivities. For such people, consider creating quiet working spaces, set aside workstations that do not face open spaces and have no visual stimulus like bright colours or moving objects.

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<sup>17</sup> United Nations (UN), 2007, *Convention on the Rights of Persons with Disabilities: resolution/* adopted by the General Assembly, A/RES/61/106, available at: <https://www.refworld.org/docid/45f973632.html>

<sup>18</sup> International Labour Organization, 2016, *Promoting Equity Promoting Diversity And Inclusion Through Workplace Adjustments A Practical Guide*, International Labour Office, Geneva.

<sup>19</sup> European Commission, *Reasonable accommodation for people with disabilities*, Employment, Social Affairs & Inclusion, available at: <https://ec.europa.eu/social/main.jsp?catId=1473>





Team communication and training options should also be reviewed when providing reasonable accommodation. If training is currently undertaken in oral presentation format only, consider written or visually diverse options. Team meetings undertaken in large groups with multiple people speaking at once may be inappropriate for some PWD. Consider alternate forms of team communication such as online chat platforms, video conferences where outside noise can be muted, or one-on-one communication channels. Providing awareness training to the whole organisation or department, not only the immediate team or supervisor, will also improve the individual's ability to perform their role and allow other employees, some who may not have disclosed their disability, to do the same.

Creating a culture of inclusion and employee self-care can address reasonable accommodations as an organisation before they may be required by an individual. For example, providing a free or discounted gym membership to all employees can address reasonable accommodation requirements for employees with specific mental health needs. Providing massage or remedial treatment options to the organisation will also support employees with chronic pain issues, in addition to creating a wellbeing benefit to the wider team.

Working from home arrangements have become commonplace during the COVID-19 pandemic. Employers must now reasonably consider accommodations for employees within home environments. Not all employees will be affected by their disability at home in the same way they do in an office environment.<sup>20</sup> Starting with existing workplace support plans and adapting these to the home environment will identify additional health and safety considerations. These may include: providing a cleaning service to ensure the workspace is clear and safe; allocating a support worker or family member with whom to liaise, with the permission of the employee; providing coaching and training on new working environments; or making mental health professionals available to address increased anxiety and isolation of the working from home environment.

Employers will also be required to support preventative measures in the workplace and working from home environments to stop the spread of COVID-19. Along with workplace safety checklists, employers should: make sure employees have space to stay at least 1.5m apart from others; keep surfaces clean in the office, kitchens and bathrooms; be aware of employee journeys to work; manage appropriate spacing in lifts and group areas; and work to reduce the number of face-to-face meetings, using video conferencing where possible.<sup>21</sup>

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<sup>20</sup> Australian Government, *Managing work from home arrangements for employees with disability*, Australian Public Service Commission, available at: <https://www.apsc.gov.au/managing-work-home-arrangements-employees-disability>

<sup>21</sup> Safe Work Australia, *COVID-19 for Workplaces Pack*, Safe Work Australia, available at: <https://www.safeworkaustralia.gov.au/covid-19-print-pack/915/733>



### 2.1.1\_ WHY SHOULD EMPLOYERS PROVIDE REASONABLE ACCOMMODATION?

Providing reasonable accommodation is a key measure to promote diversity in the workplace and there is clear and increasing evidence that diversity can improve the performance and competitiveness of a business. A diverse workforce that is comfortable communicating varying points of view provides a larger pool of ideas and experiences. This enables an organisation to be more innovative in planning and problem-solving. A diverse collection of skills and experiences (e.g. languages and cultural understanding) allows an organisation to provide better service to customers, both locally and globally. Organisations with a good reputation for sensitivity, diversity and accommodation increase their market share with consumers from a wide range of backgrounds. Organisations that value diversity and maintain an inclusive workplace culture may improve the retention of workers with diverse backgrounds and enhance their loyalty to the organisation. In turn, this will reduce the costs associated with employee turnover, recoup the investment in training, and sustain institutional memory.

### 2.1.2\_ WORKPLACE ACCOMMODATION FOR PEOPLE WITH INVISIBLE DISABILITIES

Invisible disability is a term that captures a whole spectrum of hidden disabilities or challenges that may not be immediately apparent to others.<sup>22</sup> Invisible disabilities may include autism spectrum disorder, depression, diabetes, and learning and thinking differences such as ADHD and dyslexia. Invisible disabilities can also include symptoms such as chronic pain, fatigue, and dizziness.<sup>23</sup>

The 2019 Disabilities and Inclusion study found that only 39% of employees with disabilities disclosed these to their manager, even less disclosed to their teams (24%) and Human Resources (21%) and only 4% have revealed their disability to clients.<sup>24</sup> For most jurisdictions, there is no legal obligation for a person with a disability to disclose their disability unless it effects their ability to; work safely, meet inherent requirements of the job, or the safety of co-workers.<sup>25</sup> Therefore, it is important to create an inclusive work environment that is not reliant on self-identification or disclosure.

Some recruitment and selection processes provide individuals with the opportunity to disclose their disability by including questions like “Do you have any special requirements to assist you to attend the interview?”. Employers need to have clear procedures in place if a candidate or employee discloses a disability, taking time to consider the situation and consulting with a specialist if needed.<sup>26</sup>

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<sup>22</sup> Disabled World 2014, *Invisible Disabilities: List and General Information*, available at: <https://www.disabled-world.com/disability/types/invisible/>

<sup>23</sup> Kelly, K 2019, *Understanding Invisible Disabilities in the Workplace*, available at: <https://workplaceinitiative.org/understanding-invisible-disabilities-in-the-workplace>

<sup>24</sup> Centre for Talent and Innovation, 2019. *Disabilities and Inclusion: US findings*, available at: <https://www.talentinnovation.org/publication.cfm?publication=1590>

<sup>25</sup> Government of Western Australia, *Disability disclosure*, Department of Communities, available at: <http://www.disability.wa.gov.au/business-and-government/1/business-and-government/employing-people-with-disability----disability-services-commission-disability-wa/recruitment-and-selection/disability-disclosure/>

<sup>26</sup> Haynes, S & Linden, M 2012, *Workplace accommodations and unmet needs specific to individuals who are deaf or hard of hearing*, *Disability and Rehabilitation: Assistive Technology*, no. 7, pp. 408-415.



### 2.1.3\_ EXAMPLES OF ACCOMMODATION FOR PEOPLE WITH INVISIBLE DISABILITIES

A study of supervisors who had successfully employed individuals with autism found that a specific set of accommodation strategies were commonly associated with the successful supervision of these employees. These strategies included maintaining a set of job responsibilities, having consistent work schedules, using organisers to structure the job in order to reduce idle or unstructured time, being direct when communicating with the employee, and providing reminders and regular reassurances.<sup>27</sup>

For people with conditions like Aspergers syndrome, accommodation practices may include: providing in advance, notice of topics to be discussed in meetings to help facilitate communication; providing advanced notice of the date and time of a meeting; allowing employees to provide written response in lieu of verbal response; and allowing employees to have a co-worker attend meetings to reduce anxieties.<sup>28</sup>

For employees with young-onset Alzheimer's disease or dementia, accommodations suggested by the Alzheimer Society of Canada include: providing a quiet working environment; maintaining a familiar work routine; providing calendars and to-do lists; relying on old competencies rather than assigning tasks requiring new competencies; and reassigning tasks that are too difficult.<sup>29</sup> Another accommodation measure is the use of "work-buddies" - employees who have undergone dementia training and work alongside a co-worker with young-onset dementia.<sup>30</sup>

For people with severe psychosocial disabilities, research evidence indicates that supported employment is an effective strategy of accommodation and inclusion. A systematic review of 11 randomised controlled trials, conducted in the United States and comparing prevocational training or supported employment for people with severe psychosocial disabilities with each other or with standard community care, found that supported employment is more effective than prevocational training at helping people with severe psychosocial disabilities who desire to work to obtain and keep competitive employment. Prevocational training included sheltered workshops, transitional employment in a rehabilitation agency, and skills training activities. Supported employment involved placing clients in competitive jobs (open to anyone to apply and paid at the market rate) "without extended preparation and provides on the job support from trained 'job coaches' or employment specialists".<sup>31</sup>

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<sup>27</sup> Hagner, D & Cooney, B F 2005, *I Do That for Everybody: Supervising Employees With 32 Autism*, Focus on Autism and Other Developmental Disabilities, no. 20, pp. 91-7.

<sup>28</sup> Australian Government, 2006, *Employment of People with disability in the APS*, Australian Public Service Commission, available at: <https://www.apsc.gov.au/part-1-information>

<sup>29</sup> Fitzpatrick, J 2011, *Early Onset Alzheimer's Disease in the Workplace*, Occupational Health & Safety, available at: <https://alz-journals.onlinelibrary.wiley.com/doi/full/10.1002/alz.12068>

<sup>30</sup> Robertson, J, Evans, D & Horsnell, T 2013, *Side by side: a workplace engagement program for people with younger onset dementia*, Dementia, no. 12, pp. 666-74.

<sup>31</sup> Crowther, R E, Marshall, M, Bond, G R, & Huxley P 2001, *Helping People with Severe Mental Illness to Obtain Work: Systematic Review*, British Medical Journal 322, no. 7280, pp. 204-208.



For people with multiple chemical sensitivities, accommodation practices can be: develop fragrance-free workplace policies; discontinue the use of fragranced products; use only unscented or less toxic cleaning products; provide scent-free meeting rooms and restrooms; maintain good indoor air quality; modify workstation locations; allow for fresh air breaks; and provide an air purification system.<sup>32</sup>

For workers with sleep disorders, including insomnia, sleep apnoea and shift work disorder, treatments can include behavioural, prescription and non-pharmacological therapies.<sup>33</sup> Associated job accommodation measures focus on time management. The employer may allow for flexible start times, combine regularly scheduled short breaks into one longer break or allow the employee to work one consistent schedule. In some cases, a place for an employee to rest during break-times could be made available. Other possible solutions are to provide an alarm device to keep the employee alert or provide work areas with large amounts of sunlight or other natural lighting.

For people with epilepsy, accommodation practices to manage photosensitivity can entail a flicker-free monitor (LCD display, flat screen), a monitor glare guard or a cubicle shield. Other steps are to allow frequent breaks from tasks involving a computer, provide alternative light sources, or use natural lighting sources (windows) instead of electric lights.<sup>34</sup> Other measures can include job sharing, flexible working hours and temporary reassignment of duties or customised employment (i.e. alternative and specific task assignment).<sup>35</sup>

For employees with obsessive compulsive disorder (OCD), accommodation measures may involve: coaching or time management sessions; awareness programs in the workplace; job sharing and modified work schedule; work-at-home options and having a mentor at work.<sup>36</sup> Similarly, for people with panic and anxiety attacks, a recommended technique is to encourage the use of stress management techniques to deal with frustration. Accommodation may also allow: the presence of a support animal at work; telephone calls during work hours to doctors and others for needed support; and for the employee to take a break and go to a place where s/he feels comfortable to use relaxation techniques or contact a support person. Another step might be to identify and remove environmental triggers such as particular smells or noises.<sup>37</sup>

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<sup>32</sup> Gibson, P R & Lindberg, S 2007, *Work accommodation for people with multiple chemical sensitivity*, Disability & Society, no. 22, pp. 717-32.

<sup>33</sup> Basner, R C, 2004, *Shift-work sleep disorder – The glass is more than half empty*, The New England Journal of Medicine, 353, pp. 519-21; Schwartz, J R & Roth, T 2006, *Shift work sleep disorder: burden of illness and approaches to management*, Drugs, no. 66, pp. 2357-70; Thorpy, M 2011, *Understanding and diagnosing shift work disorder*, Postgraduate Medicine, no. 123, pp. 96-105.

<sup>34</sup> Whetzel, M. 2013, *Employees with Alzheimer's Disease*, Job, Morgantown.

<sup>35</sup> Luecking, R G 2008, *Emerging employer views of people with disabilities and the future of job development*, Journal of Vocational Rehabilitation, no. 29, pp. 3-13; Jacoby, A, Gorry, J & Baker, G A 2005, *Employers' attitudes to employment of people with epilepsy: Still the same old story?*, Epilepsia, no. 46, pp. 1978-87.

<sup>36</sup> Neal-Barnett, A & Mendelson, L L 2003, *Obsessive compulsive disorder in the workplace: an invisible disability*, Women and Therapy, no. 26, pp. 169-79.

<sup>37</sup> Loy, B & Whetzel, M 2014, *Employees with Mental Health Impairments. Morgantown, WV: Job Accommodation Network*, Office of Disability Employment, US Department of Labor, Washington.



For people with systemic autoimmune diseases such as Lupus, accommodation measures may centre on reducing or eliminating physical exertion and workplace stress. This can involve: periodic rest breaks away from the workstation; scheduling flexible work and flexible use of leave time; and allowing work from home. It might also involve providing a scooter or other mobility aid if walking cannot be reduced.

For people with inflammatory bowel disease such as ulcerative colitis or Crohn's Disease, treatments include medications, surgery and special diets. At the workplace, reasonable accommodations may include: a parking space close to the place of work; adequate and accessible toilet facilities with sufficient ventilation, private cubicles or separate facility; and flexibility in working arrangements to allow frequent toilet breaks when required. All these practices are facilitated by a knowledgeable and supportive work environment.<sup>38</sup>

## 2.2\_ PRINCIPLES GUIDING INCLUSIVE DESIGN

There are seven principles guiding inclusive design and these are: equitable use; flexibility in use; simple and intuitive use; perceptible information; tolerance for error; low physical effort; and size and space for approach and use. Legislation often requires all workplaces to readily facilitate workers of all physical abilities. Despite legislative support and prevalence of inclusive design principles, many workplaces are designed with little thought for the day-to-day needs of workers with disabilities, simply ticking boxes without looking at the bigger picture.

The accommodation solutions identified in this report are a sample of possibilities available and many other may exist. Height adjustable desks, easily adjustable monitor arms and readily accessible power modules are just some of the examples of products that can make a huge difference to the workplace, making it accessible and inclusive to all employees, no matter what their physical abilities.

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<sup>38</sup> Crohn's and Colitis UK 2014, *Employment and IBD: a guide for employers*, available at: <https://s3-eu-west-1.amazonaws.com/files.crohnsandcolitis.org.uk/employment-and-IBD-employers.pdf>



### 2.2.1\_ HEIGHT ADJUSTABLE WORKSTATIONS

Having the ability to raise or lower the height of a desk can make a significant difference to the comfort of any employee. Easily adjustable sit/stand workstations can quickly and simply adapt to the working needs of the employer, making it accessible for everyone.

**FIGURES 3, 4, 5: DESIGNS OF A WORK TABLE, SIDE FILING CABINET, AND WALL CABINET. THE WORK TABLES ARE ADJUSTABLE.**



Sources: Soraj, P & Chaturong, L 2018, A study and development of workplace facilities and working environment to increase the work efficiency of persons with disabilities: a case study of major retail and whole companies in Bangkok, available at: <https://www.hindawi.com/journals/tswj/2018/3142010/>

CMD, Is your office disability-friendly?, CMD, available at: <https://www.cmd-ltd.com/advice-centre/original-research/office-disability-friendly/>





### 2.2.2\_ ACCESSIBLE PLUG SOCKETS

Crawling under desks to locate a free plug socket is inconvenient for workers, but for those with limited mobility it can be impossible. This problem can be alleviated by investing in desk-top plug sockets, or modules, that fit directly into the surface of the desk.

**FIGURES 6, 7 8: DESIGN OF GUARDRAILS AND BARRIERS, ELECTRIC SWITCHES, MOBILE AND EQUIPMENT STORAGE COMPARTMENTS (FOR CANES OR SLATES) FOR THE VISUALLY IMPAIRED.**



Source: Soraj, P & Chaturong, L 2018, A study and development of workplace facilities and working environment to increase the work efficiency of persons with disabilities: a case study of major retail and whole companies in Bangkok, available at:

<https://www.hindawi.com/journals/tswj/2018/3142010/>

CMD, Is your office disability-friendly?, CMD, available at: <https://www.cmd-ltd.com/advice-centre/original-research/office-disability-friendly/>



### 2.2.3\_ EASILY ADJUSTABLE MONITOR ARMS

Spring or gas assisted monitor arms can be adjusted by a simple fingertip touch, making them light and easy to position for optimum visibility and comfort.

**FIGURE 9: AN IMAGE SHOWING AN ADJUSTABLE MONITOR ARM.**

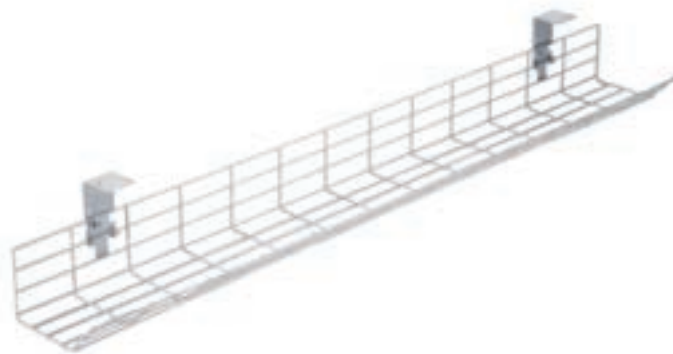


Source: CMD, Is your office disability-friendly?, CMD, available at: <https://www.cmd-ltd.com/advice-centre/original-research/office-disability-friendly/>

### 2.2.4\_ CABLE MANAGEMENT

Trip hazards are not only of a concern to the visually impaired and wheelchair users, they may also be a hazard to even those who do not have mobility challenges. This problem can be rectified by considering using under desk cable trays or desk risers to house any trailing cables.

**FIGURE 10: AN IMAGE SHOWING CABLE TRAY.**



Source: CMD, Is your office disability-friendly?, CMD, available at: <https://www.cmd-ltd.com/advice-centre/original-research/office-disability-friendly/>





## 2.3\_ ACCESSIBLE TECHNOLOGY VERSUS ASSISTIVE TECHNOLOGY

Assistive Technology (AT) refers to equipment or devices that are specifically used to increase, maintain, or improve the functional capacities of individuals with disabilities. Examples include: alternate input devices that enable control of computers through means other than a standard keyboard (braille keyboards or displays); colour-coding, a mouse; sign language apps; and screen readers that allow people who have a visual impairment to hear functions on their computer by converting the screen display to digitised speech.<sup>39</sup>

Accessible Technology can be used by people with a wide range of abilities and disabilities. Each user is able to interact with the technology in ways that work best for them. In practice, many people find that the best immediate workplace solutions may involve a combination of mainstream ICT solutions and AT solutions.

Making the organisation's website accessible to people with disabilities requires improving the experiences of users and employees with disabilities. Featuring the organisation's use of assistive technology in a prominent location on the organisation's home page and on other digital platforms makes a bold statement that emphasises an organisation's commitment to getting on the path to accessibility.

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<sup>39</sup> PEAT, *Accessibility and Employment: What people with disability need to know*, Partnership on Employment & Accessible Technology, available at: <https://www.peatworks.org/content/accessibility-and-employment-what-people-disabilities-need-know>



## 03\_ CONCLUSION

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The COVID-19 pandemic has focussed global attention on the safety of workplaces for all employees. Additional measures need to be taken to ensure that new workspaces are accessible and inclusive for PWDs. The pandemic also presents the opportunity for change within workplaces. Companies, businesses and organisations will thrive if they can successfully attract and retain the best possible staff. Failing to consider the practicalities required to facilitate PWDs, limits the chances of companies and businesses from employing a significant percentage of highly qualified and talented candidates. In addition, failure to consider limits the ability of organisations to cater to those employees who may not have had a disability when they entered the workforce but do post COVID\_19. Employers need to be aware that not all people with a specific visible or invisible disability will need accommodations to perform their jobs and others may only need minor accommodations.

There are clear guidelines and tools to accommodate people with disabilities in the workplace. Addressing negative attitudes or stereotypes, publicly communicating diversity and inclusive policies to customers and job seekers, and providing disability sensitive training will help create a more inclusive atmosphere. Facilitating knowledgeable and supportive work environments addresses the barriers that exclude PWDs from the equal enjoyment of their human rights<sup>40</sup> and will create an inclusive environment for all.

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<sup>40</sup> United Nations Relief and Works Agency (UNRWA), *UNRWA human development and humanitarian services*, United Nations Relief and Works Agency, available at: [www.unrwa.org](http://www.unrwa.org)





**NAPS**

NUMBERS AND PEOPLE SYNERGY