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The Voices and Quality of Life of Selected Filipino Persons with Disabilities (PWDs) amidst Pandemics and Disasters*

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Abstract

Aim: This research explored the multifaceted challenges faced by Persons with Disabilities (PWDs) during crises, focusing on their psychological, social, and economic well-being. It sought to understand the barriers to service accessibility and the systemic issues that exacerbate their vulnerability while identifying opportunities for improving inclusivity and resilience in disaster and pandemic responses.

Methodology: The study utilized a qualitative research design, employing purposive sampling to conduct in-depth interviews with PWDs residing in Metro Manila. The data were thematically analyzed, revealing recurring themes that highlight the lived experiences and adaptive strategies of PWDs.

Results: Key themes included the psychological toll of isolation and disrupted routines, significant accessibility barriers to essential services, economic challenges stemming from job losses and increased disability-related expenses, and heightened vulnerability to abuse during crises. Furthermore, findings underscore the lack of disability-specific budget allocations and representation in local governance disaster councils, which compound the systemic neglect of PWDs during disasters.

Conclusion: While PWDs demonstrate remarkable resilience, systemic gaps in governance, service delivery, and representation hinder their quality of life during pandemics and disasters.

Recommendation: Recommendations include enhancing psycho-social support systems, ensuring inclusive budgeting and governance processes, strengthening food and resource distribution mechanisms, and institutionalizing permanent representation of PWDs in disaster councils. These measures aim to foster a more inclusive and rights-based approach to disaster preparedness and pandemic response. This study underscores the importance of amplifying the voices of PWDs to inform policies and practices that uphold their rights and enhance their resilience during crises.

Keywords: *Persons with disabilities, quality of life, pandemics, disasters, inclusivity*

* The research has been presented and discussed in various academic and research fora. It was presented at the RESCON Research Conference on Quality, held on December 2-3, 2021, via Zoom, and organized by the Philippine Society for Quality (PSQ). The paper was also discussed during the BBMC 30th Founding Anniversary Research Forum, conducted on September 10, 2021, and organized by BBMC, U.N., and NGOs. Additionally, it was presented at the 1st National Research Conference, organized by Parañaque City College on December 2-3, 2021. These events provided platforms for highlighting the challenges, experiences, and resilience of Filipino PWDs during pandemics and disasters.

INTRODUCTION

Pandemics and disasters are profound crises that disrupt societies, exacerbate inequalities, and disproportionately affect vulnerable populations. Among these are persons with disabilities (PWDs), whose unique needs often remain

244



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overlooked in planning and response efforts. This study focuses on the quality of life of Filipino PWDs amidst pandemics and disasters, investigating how these events impact their well-being, access to services, and social inclusion.

Persons with disabilities face compounded vulnerabilities during crises due to pre-existing barriers in health, social, and economic systems. The 2009 H1N1 influenza pandemic, for instance, highlighted systemic gaps in providing accessible healthcare and reliable public information for PWDs (Kuper et al., 2020). Similarly, disasters such as Typhoon Haiyan in the Philippines exposed deficiencies in disaster preparedness, with many evacuation centers lacking accessible facilities and support services for PWDs (Narayanan, 2018). These instances underline the persistent exclusion of PWDs from emergency response planning, despite their increased risks during such events.

In the Philippine context, frequent natural disasters and public health emergencies have underscored the urgent need for inclusive frameworks that address the unique challenges faced by PWDs. However, the intersection of disability, pandemics, and disasters remains underexplored, leaving critical gaps in understanding and intervention. This study aims to fill these gaps by examining the lived experiences of Filipino PWDs, offering insights into how policy and practice can better support their quality of life in times of crisis.

Background of the Study

The vulnerability of persons with disabilities during pandemics and disasters stems from a combination of social, environmental, and institutional factors. Globally, PWDs experience barriers in accessing healthcare, information, and support services during emergencies. These barriers not only jeopardize their immediate safety but also exacerbate long-term inequities in health, economic stability, and social inclusion (United Nations, 2019).

In the Philippines, where natural disasters are a frequent occurrence, the challenges for PWDs are magnified. Studies have shown that during typhoons, earthquakes, and other calamities, PWDs often struggle to access evacuation centers, which are typically not designed with accessibility in mind (Stough & Kelman, 2017). Additionally, the lack of inclusive communication strategies during disasters leaves many PWDs uninformed about critical safety measures, placing them at greater risk (Naraya, 2018). The 2013 Typhoon Haiyan disaster revealed significant gaps in addressing the needs of PWDs, with many unable to evacuate due to mobility challenges or lack of transportation (Kuper et al., 2020).

Similarly, pandemics present unique challenges for PWDs. For example, during the 2009 H1N1 pandemic, many PWDs faced difficulties in accessing healthcare and preventive measures due to systemic inequities in public health systems (Sabatello et al., 2020). This was further compounded by economic instability, as many PWDs rely on informal employment, which is often disrupted during public health emergencies (United Nations, 2019).

Despite these well-documented challenges, there remains a significant research gap in understanding how pandemics and disasters affect the quality of life of PWDs, particularly in low- and middle-income countries like the Philippines. Most existing studies focus on broader populations, leaving the unique experiences of PWDs underrepresented. This research aims to address this gap by exploring the lived experiences of Filipino PWDs during pandemics and disasters, identifying the systemic barriers they face, and proposing recommendations for more inclusive policies and practices.

Significance of the Research

The significance of this research lies in its potential to contribute to academic discourse, public policy, and practical applications in addressing the needs of persons with disabilities (PWDs) during pandemics and disasters. While PWDs represent a significant and diverse portion of the global population, their unique experiences and vulnerabilities are often overlooked in disaster preparedness, response, and recovery frameworks. This study, focusing on Filipino PWDs, provides valuable insights into the intersection of disability, pandemics, and disasters, which can drive more inclusive and equitable strategies in multiple domains.



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1. Contribution to Academic Knowledge

This research bridges critical gaps in existing literature by exploring the specific impacts of pandemics and disasters on the quality of life of Filipino PWDs. Previous studies have largely concentrated on general population dynamics or have inadequately addressed the nuanced challenges faced by PWDs, particularly in low- and middle-income countries. By offering empirical evidence, this study enriches the academic discourse on disability and disaster management, providing a localized perspective that complements global research (Kuper et al., 2020; Narayanan, 2018).

2. Implications for Policy Development

The findings of this research can inform public policy aimed at promoting disability inclusion in disaster and pandemic management frameworks. Policymakers can use these insights to design more effective and accessible interventions, ensuring that PWDs are not marginalized in future crises. For instance, understanding the barriers faced by PWDs in accessing healthcare, evacuation centers, and economic support can lead to the development of inclusive disaster risk reduction (DRR) policies and pandemic preparedness plans aligned with international frameworks such as the Sendai Framework for Disaster Risk Reduction and the UN Sustainable Development Goals (United Nations, 2019).

3. Practical Applications for Service Providers

This study has practical implications for organizations and institutions involved in disaster and pandemic response. Non-governmental organizations (NGOs), healthcare providers, and community-based organizations can use the research findings to enhance their service delivery, ensuring it aligns with the specific needs of PWDs. For example, the study may highlight the importance of accessible communication strategies, such as the inclusion of sign language interpreters and other adaptive communication tools during emergencies.

4. Empowerment of Persons with Disabilities

By documenting the lived experiences of PWDs during crises, this research amplifies their voices and promotes their active participation in shaping inclusive responses. It underscores the importance of involving PWDs in the planning and implementation of disaster and pandemic strategies, fostering a sense of agency and community empowerment.

5. Socioeconomic Benefits

This research addresses the economic and social challenges faced by PWDs during pandemics and disasters, offering recommendations to reduce inequalities and improve their quality of life. Inclusive strategies derived from this study can help mitigate the disproportionate economic and social impacts on PWDs, fostering resilience and equity within communities.

6. Global Relevance

Although focused on the Philippines, the findings of this research have broader applicability to other countries with similar socio-economic and geographic profiles. Insights from this study can serve as a model for addressing the challenges of PWDs in disaster-prone and resource-limited settings worldwide, contributing to the global discourse on disability-inclusive disaster risk reduction and public health management.

Definition of Key Terms

To ensure clarity and consistency in this research, the following key terms are defined based on academic and operational contexts. These definitions provide a foundational understanding of the terms as they are used in this research, ensuring clarity and alignment with academic and practical contexts.

1. Persons with Disabilities (PWDs). Individuals who have long-term physical, mental, intellectual, or sensory impairments that, in interaction with various barriers, may hinder their full and effective participation in society on an equal basis with others (United Nations, 2006). This research specifically focuses on Filipino PWDs, whose experiences are shaped by the Philippine socio-cultural and economic context.

2. Quality of Life. A multi-dimensional concept encompassing physical, mental, emotional, and social well-being. It refers to the standard of health, comfort, and happiness experienced by an individual or group. For PWDs, quality of

246



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life is significantly influenced by access to healthcare, social inclusion, economic stability, and support systems (Kuper et al., 2020).

3. Pandemics. Widespread outbreaks of infectious diseases that affect populations globally or over a large geographic area. Pandemics pose unique challenges for PWDs, particularly regarding healthcare access, public health communication, and economic stability (World Health Organization, 2019).

4. Disasters. Severe disruptions to a community or society caused by natural or human-made hazards, resulting in significant human, material, economic, or environmental losses. Disasters in this context include typhoons, earthquakes, floods, and other calamities common in the Philippines, which disproportionately impact PWDs (Stough & Kelman, 2017).

5. Disability-Inclusive Disaster Risk Reduction (DiDRR). An approach to disaster risk reduction that integrates the needs, rights, and perspectives of PWDs into policies, practices, and decision-making processes. DiDRR aims to reduce the vulnerabilities of PWDs and enhance their resilience in disaster scenarios (United Nations Office for Disaster Risk Reduction, 2015).

6. Accessibility. The design of products, devices, services, or environments to ensure they are usable by all individuals, including those with disabilities. In this study, accessibility refers to physical, informational, and systemic features that enable PWDs to navigate emergencies effectively (Narayanan, 2018).

7. Inclusive Communication. The practice of ensuring that information is accessible to all, including individuals with disabilities. This involves the use of formats such as sign language, Braille, easy-to-read materials, and visual aids to facilitate understanding during pandemics and disasters (World Health Organization, 2021).

8. Emergency Preparedness. The process of planning and implementing measures to prevent, respond to, and recover from emergencies, including pandemics and disasters. For PWDs, emergency preparedness must include considerations of mobility, communication, and access to resources (Sabatello et al., 2020).

9. Vulnerability. The degree to which a population, system, or individual is susceptible to and unable to cope with adverse effects of crises such as pandemics and disasters. PWDs are often identified as a vulnerable group due to systemic inequities and exclusionary practices (Stough & Kelman, 2017).

10. Resilience. The ability of individuals, communities, and systems to adapt and recover from disasters and pandemics. For PWDs, resilience is enhanced through inclusive policies, community support, and access to essential resources and services (United Nations, 2019).

Literature Review

The review of related literature is organized by key themes, focusing on the quality of life of Filipino persons with disabilities (PWDs) amidst pandemics and disasters. The themes include the impact of pandemics and disasters on PWDs, systemic barriers, the role of inclusivity in disaster response, and coping mechanisms and resilience among PWDs.

1. Impact of Pandemics and Disasters on Persons with Disabilities

Pandemics and disasters amplify the vulnerabilities of PWDs, affecting their access to healthcare, economic stability, and overall quality of life. Research shows that PWDs often face significant risks during crises due to pre-existing health conditions and barriers to accessing timely medical care (Narayanan, 2018). For instance, during Typhoon Haiyan in the Philippines, PWDs reported difficulty reaching evacuation centers, which were often not designed with accessibility in mind (Stough & Kelman, 2017). Similarly, pandemics such as the H1N1 influenza outbreak revealed gaps in healthcare systems that disproportionately affected PWDs, particularly those with mobility or cognitive impairments (Kuper et al., 2020).



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In addition to physical health challenges, disasters and pandemics also significantly impact the mental health of PWDs. Prolonged isolation, disrupted routines, and limited access to support networks during crises have been associated with increased rates of anxiety, depression, and stress among PWDs (Sabatello et al., 2020).

2. Systemic Barriers Faced by PWDs During Crises

Systemic barriers, including attitudinal, environmental, and institutional obstacles, exacerbate the challenges faced by PWDs during pandemics and disasters. Research by the United Nations (2019) highlights the lack of inclusive communication strategies as a critical issue, with many PWDs unable to access timely information about safety measures. In the Philippines, where disaster preparedness frameworks often fail to address the needs of marginalized groups, PWDs face additional challenges due to inadequate infrastructure and support services (Narayanan, 2018).

Institutional barriers also extend to employment and economic resilience. During crises, many PWDs lose access to income-generating opportunities, particularly those in informal sectors. This economic instability compounds the difficulties they face in meeting basic needs, such as accessing food, medication, and assistive devices (Stough & Kelman, 2017).

3. The Role of Inclusivity in Disaster Response

The integration of disability-inclusive practices in disaster risk reduction (DRR) and pandemic response frameworks is critical to improving outcomes for PWDs. Studies emphasize the importance of involving PWDs in the planning and implementation of emergency strategies to ensure that their needs are adequately addressed (Kuper et al., 2020). For example, the Sendai Framework for Disaster Risk Reduction underscores the necessity of disability-inclusive approaches, advocating for the active participation of PWDs in decision-making processes (United Nations Office for Disaster Risk Reduction, 2015).

Efforts to create inclusive disaster responses have shown promise in improving accessibility to evacuation centers, healthcare services, and information. However, significant gaps remain in the Philippines, where the implementation of inclusive policies is inconsistent and often hindered by resource constraints (Narayanan, 2018).

4. Coping Mechanisms and Resilience Among PWDs

Despite the challenges they face, PWDs often demonstrate resilience during crises through adaptive coping mechanisms and community support. Research highlights the role of social networks, including family, friends, and community organizations, in providing emotional and practical support to PWDs during disasters (Stough & Kelman, 2017). Additionally, access to assistive technologies and services can significantly enhance the ability of PWDs to navigate crises and maintain their quality of life (Kuper et al., 2020; Carvajal, 2020a, 2020b).

In the context of the Philippines, community-based disaster preparedness programs have been identified as effective in fostering resilience among PWDs. These programs emphasize the importance of training and empowering PWDs to actively participate in disaster response efforts, thereby enhancing their agency and reducing their vulnerability (United Nations, 2019).

Theoretical Framework and Models of Disability

The theoretical framework underpinning this study incorporates various models and approaches to understanding disability, particularly the UNESCO framework and the Riddick and Sterling framework. These frameworks emphasize the multi-dimensional barriers faced by persons with disabilities (PWDs) and the importance of fostering an inclusive and equitable society.

UNESCO Framework: Physical, Social, and Economic Barriers

The UNESCO framework highlights physical, social, and economic barriers as critical obstacles faced by PWDs in accessing services and participating in society. According to UNESCO (2021), physical barriers include inaccessible architecture, transportation, and insufficient adaptive equipment and information and communication technologies (ICTs). These barriers hinder the ability of PWDs to perform essential functions and participate fully in their communities.



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Social barriers stem from inadequate and inappropriate support services, which foster feelings of isolation and exclusion. These barriers often lead to resignation and further marginalization of PWDs. Economic barriers, on the other hand, arise from insufficient policies, legislation, and financial resources. These systemic deficiencies restrict the ability of PWDs to achieve economic independence and access necessary services. Collectively, these obstacles perpetuate inequality and limit the quality of life of PWDs.

Riddick and Sterling Framework: Personal, Institutional, and Political Barriers

Riddick and Sterling (2002) expand on these barriers by categorizing them into personal, institutional/organizational, and political/ideological levels. Personal barriers include individual factors such as self-perception, confidence, and access to personal resources. Institutional barriers involve systemic limitations within organizations, such as rigid policies, lack of accessibility in facilities, and exclusionary practices. Political and ideological barriers refer to societal attitudes, policy gaps, and discriminatory ideologies that devalue the lives and contributions of PWDs.

This framework is particularly relevant in identifying the barriers PWDs face in accessing services, participating in education, and achieving employment. By addressing these barriers comprehensively, stakeholders can create more inclusive systems that accommodate the diverse needs of PWDs.

Charity Model of Disability

The charity model of disability, one of the earliest perspectives on disability, views PWDs as individuals in need of pity, care, and welfare. Under this model, disability is often seen as a personal tragedy, necessitating compassion and the establishment of segregated institutions such as special schools and residential facilities. While well-meaning, this model has been critiqued for perpetuating dependency and failing to address the systemic barriers that limit PWDs' participation in society. Its focus on charity often neglects the empowerment and autonomy of individuals with disabilities (Farmer, Riddick, & Sterling, 2002).

Social Model of Disability

The social model of disability, developed as a response to the charity model, shifts the focus from individual impairments to the societal structures and attitudes that create disability. This model identifies four critical barriers: physical and environmental obstacles, information and communication challenges, systemic and regulatory issues, and attitudinal barriers. By dismantling these barriers, society can foster inclusivity and accessibility for all individuals (UNESCO, 2021).

The social model aligns closely with the principles of empowerment and accountability. Empowerment involves the active participation of PWDs in decision-making processes, ensuring their voices are heard as stakeholders. Accountability requires public institutions and systems to implement and uphold disability rights, providing transparent justifications for their actions and policies (Lund & Ayers, 2020).

Human Rights Model of Disability

Building on the social model, the human rights model emphasizes the protection and promotion of the rights of PWDs. This approach centers on two key components: empowerment and accountability. Empowerment refers to involving PWDs as active participants in shaping policies and programs that affect their lives, while accountability obligates institutions to ensure these rights are effectively implemented. This model advocates for systemic change to eliminate barriers and promote equality, reinforcing the dignity and autonomy of PWDs.

By integrating the UNESCO framework's physical, social, and economic barriers with the Riddick and Sterling framework's personal, institutional, and political dimensions, this theoretical framework provides a comprehensive lens to analyze the barriers faced by PWDs. It underscores the need to transition from charity-based approaches to more inclusive social and human rights models. Addressing these barriers holistically is essential to improving the quality of life of PWDs, particularly in the face of pandemics and disasters.

Synthesis of the Review of Related Literature

The reviewed literature highlights various frameworks, models, and empirical findings that provide valuable insights into the experiences of persons with disabilities (PWDs) amidst pandemics and disasters. By synthesizing these

249



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works, this section synthesized the perspectives of different authors, identifies critical research gaps, and justifies the need for this study.

Several frameworks have been proposed to analyze the barriers faced by PWDs. The UNESCO framework emphasizes **physical, social, and economic barriers**, focusing on the lack of accessibility, inadequate support services, and financial constraints (UNESCO, 2021). Similarly, the Riddick and Sterling framework categorizes barriers into **personal, organizational/institutional, and political/ideological levels**, providing a layered perspective that incorporates both individual and systemic challenges (Farmer, Riddick, & Sterling, 2002). While both frameworks emphasize the importance of dismantling barriers, UNESCO's approach is broader and applicable to diverse global contexts, whereas Riddick and Sterling's model offers a more specific application in educational and institutional settings.

The **charity model of disability** and the **social model of disability** present opposing paradigms for understanding and addressing disability. The charity model perceives PWDs as objects of pity requiring welfare and specialized services, perpetuating dependency and marginalization (Farmer, Riddick, & Sterling, 2002). In contrast, the social model shifts the focus to societal attitudes and systemic barriers, advocating for inclusivity and accessibility to empower PWDs (UNESCO, 2021). The **human rights model** builds upon the social model by emphasizing empowerment and accountability, underscoring the obligation of institutions to uphold the rights of PWDs (Lund & Ayers, 2020).

Identification of Research Gap

While existing literature provides a robust foundation for understanding the barriers faced by PWDs, several critical gaps remain:

1. **Contextual Gap in the Philippine Setting:** Most studies, such as those by UNESCO (2021) and Farmer, Riddick, and Sterling (2002), focus on global or Western contexts, with limited empirical evidence specific to the Philippines. The unique socio-economic, cultural, and disaster-prone conditions of the Philippines warrant localized research to better understand the experiences of Filipino PWDs.
2. **Intersection of Pandemics and Disasters:** While many studies examine the impact of either pandemics or disasters on PWDs, few explore their combined effects. This intersection is particularly relevant in the Philippine context, where natural disasters frequently coincide with public health crises, compounding the challenges faced by PWDs.
3. **Lived Experiences and Coping Mechanisms:** Although barriers have been extensively documented, there is limited research on the lived experiences and adaptive strategies employed by PWDs during crises. Understanding these experiences is crucial for developing practical, context-sensitive interventions.
4. **Implementation Gaps in Policies and Frameworks:** While frameworks like the social model and human rights model offer ideal strategies, their implementation in real-world contexts remains inconsistent. There is a need for research that bridges the gap between theoretical models and practical applications, particularly in disaster-prone, resource-constrained settings like the Philippines.

Research Objectives

1. To examine the psychological, emotional, and socio-economic impacts of pandemics and disasters on persons with disabilities (PWDs) and analyze how these challenges affect their overall quality of life.
2. To evaluate the influence of accessibility barriers on the well-being of PWDs during crises.
3. To investigate the systemic factors that hinder effective support for PWDs during pandemics and disasters.
4. To explore how representation, empowerment, and inclusion of PWDs in local governance and decision-making processes can enhance their resilience and address their specific needs during crises.
5. To identify and recommend interventions to mitigate the risks of abuse, food insecurity, and social isolation faced by PWDs during pandemics and disasters.

METHOD

This study adopted a qualitative research design to explore the lived experiences, challenges, and coping mechanisms of persons with disabilities (PWDs) during pandemics and disasters. The qualitative approach enabled the collection of narratives that provided insights into the psychological, social, and economic realities faced by PWDs. The qualitative design employed Key Informant Interviews (KIIs) to gather in-depth information from PWDs in

250



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Metro Manila, a highly urbanized area that experiences both frequent disasters and significant pandemic impacts. This urban setting offered a diverse pool of participants with varying experiences across socio-economic backgrounds.

The study focused on Metro Manila, the National Capital Region (NCR) of the Philippines. As a densely populated area, Metro Manila presented unique challenges for PWDs, including limited accessibility in disaster-prone environments, resource constraints, and socio-economic disparities. The locale was ideal for understanding the intersection of urban living and the vulnerabilities of PWDs during crises.

Purposive sampling was used to select participants with lived experiences relevant to the study. This method ensured that individuals who could provide meaningful and detailed insights about the research topic were included. The study involved 50 PWDs as key informants. This sample size was sufficient to capture a diverse range of experiences across different types of disabilities, socio-economic conditions, and barangay-level representations within Metro Manila. The eligibility criteria for participants included persons with any form of physical, sensory, intellectual, or psycho-social disability; individuals residing in Metro Manila who had directly experienced the impacts of pandemics or disasters; participants aged 18 and above, ensuring informed consent and maturity to articulate their experiences; and representation across various cities and barangays in Metro Manila to account for geographic and socio-economic diversity.

Semi-structured interviews were conducted using a guide developed from the study's objectives and research questions. Interviews were conducted in accessible formats, incorporating sign language interpreters or alternative communication methods as needed. Given the urban setting, interviews were held either in-person (following safety protocols) or online to ensure flexibility for participants. Thematic analysis was used to analyze the qualitative data. This method involved identifying patterns and themes across the interviews to draw insights related to the research questions and categorize emerging themes.

RESULTS and DISCUSSION

1. Psychological Impact: Depression, Low Self-Esteem, and Confidence

Confinement in small spaces for prolonged periods without access to outdoor activities significantly impacted the psychological well-being of persons with disabilities (PWDs). This aligns with findings by Lund and Ayers (2020), who emphasized that isolation and disruption of routines during crises exacerbate anxiety and depressive symptoms. Participants in this study reported sadness, anxiety, and worry, frequently accompanied by sleep disturbances, reflecting a pattern observed globally among PWDs (Carvajal, et al 2021).

Social isolation intensified feelings of loneliness and depression, with many participants expressing frustration over the perceived rigidity of health and safety protocols. These sentiments echo the work of Sabatello et al. (2020), who highlighted the psychological toll of restrictive measures on marginalized populations, particularly PWDs. The findings underscore the urgent need for accessible mental health interventions tailored to the unique circumstances of PWDs, especially in prolonged emergencies. Strategies such as psycho-social counseling and community-based mental health programs can mitigate these adverse effects (Stough & Kelman, 2017).

PWDs encountered significant barriers in accessing essential services during the pandemic and disasters. Many participants reported difficulty procuring or repairing assistive devices, which are crucial for their independence and quality of life. This finding aligns with Stough and Kelman (2017), who noted that disruptions in healthcare services disproportionately impact PWDs due to their reliance on regular rehabilitation and assistive products.

The closure of healthcare facilities further compounded these challenges, leaving many without access to critical follow-ups and rehabilitation services. Family caregivers often faced additional burdens, such as standing in long queues and navigating transportation limitations, mirroring patterns observed in studies by Narayanan (2018) and the World Health Organization (WHO, 2021). Participants consistently expressed a need for home delivery of food, medicine, and counseling services, highlighting the systemic gaps in service accessibility.



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The findings reveal an urgent requirement for adaptive measures, such as mobile health units, telemedicine services, and community-based delivery systems, to address these accessibility barriers (Carvajal, 2021a, 2021b). These strategies are consistent with recommendations from the United Nations (2019), which emphasize the importance of ensuring continuity of care for PWDs during crises.

2. Vulnerability to Abuse

Persons with disabilities (PWDs) reported an increased risk of violence and abuse during the pandemic, consistent with findings from global and regional studies (Narayanan, 2018; WHO, 2021). A significant factor contributing to this vulnerability was the lack of disability-focused support services and inaccessible abuse shelters, leaving many PWDs without adequate protection. Shackling, a dehumanizing practice disproportionately targeting individuals with psychosocial disabilities, emerged as a particularly distressing issue during this period. According to Kuper et al. (2020), such practices reflect systemic failures in addressing the unique needs of PWDs and highlight the persistence of stigmatization and neglect.

In addition to shackling, other forms of inhumane treatment were reported, including physical restraint, forced consumption of substances, and exposure to unsanitary living conditions. These abuses underscore the necessity of robust protective mechanisms and accessible support systems. Sabatello et al. (2020) emphasized that stringent enforcement of anti-abuse laws and the establishment of crisis shelters tailored to PWDs are critical for safeguarding their dignity and rights during emergencies. Effective solutions require multi-sectoral collaboration to ensure the safety and empowerment of PWDs in crises.

3. Economic Impact: Loss of Employment and Livelihood

The economic consequences of the pandemic disproportionately impacted PWDs and their families, consistent with prior research (Stough & Kelman, 2017, United Nations, 2019, Carvajal, et al 2021). Lockdown measures and restrictions severely limited employment opportunities, particularly for PWDs working in informal sectors. Many households experienced a significant reduction in income, making it challenging to meet basic needs such as food, medication, and other disability-related expenses.

The additional costs associated with disabilities, such as assistive devices, accessible housing, and specialized goods, exacerbated financial hardships. These challenges were compounded by the lack of targeted financial support programs. Lund and Ayers (2020) highlighted that the intersection of disability and economic vulnerability requires immediate intervention, particularly through livelihood programs and employment guarantees for PWDs.

Many families of PWDs reported difficulties in accessing essential supplies due to mobility restrictions and financial constraints. This finding aligns with the work of Narayanan (2018), which identified food insecurity as a critical issue for PWDs during crises. Targeted programs providing direct financial assistance, subsidies for disability-related expenses, and home delivery of essential goods can significantly alleviate the economic burden on PWDs and their families.

The findings highlight the critical need for inclusive economic recovery programs, as emphasized by Kuper et al. (2020). These programs should integrate vocational training, job placement services, and microfinance opportunities tailored to PWDs, ensuring their inclusion in sustainable economic activities.

4. Budget Allocation for PWDs in Local Government Units (LGUs)

Participants emphasized the critical need for specific budget allocations for PWDs during pandemics and disasters. They advocated for the establishment of contingency funds within LGUs to ensure the timely and transparent distribution of resources tailored to the needs of PWDs. These findings align with Narayanan (2018), who highlighted the importance of disability-specific financial planning to address the unique challenges faced by PWDs during crises. Additionally, involving PWD organizations in the budgetary process was seen as a crucial step toward enhancing transparency and fostering inclusivity. This recommendation supports the work of the United Nations (2019), which stresses participatory budgeting as a mechanism for equitable resource allocation. Structured, disability-focused financial planning at the local government level is imperative to meet the specific needs of PWDs during emergencies.



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5. Representation of PWDs in Local Governance

Consistent and meaningful representation of PWDs in local governance emerged as a key theme. Participants emphasized the need for permanent leadership roles for PWDs within LGUs, ensuring the continuity and effective implementation of disability-focused programs across changes in administration. Sabatello et al. (2020) and Carvajal et al (2021) noted that involving PWDs in decision-making processes enhances inclusivity and strengthens community participation. At the barangay level, the inclusion of PWDs in governance structures was seen as pivotal for ensuring the proper utilization of resources and promoting inclusive development. The establishment of such roles supports recommendations by Kuper et al. (2020), who advocate for the integration of PWDs into governance to address systemic inequities and foster empowerment.

6. Resource Mobilization and Food Insecurity

The pandemic revealed significant challenges in resource mobilization and food provision for PWDs. Participants reported a lack of reliable data on food distribution, which exacerbated food insecurity and left many PWDs at risk of hunger. These findings are consistent with Stough and Kelman (2017), who highlighted the intersection of poverty and unemployment in increasing the vulnerability of PWDs to food insecurity during crises. Addressing this issue requires streamlined resource allocation and the development of tailored relief programs. As noted by Lund and Ayers (2020), data-driven planning and equitable resource distribution are critical for mitigating the risks of food insecurity among marginalized populations, particularly PWDs.

7. Need for Psycho-Social Debriefing

The pandemic amplified the need for psycho-social support for PWDs, who experienced heightened feelings of loneliness, anxiety, and distress due to prolonged social isolation and barriers to accessing essential supplies. Participants highlighted the importance of psycho-social debriefing to address mental health challenges and foster resilience. These findings echo the work of Sabatello et al. (2020), who emphasize the importance of mental health interventions tailored to the unique needs of PWDs during crises. Comprehensive counseling services and community-based support programs are essential for mitigating the long-term psychological impacts of emergencies, as noted by the World Health Organization (2021).

8. Dissemination and Implementation of PWD Programs

Participants stressed the importance of effective dissemination and implementation of PWD-focused programs. Raising awareness about the impact of crises on PWDs and ensuring that programs are inclusive and rights-based emerged as critical issues. Establishing a national and local database for PWDs was seen as a priority for consolidating information and streamlining services (Carvajal, et al 2021). This recommendation aligns with Stough & Kelman, (2017) who highlighted the role of data consolidation in enhancing service delivery for marginalized populations. Including PWDs in policy discussions and decision-making processes is essential for ensuring that programs are accessible, relevant, and effective. As emphasized by the United Nations (2019), participatory approaches in program design and implementation enhance the efficacy and equity of interventions.

Conclusions

This study reveals the multifaceted challenges faced by persons with disabilities (PWDs) during pandemics and disasters, emphasizing the need for inclusive strategies to address their unique needs. Based on the findings, the following conclusions are drawn:

1. **Psychological and Emotional Vulnerabilities:** PWDs are particularly susceptible to psychological distress, including depression, anxiety, and low self-esteem, due to prolonged confinement, disrupted routines, and social isolation. These findings highlight the urgent need for accessible mental health support systems to mitigate the adverse emotional impacts of crises.
2. **Systemic Accessibility Barriers:** Limited access to essential services such as healthcare, assistive devices, rehabilitation, and counseling underscores the systemic gaps that hinder the well-being of PWDs during emergencies. Addressing these barriers requires the implementation of adaptive and inclusive service delivery mechanisms.
3. **Increased Risk of Abuse:** PWDs face a heightened risk of violence and inhumane treatment during crises, exacerbated by a lack of disability-focused support systems and accessible abuse shelters. Strengthening



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protective mechanisms and ensuring the enforcement of anti-abuse laws are critical to safeguarding the rights and dignity of PWDs.

4. **Economic Challenges:** The economic impact of pandemics and disasters disproportionately affects PWDs and their families, often pushing them into deeper poverty. This highlights the need for targeted financial assistance programs, including livelihood initiatives and employment guarantees, to enhance the economic resilience of PWDs.
5. **Need for Budgetary Allocation and Representation:** The study underscores the importance of allocating specific budgets for PWDs at the local government level and involving PWD organizations in the budgetary process. Consistent representation of PWDs in governance structures is essential for ensuring the continuity and effectiveness of disability-focused programs.
6. **Resource Mobilization and Food Security:** Inefficiencies in resource mobilization and food distribution during crises leave many PWDs vulnerable to hunger and malnutrition. Reliable data management and inclusive relief measures are necessary to address food insecurity and ensure equitable access to resources.
7. **Importance of Psycho-Social Support:** The lack of psycho-social debriefing and counseling services during crises exacerbates the mental health challenges of PWDs. Comprehensive support systems are crucial to fostering resilience and addressing the psychological impacts of disasters and pandemics.
8. **Inclusive Program Implementation:** The dissemination and implementation of PWD-focused programs remain inadequate, with significant gaps in awareness, inclusivity, and rights-based approaches. Establishing a national and local PWD database and involving PWDs in policy-making processes are essential steps toward improving service delivery and ensuring that programs are responsive to their needs.

Recommendations

These recommendations aim to address the systemic, economic, and social barriers identified in this study, fostering resilience, inclusivity, and equitable support for PWDs in times of crises.

1. **Inclusive Communication Strategies:**
 - a) Tailor all communication related to pandemics and disasters to address the specific needs of persons with disabilities (PWDs).
 - b) Incorporate sign language components in media campaigns to ensure accessibility for the deaf and hard of hearing.
 - c) Utilize multiple accessible formats, such as Braille, large print, and audio, to disseminate information effectively to diverse disability groups.
2. **Strengthening Social Support Systems:**
 - a) Develop community-based social support programs or partner with voluntary organizations to provide emotional and practical support for PWDs and their families during crises.
 - b) Establish psycho-social counseling services accessible to PWDs to address mental health challenges, especially during prolonged emergencies.
3. **Economic Empowerment and Livelihood Support:**
 - a) Implement programs to guarantee some form of employment or livelihood opportunities for adult PWDs, enabling them to earn subsistence income.
 - b) Offer targeted financial assistance or subsidies for disability-related expenses, such as assistive devices and specialized services, to alleviate economic burdens.
4. **Direct Provision of Essential Supplies:**
 - a) Ensure food and dry rations are delivered directly to the homes of PWDs, particularly during lockdowns or mobility restrictions.
 - b) Include PWDs in priority lists for essential resources, such as medications, rehabilitation supplies, and assistive technologies.
5. **Consolidation of PWD Databases:**
 - a) Consolidate and maintain a comprehensive national database of PWDs through collaboration between NGOs, barangays, and government agencies.
 - b) Use this database to streamline the delivery of services, aid, and resources, ensuring that no PWD is left behind.
6. **24/7 Support and Rehabilitation Services:**



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- a) Establish 24/7 helplines managed by barangays or NGOs to provide immediate assistance and counseling to PWDs during crises.
- b) Develop and implement community-based rehabilitation programs to address the specific needs of PWDs and provide training for caregivers on effective care practices.
7. **Representation in Governance and Decision-Making:**
 - a) Ensure permanent representation of PWDs in pandemic and disaster councils to advocate for disability-inclusive policies and programs.
 - b) Assign dedicated, non-co-terminus positions for PWD leaders within local government units to maintain consistency in the implementation of PWD-focused initiatives.
8. **Capacity Building and Training:**
 - a) Train local government officials, disaster response teams, and community organizations on disability inclusion to enhance the effectiveness of disaster preparedness and response programs.
 - b) Encourage partnerships between PWD organizations and local governments to ensure the integration of PWD perspectives in program planning and execution.
9. **Strengthening Disability-Inclusive Governance:**
 - a) Require all local government units to allocate a dedicated budget for PWD-specific programs, with clear mechanisms for monitoring and accountability.
 - b) Involve PWD organizations in budget preparation to ensure resources address their most pressing needs during crises.

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