

Mandates of the Special Rapporteur on the rights of persons with disabilities; the Special Rapporteur on the promotion and protection of the right to freedom of opinion and expression; the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health; and the Special Rapporteur on minority issues

REFERENCE:
AL SGP 1/2020

29 May 2020

Excellency,

We have the honour to address you in our capacities as Special Rapporteur on the rights of persons with disabilities; Special Rapporteur on the promotion and protection of the right to freedom of opinion and expression; Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health; and Special Rapporteur on minority issues, pursuant to Human Rights Council resolutions 35/6, 34/18, 42/16 and 34/6.

In this connection, we would like to bring to the attention of your Excellency's Government information we have received concerning the **lack of accessible information on the COVID-19 pandemic and related response for persons with disabilities, in particular for deaf and hard of hearing persons, who are users of sign language, as members of a linguistic minority.**

According to the information received:

On 22 January 2020, the Government of Singapore set up a Multi-Ministry Taskforce – co-chaired by the Ministers of Health and of National Development – to tackle the pandemic, even before the first case of COVID-19 was reported on 23 January. The Government subsequently adopted a series of containment measures, including contact tracing, tracking and lockdown to control the spread of the virus.

Since its establishment, the Multi-Ministry Taskforce has held several press conferences to update the public on measures taken to contain the virus, which have been transmitted live on national TV channels. However, sign language interpretation and live captioning have not been provided to enable the deaf and hard of hearing to access this essential information in real time. Similarly, the live national announcements by Prime Minister Mr. Lee Hsien Loong have been broadcasted without sign language interpretation and captioning.

The Government has reportedly also not developed specific protocols to enable persons with hearing impairments who contract COVID-19 to contact and access health care services and information on an equal basis with others. For instance, the webpage of SG Enable – the governmental agency dedicated to “enabling persons with disabilities” – does not contain comprehensive information in accessible formats on COVID-19 and only provides phone contact numbers (e.g.,

Ministry of Health COVID-19 hotline, Institute of Mental Health's mental health hotline, national care hotline), which are not accessible to deaf and hard-of-hearing persons.

While we do not wish to prejudge the accuracy of the information received, we wish to express concern about the situation of deaf and hard of hearing persons in Singapore who are users of sign language, as members of a linguistic minority, whose safety and protection is at risk in the context of the COVID-19 pandemic, due to the Government's failure to provide essential information intended to the general public in sign language and other accessible means and modes of communication. Sign languages are fully fledged languages and their users can therefore be considered as members of linguistic minorities.

We are concerned that these allegations appear to be violating the rights of persons with disabilities to equality and non-discrimination, accessibility, access to information, and health in the context of situations of risk and humanitarian emergencies, which are protected by articles 5, 9, 11, 21 and 25 of the Convention on the Rights of Persons with Disabilities, ratified by Singapore on 18 July 2013.

Recognizing that the individuals affected are members of linguistic minorities in Singapore, we would like to bring to your Excellency's Government's attention the international standards regarding the protection of the rights of persons belonging to minorities, in particular the 1992 UN Declaration on the Rights of Persons Belonging to National or Ethnic, Religious and Linguistic Minorities, which refers to the obligation of States to protect the existence and the identity of minorities within their territories and to adopt the measures to that end (article 1), as well as to adopt the required measures to ensure that persons belonging to minorities can exercise their human rights without discrimination and in full equality before the law (article 4).

We urge your Excellency's Government to provide sign language interpretation and captioning in all events and essential communications related to COVID-19 intended to the general public, including the statements of the Prime Minister and of the Multi-Ministry Taskforce.

We also call upon the State to provide essential information to ensure the protection and safety of persons with disabilities in situations of risk related to COVID-19 in accessible formats and technologies appropriate to different kinds of disabilities in a timely manner, such as Braille, Easy Read format, augmentative and alternative communication, to enable equal access to information for all persons with disabilities. Additionally, we call upon Singapore to ensure the accessibility of health care and support services to all persons with disabilities during the pandemic without discrimination.

We further call on the State to ensure the meaningful consultation and the active participation of persons with disabilities and their representative organizations at all

stages of the COVID-19 response and recovery, from the planning and design phases, to implementation and monitoring.

In connection with the above alleged facts and concerns, please refer to the **Annex on Reference to international human rights law** attached to this letter which cites international human rights instruments and standards relevant to these allegations.

As it is our responsibility, under the mandates provided to us by the Human Rights Council, to seek to clarify all cases brought to our attention, we would be grateful for your observations on the following matters:

1. Please provide any additional information and/or comment(s) you may have on the above-mentioned allegations.
2. Please explain how your Excellency's Government ensures that official information and communication intended for the general public on COVID-19 is made available in accessible means, modes and formats for all persons with disabilities, particularly for deaf and hard of hearing persons who are users of sign language and members of a linguistic minority.
3. Please provide information about measures that are being taken to ensure that all persons with disabilities have access to health care and support services on an equal basis with others in the context of the COVID-19 pandemic.
4. Please indicate whether an action plan has been adopted to address the specific situation of all persons with disabilities in the COVID-19 response.
5. Please provide information about any measures taken to promote the consultation with and the meaningful participation of persons with disabilities at all stages of the COVID-19 response and recovery.

We would appreciate receiving a response within 60 days. Passed this delay, this communication and any response received from your Excellency's Government will be made public via the communications reporting website. They will also subsequently be made available in the usual report to be presented to the Human Rights Council.

While awaiting a reply, we urge that all necessary interim measures be taken to halt the alleged violations and prevent their re-occurrence and in the event that the investigations support or suggest the allegations to be correct, to ensure the accountability of any person(s) responsible for the alleged violations.

Please accept, Excellency, the assurances of our highest consideration.

Catalina Devandas-Aguilar
Special Rapporteur on the rights of persons with disabilities

David Kaye
Special Rapporteur on the promotion and protection of the right to freedom of opinion
and expression

Dainius Puras
Special Rapporteur on the right of everyone to the enjoyment of the highest attainable
standard of physical and mental health

Fernand de Varennes
Special Rapporteur on minority issues

Annex

Reference to international human rights law

In connection with above-alleged facts and concerns, and without prejudice to the accuracy of these allegations, we would like to draw the attention of your Excellency's Government to the relevant international norms and standards.

Under article 9 of the Convention on the Rights of Persons with Disabilities (CRPD), ratified by Singapore on 18 July 2013, which guarantees accessibility, Singapore must take appropriate measures to ensure access to persons with disabilities, *inter alia*, to information and communications, including information and communications technologies and systems, and to other facilities and services open or provided to the public, including health services. In its general comment No. 2, the Committee on the Rights of Persons with Disabilities has established that all information and communication about the provision of health care should be accessible through sign language, Braille, accessible electronic formats, alternative script, and augmentative and alternative modes, means and formats of communication (para. 40).

Furthermore, article 21 of the CRPD requires Singapore to take all appropriate measures to ensure that persons with disabilities can exercise the right to freedom of expression and opinion, including the freedom to seek, receive and impart information and ideas on an equal basis with others and through all forms of communication of their choice, including the use of sign languages. This article further requires States parties to "provide information intended for the general public to persons with disabilities in accessible formats and technologies appropriate to different kinds of disabilities" (art. 21(a)); and "facilitating the use of sign languages, Braille, augmentative and alternative communication, and all other accessible means, modes and formats of communication of their choice by persons with disabilities in official interactions" (art. 21(b)). Private entities that provide services to the general public, including through the Internet, are urged to provide information and services in accessible and usable formats for persons with disabilities (art. 21 (c)) and the mass media, including providers of information through the Internet, are encouraged to make their services accessible to persons with disabilities (art. 21 (d)). Article 21 also requires States parties to recognize and promote the use of sign languages (art. 21 (e)).

These articles should be read in conjunction with article 5 of the CRPD, which requires States to, *inter alia*, prohibit all discrimination on the basis of disability. In interpreting article 5, the Committee on the Rights of Persons with Disabilities has established that denial of access to – *inter alia* - information and communication, and services open to the public constitutes an act of disability-based discrimination that is prohibited by the Convention (general comment No. 2, para. 34). Moreover, accessibility in the context of communication services includes the provision of social and communication support (general comment No. 6, para.40).

Article 11 of the CRPD establishes that States shall take all possible measures to ensure the protection and safety of persons with disabilities in the national response to situations of risk and humanitarian emergencies. In its general comment No. 6, the

Committee on the Rights of Persons with Disabilities has established that States are required to include persons with disabilities in national emergency protocols on an equal basis, to provide for accessible information and communication helplines and hotlines, among other measures. This requires the active involvement of organizations of persons with disabilities in the development, implementation, and monitoring of emergency-related legislation and policies (CRPD Committee, general comment no. 7).

Article 25 of the CRPD reaffirms the right of all persons with disabilities to the enjoyment of the highest attainable standard of health without discrimination. Article 25 also provides a non-exhaustive list of standards and obligations that States must guarantee in the implementation of the right to health, including the provision of services as close as possible to communities; the provision to persons with disabilities of health care of the same quality as that provided to others, including on the basis of free and informed consent; the training of health professionals, among others. As underlined by the Committee on the Rights of Persons with Disabilities, States must ensure the full accessibility of health-care services and programmes. All public and private health-care facilities and services must take into account all aspects of accessibility for persons with disabilities, including the accessibility of infrastructure, equipment, and information and communications. All information and communications about the provision of health care, including electronic services and emergency services, should be accessible to persons with disabilities. All public health campaigns must be also accessible and inclusive of persons with disabilities (A/73/161, para. 56, 57)