


Climate Change, Vulnerability, and Disability: Do We “Leave No One Behind”?

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The Philippines belongs with those countries that are prone to the impact of climate injustice: Provinces with the least socioeconomic resilience as well as vulnerable populations, such as people with disabilities, are disproportionately affected by extreme hazards.¹ In the year 2013, typhoon Haiyan (known locally as Yolanda) made landfall in the Philippines. It caused more than 6000 deaths, approximately 29 000 injuries, and displaced over 4 million people. More than 1 year after the disaster, “nearly half a million people were still living in emergency or make-shift shelters.”² The number of people with disabilities who were affected by the typhoon is unknown² but is likely to be high; results of the Philippines National Disability Prevalence Survey 2016 categorized 11.9% of the overall population age 15 years and older as having a severe disability (female = 14.6%, male = 9.2%).³ A rehabilitation needs assessment identified almost 3000 people with pre-existing and new disabilities who needed rehabilitation during the first 6 months after the disaster.⁴ There is limited evidence about the impact of the devastating typhoon on the situation of people with disabilities. For example, qualitative studies suggested that an array of barriers for people with pre-existing impairments reduced post-disaster access to health services, for example, transportation costs, “discriminatory attitudes within hospitals and a lack of rehabilitation specialists (especially ophthalmologists).”² These barriers aggravated the barriers caused by the destruction of health facilities.⁵

We now report an extreme case study that demonstrates how lack of long-term support and insufficient access to health, rehabilitative, and educational services affected a family with cataract blindness affecting 3 generations. The family was identified in a remote village of Leyte Province in March 2019 during community screening activities conducted under the Community Eye Health program of the Department of Health. Nine out of 12 family members (1 grandmother, 2 daughters, and 6 granddaughters ages 2 to 11 years) were diagnosed with severe visual impairment because of bilateral hereditary cataract. One of the granddaughters was affected by psychosocial

disability that was aggravated by posttraumatic stress disorder. The family had lost all of their assets during the typhoon. More than 5 years later, they still live in a hut made of tarpaulin that had been distributed as relief material. Cataract surgery was now conducted for some of the family members with support from non-governmental organizations, but the provision of further rehabilitative, low vision, and inclusive education services, as well as reproductive health care is challenging due to a lack of community-based and institutionalized rehabilitative services.

This poignant case study illustrates the multifaceted impact of the typhoon, resulting in extreme poverty: Pre-existing disability is aggravated by newly acquired psychosocial disability and exacerbated by multiple barriers to health and rehabilitative services. Consequently, the family is now even more vulnerable to future hazards. Considering the anticipated rise of future extreme hazards caused by climate change in the Philippines, we suggest that the vulnerability of people with disabilities, especially in more remote and rural areas, need to be a bigger public health concern.

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Conflict of Interest Statement

The authors have no conflicts of interest to declare.

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