

January 27, 2022

Dr. Kimberly Knackstedt Director of Disability Policy White House Domestic Policy Council

Dear Dr. Knackstedt,

The Consortium for Citizens with Disabilities (CCD) Health Task Force co-chairs write to you regarding President Biden's rollout of the free at-home rapid COVID-19 tests for all people in the United States. CCD is deeply concerned for the people with disabilities in the United States who, because the tests are physically inaccessible to them, will not be able to take advantage of the rollout. We ask that the administration implement alternatives for these individuals.

CCD is the largest coalition of national organizations working together to advocate for federal public policy that ensures the self-determination, independence, empowerment, integration and inclusion of children and adults with disabilities in all aspects of society. While we commend the administration for making rapid at-home COVID-19 tests free and readily available for all people in the United States, many individuals with disabilities are unable to use them safely and independently, and thus do not have equal access to the program.

Individuals who are blind and experiencing vision loss cannot independently and safely use the rapid COVID-19 tests. The instructions are not provided in alternate formats such as braille, large print, or audio formats, making it difficult for users to follow along and use the tests correctly. And even if the instructions were more accessible, the tests themselves are inaccessible to many. The tests alert the user as to whether they contracted the disease by changing colors or by another visual marker, which is extremely difficult, if not impossible, for blind and visually impaired individuals to see. The tests also require a certain level of dexterity to use, making it difficult for individuals with physical disabilities to use independently.

Given the severity of the pandemic and the rapid spread of the Omicron variant, the administration must quickly implement accommodations that work for people with disabilities and make those accommodations prominently available on the at-home test request homepage and in related communications.¹ One viable alternative would be to

¹ Currently, accessibility alternatives are listed on a Frequently Asked Questions page that a visitor may not easily locate, particularly people who do not read English well.

launch a mobile testing program targeted to individuals with disabilities in which health professionals travel to the individual's home, with requisite personal protective equipment, to administer and deliver the results of the rapid test. Many individuals with disabilities rely on public transportation or rideshare services to get around. Such individuals should not have to use public transportation to travel to a testing site. They need a safe way to be tested without the added exposure risk of public transit, particularly if they are experiencing symptoms.

Additionally, the administration should urge pharmaceutical companies to develop rapid at-home COVID-19 tests that provide the instructions in alternate formats such as braille, large print, or audio. The instructions could provide a phone number or hotline for blind and visually impaired users to call for step-by-step audio instructions. Additionally, the tests should deliver results in a manner other than a simple color change. The results could be communicated through tactile indicators such as distinct patterns of raised bumps for positive and negative results since many blind and visually impaired individuals already use their sense of touch on a regular basis. For instance, in the United Kingdom, the Royal National Institute of Blind People developed a prototype of an accessible pregnancy test where the test provided a tactile response so blind users knew the result of the test. The Administration should urge pharmaceutical companies to begin developing new technologies such as these.

The CCD Health Task Force urges that swift action be taken to remedy our concerns and implement the alternatives outlined in this letter. We echo comments made by our colleagues in the CCD Emergency Management Task Force and want to reinforce this important message. Furthermore, the administration must remember its obligation to the disability community and provide reasonable accommodations to the rapid test rollout as it receives federal funding. If you have any questions, please send them to Caroline Bergner at cbergner@asha.org. Thank you.

Sincerely,

Caroline Bergner American Speech-Language-Hearing Association Health Task Force Co-chair

David Machledt National Health Law Program Health Task Force Co-chair

Cinnamon St. John Center for Medicare Advocacy Health Task Force Co-chair

Peter Thomas Brain Injury Association of America Health Task Force Co-chair