Website Accessibility: Enhancing Access to COVID-19 Vaccine Registration and Beyond

<u>One-in-four individuals in the United States live with some form of disability</u>, according to CDC. People living with disabilities face persistent barriers to activities of daily life, such as accessing transportation and healthcare services. The COVID-19 pandemic has disproportionately impacted people living with disabilities, especially those living in congregate settings and long-term care facilities (LTCFs). Research has shown that <u>individuals living with intellectual disabilities</u> are more likely to have conditions associated with severe COVID-19 disease and mortality than individuals without intellectual disabilities. To prevent COVID-19 in this population, it is essential that people living with disabilities and their direct care workers or family caregivers are offered equitable opportunities to receive the COVID-19 vaccine.

In many states and territories, people living with disabilities became <u>eligible for the COVID-19 vaccine</u> during Phase 1 of vaccine prioritization plans, but have yet to receive it. A <u>survey conducted by the</u> <u>American Association on Health & Disability</u> in late March 2021, as well as personal anecdotes, validate that <u>inaccessible vaccine registration websites</u> are a significant barrier to receiving the COVID-19 vaccine for many individuals living with disabilities. A recent *KHN* report found that <u>many vaccination</u> <u>registration websites do not meet accessibility standards</u> to reliably operate technologies and assistive devices for individuals living with disabilities.

Disability Laws and Web-Based Communication

Website accessibility is essential to ensure people living with disabilities have equitable access to digital information. The following describes how several disability laws apply to COVID-19 vaccine registration websites and state and territorial health agency (S/THA) web-based communications:

Rehabilitation Act of 1973

The Rehabilitation Act of 1973 (Rehabilitation Act) ensures that individuals living with disabilities will not be denied access to programs, services, or activities receiving federal funding based on their disability. Section 504 protects individuals living with disabilities from discrimination under federal grants and programs, including S/THAs. Section 508, an amendment to the Rehabilitation Act passed in 1998, requires that federal agencies make electronic information accessible to individuals living with disabilities. While Section 508 only applies to federal agencies, <u>many states have passed laws and</u> <u>policies addressing digital accessibility</u>. Entities covered under the Rehabilitation Act are required by law to ensure that communications for people living with disabilities are compatible with assistive technologies, such as screen readers. This includes health agency and COVID-19 vaccine registration websites.

Americans with Disabilities Act of 1990

The <u>Americans with Disabilities Act (ADA)</u>, passed in 1990, protects individuals living with disabilities from discrimination based on disability in employment, public services, public accommodations, and telecommunications. State and local governments are required to provide equal opportunity for individuals living with disabilities to benefit from programs, services, and activities under ADA Title II, including by offering access to accessible communications. While less explicit, under ADA Title III, individuals living with disabilities are protected from discrimination when using public accommodations,



which could be interpreted to include <u>websites and web-based applications</u>. Entities covered under ADA, such as S/THAs, should ensure that web-based communications, including COVID-19 vaccine appointment registration sites, are accessible for people living with disabilities.

Considerations for Improving Vaccine Registration and Website Accessibility

To improve website accessibility for people living with disabilities and to adhere to existing disability rights laws, S/THAs should consider the following suggestions:

1) Assess baseline website accessibility. Prior to improving accessibility, websites should be assessed to determine baseline adherence to existing standards. Johns Hopkins University has created a <u>dashboard</u> that tracks COVID-19 vaccine website accessibility across all states, territories, and Washington, D.C. There are also many <u>tools available online</u> to assist in testing websites, software, and electronic documents for conformance with web accessibility standards, including the <u>Interagency Trusted Tester</u> Program, the Paciello Group's Color Contrast Analyzer, and the <u>WAVE Web Accessibility Evaluation Tool</u>.

2) Eliminate administrative barriers to scheduling vaccination appointments. To ease COVID-19 vaccine registration for people living with disabilities, websites should be straightforward and simple. S/THAs should work to reduce administrative barriers by minimizing the number of steps and page changes required to receive a vaccination appointment, simplifying registration pages to include only essential information and paperwork, and providing clear registration. People living with disabilities have also reported the registration system timing out before reaching the appointment screen, adding an additional hurdle to the process.

3) Strive to achieve existing standards for website accessibility. While there are not specific standards for website accessibility outlined within ADA, many federal agencies adhere to <u>standards set by Section</u> <u>508 of the Rehabilitation Act</u>. Another set of guidelines, the WCAG 2.0 Level A and Level AA Success Criteria and Conformance Requirements outlined by the World Wide Web Consortium, <u>offers greater</u> <u>specificity than the 508 standards</u>. Conformance to <u>Level A and Level AA WCAG 2.0 Success Criteria</u> is highly recommended to ensure website accessibility for people living with disabilities.

4) Field-test web pages with people living with disabilities, disability advocates, and organizations representing people living with disabilities. To ensure that changes to website accessibility reflect the needs of the community, people living with disabilities should play an active role in testing and assessing website capabilities. States and territories can leverage existing partnerships with disability organizations to assist in reviewing websites for accessibility, or hire an organization such as <u>WebAIM</u> or the World Institute on Disability that offer user testing focused on accessibility for the disability community.

5) Provide effective communications and alternative ways to access essential information. Regardless of website accessibility, it is vital that communications and information are provided in alternative formats. This includes offering access to COVID-19 vaccination appointments by phone, including through telecommunication relay services and direct video calling; providing alternate format documents on vaccine registration, including large print, braille, text files, audio files, and other electronic formats; and disseminating essential information through trusted advocacy organizations, family members, and caregivers.

