# How to get started on disability inclusion in humanitarian action



### Tip sheet

According to <u>UNICEF's Strategic Plan</u> and <u>Core Commitments for Children in Humanitarian Action (CCCs)</u>, efforts towards disability inclusion and equity must be enhanced as soon as possible in all types of emergencies and throughout the Humanitarian Programme Cycle (HPC).

This document outlines basic tips on how to get started on disability inclusion for disability focal points, emergency focal points, and staff engaged in humanitarian coordination. Most of these tips apply to all emergencies, however some of the tips may be more relevant to L2 and L3 emergencies.

## Prepare yourself

Reach out to disabilty focal points or HQ disability team

Get familiar with existing tools and guidance

Work with key partners to learn about past and current disability includion work

Contact OPDs and start mapping out key actors

## Bring disability to the agenda

Make disability inclusion a standing point in key emergency management meetings

Set-up a SharePoint and share link with latest resources and information

Raise disability-inclusion on cluster and coordination meetings

Invite OPDs to events and community activities

## Create entry points

Collaborate with AAP focal points to ensure accessible communication and feedback mechanisms

Consider including disability in key strategic processes

Raise awareness on disability in training and other capacity building events, including refresher trainings

## Keep disability visable

Take advantage of the dynamic agenda of humanitarian action

Include disability in communication and advocacy efforts

Include data on disability in SitReps

Communicate on vioation of children with disabilities' rights

Work with PME colleagues to align indicators with the CCCs indicators and guidance



**READ MORE** 



### Prepare yourself

- Reach out to:
  - Disability focal points in your <u>country and/or regional office</u> to promote a coordinated approach to disability inclusion.
  - HQ disability team for support and access resources on disability-inclusive humanitarian programming<sup>1</sup>.
- Familiarize yourself with disability-inclusion tools and guidance.
- Conduct a rapid desk review about the situation of children with disabilities.
- Set-up a SharePoint folder to organize and share relevant information with colleagues to inform emergency preparedness and response, risk analysis, needs assessment and situation analysis.
- Identify and invite key partners' focal points and UNICEF cluster/ sector coordinators to discuss about disability inclusion. This will help you to understand previous and current disability-inclusion activities and facilitate joint work on disability-inclusive analysis, assessment and factsheets.
- Meet with organizations of persons with disabilities (OPDs) (including where relevant from the host community):
  - Understand what they do and their interest in engaging in response or preparedness actions.
  - OPDs will inform you on the risks and barriers affecting children and adults with disabilities, including sources of stigma and discrimination.
- Meet with other organisations with expertise relating to disability inclusion that will help you to map partners and referral services, i.e., those providing disability support services, inclusive education, or assistive devices.

### Bring disability-inclusion to the agenda

- Add disability inclusion as a standing agenda point in meetings, including Emergency Management Teams (EMT) and Technical Emergency Management Teams (TEMT).
- When reviewing needs assessments, humanitarian response plans, country preparedness plans, Situation Reports (SitReps) or other documentation, or when participating in emergency meetings such as with EMTs and TEMTs – ask yourself:

## "(How) have children with disabilities and their caregivers been considered?"

- Consider if there are any upcoming opportunities to include disability in agenda-setting for the CO during the revision of humanitarian response levels (scaling up or down between L1, L2, L3).
- When participating in cluster/sector meetings, or other humanitarian coordination mechanisms, ask how the specific needs of children with disabilities and their caregivers are being addressed in preparedness and contingency planning, needs assessment, response planning, and monitoring. Suggest that disability-inclusion is a standing on cluster/sector meeting agendas. You can also support the establishment of an inter-sectoral working group on disability inclusion.
- Invite OPDs to agency events and community engagement activities. Brief the OPDs on these activities to ensure they are comfortable to share their experiences and participate in the discussion; recognising that OPDs may be new to engaging with humanitarian actors.

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#### Create disability-inclusion entry points

- Collaborate with AAP focal points to engage persons with disabilities in emergency preparedness and response. For example, include disability in a Rapid Communication and Information Assessment to understand their communication needs and channels, including accessible feedback and complaints mechanisms.
- Consider the opportunities to integrate disability inclusion in upcoming strategic processes, such as:
  - UNICEF Resource mobilization and the HAC (annually in August).
  - Interagency HNO and HRPs (annually in July).
  - The IASC Emergency Response Preparedness & UNICEF Emergency Preparedness (updated every six months).
  - UNICEF emergency response declarations and revision of CO workplans in major scale-up of humanitarian response, including extension (or exit) of L2 or L3 emergencies.
  - Humanitarian Programme Documents (HPDs).
  - Emergency Supply and Logistics Strategy.
  - Advocacy and Communications Strategies.
  - Humanitarian Performance Monitoring and evaluation of UNICEF's response to the L1/L2/L3 humanitarian crisis.
- Use training and other methods (webinars, bilateral meetings, workshops) to raise awareness among the emergency team on:
  - The underestimation of disability; persons with disabilities make up 15 per cent of the global population (10 per cent of children).
  - The disproportionate impact of emergencies on children with disabilities, and the barriers they face to accessing assistance.
  - Basic approaches to strengthen inclusion, including accessibility, reasonable accommodation, and the twin-track approach.
  - Where possible include disability-inclusion considerations in annual refresher training on emergency procedures.

### Keep children with disabilities visible

UNICEF humanitarian action has a dynamic agenda that is influenced by several factors. It is crucial to take an active approach to keep disability inclusion efforts visible by:

- Improving visibility of UNICEF disability-inclusive humanitarian action through Communications and Humanitarian Advocacy efforts.
- Including information on situations faced by adults and children with disabilities, and their caregivers, and disability-inclusive responses within internal and external Humanitarian Situation Reports (SitReps).
- Considering the rights of children with disabilities in <u>speaking out</u> on grave violations of children's rights.
- Work with Planning, Monitoring and Evaluation (PME) colleagues to align indicators in plans, appeals, programme documents, SSFAs, and inter-agency documents with the CCCs disability indicators and disaggregation guidance.
- Ensure <u>budget allocation and mobilize resources</u> for disabilityspecific and inclusive humanitarian actions.

#### What if?



What if there is no reliable disability data available or rapid needs assessments have not included the needs of adults and children with disabilities?



 Use the global disability prevalence estimate of 15 per cent in any given population, or 10 per cent in a population of children.

In humanitarian contexts the actual number of persons with disabilities may be higher than the global average prevalence of 15 per cent due to acquired impairments, disruption in services and creation of new barriers. For example, data from the Sierra Leone MICS-6 shows that the number of children aged 5-17 years with functional difficulties in at least one disability domain is 23 per cent (i.e., much higher than 10 per cent), possibly as a result of the civil war and Ebola crisis aftermath. Where there is reliable prevalence data that is specific to the context (as in the case of Sierra Leone), this should be used instead of the global estimate.

- Conduct focus group discussions and interviews with adults and children with different types of disabilities, including OPDs, to get a quick understanding of the risks and barriers they face, as well as their specific needs and requirements.
- Suggest specific interventions and adaptation of interventions so that all children can access, including removing physical barriers, making communication accessible, and addressing stigma.
- Use existing UNICEF and partner programme data relating to disability, e.g., Humanitarian Cash Transfer beneficiary data, Education Management Information Systems data, and complaints and feedback mechanisms.
- Integrate disability into all planned data collection processes, including M&E processes.



## What if disability inclusion is not a priority of the humanitarian leadership in country?



- Invite an OPD representative who feels confident to be a guest speaker to share information about how they are impacted by the emergency and how the response can be made more inclusive. This could be, for example, in a partner meeting, an EMT, or a staff meeting. Where OPDs are not present, invite an individual community representative with a disability.
- Highlight specific actions for disability inclusion at EMT and TET meetings, in coordination with the RO in the case of L2 emergencies, and HQ Disability Section in the case of L3 emergencies.



## What if there are no disability inclusion staff capacities in the CO?



- Reach out to disability focal points and staff in the RO and HQ for technical support.
- Review, define and advocate for disability inclusion in staffing and deployment needs for the emergency response at CO level. This could be supported by the Division of Human Resources Surge Desk in cooperation with RO, CO, EMOPS, and Disability HQ team as needed.
- Consider capacity building of the current UNICEF staff and partners regarding disability inclusion or propose to organize an internal <u>basic training on disability inclusion in humanitarian</u> <u>action</u> with support from the RO and HQ Disability Section.

#### Remember

