



Module 3 - Tipsheet

Inclusion in humanitarian aid

In **2021, 235 million people will need humanitarian assistance and protection.** This number has risen to 1 in 33 people worldwide - a significant increase from 1 in 45 in 2020. 13.4 million people in Syria are in need of humanitarian assistance medical support, drinking water and food supplies, as well as accommodation - a 21 per cent increase compared to 2020 - with needs increasingly being exacerbated by economic decline. In the last 20 years, the number of natural catastrophes has more than doubled, with an average over 400 per year.

Living conditions of people with disabilities must be taken into account when **planning, designing, implementing, monitoring and evaluating humanitarian programmes** and interventions. For this, the requirements of people with disabilities must be considered in all phases and in every sector.

Four basic principles are particularly relevant for the inclusion of people with disabilities in humanitarian programmes and projects:

1. Participation of people with disabilities

The active and effective participation of people with disabilities in all program- and project phases:

- People with disabilities should be employed as employees in humanitarian organisations, also for the purpose of mobilisation within the communities.
- Cooperation with self-advocacy organisations should be entered with the aim of establishing contact with those affected and developing joint activities.

2. Breaking down barriers

Removal of attitudinal, environmental, and institutional barriers:

- All people with disabilities should have full access to assistance and participation opportunities.

3. Self-empowerment and capacity building

Strengthening self-empowerment and capacity development:

- Humanitarian workers need to know about the rights of people with disabilities, the principles and practical approaches to inclusion and how to break down barriers.
- People with disabilities need to be empowered and equipped with the knowledge to participate actively and to benefit fully from humanitarian aid and protection.

4. Data collection and monitoring

Collect disability-specific data to check inclusion:

- Number of accessible and inaccessible facilities and the frequency of human rights violations against people with disabilities.
- Information about self-advocacy organisations and accessible services determined by 5-W data (who does what, when, where and for whom?)
- Experiences and assessments of affected people with disabilities about their barriers and risks as well as attitudes of the population towards people with disabilities (focus groups, interviews).

If no data are available, data on risk factors and barriers broken down by gender, age and disability should be collected along with self-advocacy organisations using tools that have already been tested in a humanitarian context.

With reference to this disability-specific data, indicators for monitoring inclusion in the respective programmes and projects are to be developed.

Climate change, armed conflict and natural disasters can function as precipitating factors for the development of impairments and the **worsening of existing disabilities**. Persons with disabilities are at a **heightened risk of vulnerability** to such events due to their specific needs. In the event of natural disasters or crisis situations, the death rate of persons with disabilities is 2-4 times higher than those without disabilities. Furthermore, it is also assumed that for every casualty, another three persons are injured, heightening the possibility of long-term disability.

Children and women with disabilities are exposed to a **special risk** here.

The following aspects need to be taken into special account when planning and providing humanitarian aid:

- The best way to **identify** persons with disabilities and assess needs in the operational area is with the help of the local Non-Governmental Organisations (NGOs), disabled people's organisations (DPOs), pro disability organisations (PDOs), health care facilities, municipal decision-makers, etc.
- Emergency shelters must always ensure physical **accessibility**.
- Raising **awareness** among field staff is essential to be able to adequately address the needs of persons with disabilities.
- **Early warning systems and emergency** plans should be prepared **together** with persons with disabilities or DPOs and PDOs.
- To ensure a rapid and adequate response, it is also useful to draw up an **information card** for persons with disabilities that includes their details and needs.

Here are some examples of specific measures for including persons with disabilities:

- For physical impairments: separate queues, barrier-free latrines, personal assistance, walking aids, artificial limbs.
- For visual impairments: large print, sufficient light, handrails.
- For hearing impairments: communication through visual signals, hearing aids, sign language.
- For learning difficulties (intellectual impairments): slow speech, simple language, personal assistance.
- Either or in reconstruction persons with disabilities should be included in decision-making according to the principle 'build back better'. No new barriers may be created. **Universal design should be a minimum standard**. According to Handicap International, additional expenses for universal design often only accounts

for between 0.5 and 1 per cent of the overall budget of a project or programme.

- To effectively ensure that accountability is extended to all affected people, including persons with disabilities, mechanisms for accountability must be **accessible** to persons with disabilities, and must consider their requirements, including:
 - Access to information
 - Consultation
 - Participation in decisions
 - Access to safe and responsive feedback and complaints mechanism

Adaptation to climate change

In many parts of the world, **natural disasters** are becoming more frequent or severe due to **climate change**. Average temperatures on earth will continue to rise in the coming decades. This warming is caused by the so-called **greenhouse effect**. The consequences are heat waves, heavy rains, landslides, tornadoes, melting glaciers, flooding islands, and the extinction of plants and animals. These often affect **marginalised groups in particular**, and as a consequence, will lead to increased global migration.

The majority of people with disabilities live in poverty, as highlighted in the Convention on the Rights of Persons with Disabilities. **The Intergovernmental Panel on Climate Change (IPCC)** believes that the **poorest people will continue experiencing the worst effects of climate change** through the loss of income, displacement, hunger and negative health effects.

Risk factors:

Furthermore, people with disabilities are disproportionately affected by high morbidity and mortality rates in an emergency situation and at the same time have no or limited access to emergency aid measures, early warning notifications, transport and emergency accommodation, clean drinking water, sanitation, health services, medication, education, adequate housing and decent work. The limited access to knowledge, resources and services also makes it difficult for people with disabilities to adequately address climate change and to include them in decision-making processes and in the development of suitable measures.

In 2019, the **United Nations Human Rights Council** passed a resolution explicitly calling on governments to include people with disabilities in their plans to combat the effects of climate change. They are to be involved in the planning of disaster response and evacuations in emergency situations, humanitarian emergency measures and health care.

In the case of persons with disabilities, the following **problems** can be of relevance: ¹

- In the event of sudden floods, storms or landslides, everyone with limited mobility and who cannot walk or run, climb or find shelter fast are at a disadvantage. This affects persons with disabilities particularly. Emergency plans must therefore also take restricted mobility into consideration.
- Plans for emergency and evacuation measures must be comprehensive and inclusive, but they must also be communicated so that they can be understood by everyone. It may also be essential to carry out evacuation exercises more frequently for people with learning difficulties, so that they can respond

¹ The Sphere Project: Humanitarian Charter and Minimum Standards in Humanitarian Response. 2011 edition. <http://www.sphereproject.org/handbook/>

automatically in an emergency.

- Aids needed to overcome barriers often get lost during sudden disasters. Therefore, accessibility also needs to be assured in provisional camps and besides food, clothing and sanitary articles emergency relief aid packages should also include visual and walking aids, etc. as far as possible.
- Early warning systems must also be understandable for persons with visual or auditory impairments. On the other hand, people with a sensory impairment have often developed particular sensitivity in the other senses, which could be of use for early warning systems in the local setting.

Other forms of disasters that only proceed slowly, such as droughts, also affect persons with disabilities, because under certain circumstances problems with access to water can be exacerbated, or special nutritional needs cannot be met. Adjustment strategies in food security, such as shifting to the production of other food, must take these special needs into account.