Responding to the rights and needs of persons with disabilities, including mine survivors, in humanitarian crisis

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During the Covid19 crisis changes in service delivery impacted those in need of assistance, such as social support, health care including rehabilitation, or protection.

“Persons with disabilities are affected psychologically and physically by the COVID-19 crisis. They are negatively impacted by protective measures; they spend all the day at home because some of them, especially children with disabilities, older persons and persons with some physical impairments, have underlying health issues or poor immune systems”.
During the Covid19 crisis changes in service delivery impacted those in need of assistance, such as social support, health care including rehabilitation, or protection.

Being at home for a long period of time, unable to access services, can cause stress and depression. Persons with disabilities might feel anxious and fear catching the virus, especially when they cannot afford protective equipment or depend on a support person for daily activities. Children with disabilities who stopped going to schools can face domestic violence at home due to their isolation or change in routine.”

“Daily workers and those with temporary contracts have lost their source of income. This creates a lot of distress as they do not know how to support their families or buy their medications.”

Reham, HI Rehabilitation Technical Advisor in Palestine said during the preparation of the study “COVID-19 in humanitarian contexts: no excuses to leave persons with disabilities behind! Evidence from HI's operations in humanitarian settings” – available here “
Political commitment and technical guidelines
Aim of the Charter

to ensure that art 11 of CRPD is implemented to make humanitarian action inclusive, by lifting barriers persons with disabilities are facing in accessing relief, protection and recovery support and by ensuring their participation in the development, planning and implementation humanitarian programs.
Notions underpinning the Charter

1) Non-discrimination
2) Meaningful Participation
3) Inclusive Policies (including disaggregated data)
4) Inclusive Response and Services
5) Cooperation and Coordination
The Charter: adoption and endorsers

Adopted in 2016 during the World Humanitarian Summit in Istanbul, the Charter is open for endorsement.

As of today, 250 stakeholders have endorsed the Charter: 31 States, the EU, 14 UN agencies, 8 international organizations, 22 national and international networks, 46 organizations representing persons with disabilities (OPDs) and 118 NGOs.
Translating political commitment into action

The IASC guidelines on the inclusion of persons with disabilities in humanitarian action set out essential actions that humanitarian actors must take in order to effectively identify and respond to the needs and rights of persons with disabilities who are most at risk of being left behind in humanitarian settings.
Translating policy commitment into action: Data Collection, Analysis, and Sharing

Quality humanitarian programming is built on an understanding of the requirements and priorities of persons with disabilities during a crisis.

For instance, in Iraq following the large-scale displacement of people from Mosul, HI conducted an assessment in IDP camps in Nineveh Governorate, Iraq, to collect data on persons with disabilities. The questionnaire integrated the Washington Group (WG) Short Set, a set of questions designed to identify people with functional limitations as well as barriers and enablers to services.
Translating policy commitment into action: Meaningful Participation

Meaningful participation of persons with disabilities is crucial to ensure all experiences and needs are taken into account.

In Afghanistan the HI team worked alongside the State Ministry of Martyrs and Disabled Affairs (MMD), partner PDOs, survivors’ organizations and other stakeholders to draft and finalize the National Disability Strategy. The new strategy (2021-2030) comprises all VA components including vocational training, access to decent work opportunities, support to PDOs and inclusion of persons with disabilities in mainstream empowerment and development programs.
Translating policy commitment into action: Improve access to services

Addressing physical, attitudinal and institutional barriers requires inclusive planning, budgeting, human resources and disability-sensitive human resources policies.

In Kandahar, Afghanistan, HI worked with students and management team of a vocational training center to raise their awareness and enhance knowledge on disability and inclusion. Additionally, actions were implemented to improve physical accessibility at entry gates, corridors, classes, toilets, bathroom and offices.
Translating policy commitment into action: Develop Response Capacities

Training rehabilitation professionals, promoting awareness on management of chronic conditions, as well as supporting regulation and decentralization of services has been shown to improve government capacity to respond to identified needs and increase access to specialized services in some targeted locations.

*In Colombia, the community based rehabilitation strategy puts a special attention on people with disabilities, including survivors and caregivers’ protection in order to promote their access to a comprehensive rehabilitation system. Also, HI includes persons with disabilities, survivors, in recovery activities such as the productive projects for safer environments.*
Recommendations to ensure and promote an inclusive humanitarian action in mine/ERW affected countries
When planning, implementing responses and in the recovery phases humanitarian actors should:

- Ensure meaningful participation of persons with disabilities.
- Collect, share and analyze data, disaggregated by sex, age and disability, using the Washington Group Set of Questions, as well as collect information on the barriers to and the facilitators of access and participation.
- Identify and remove barriers in the design and delivery of emergency services to ensure all persons with disabilities are protected and access non-discriminatory assistance.
- Refer to the legal and policy framework to develop and adopt inclusive policies.
- In preparation of or during a crisis, design and share fully accessible and disability, gender and age sensitive information.