Key facts

- Disasters disproportionately place people with a disability in vulnerable situations.
- Disasters increase the rate of disability in a community.
- For every 1 person killed in a disaster, another 3 are injured or left with a permanent disability.¹
- People with a disability experience increased vulnerability during natural disasters due to separation from family and loss of mobility devices.
- There are an estimated 3.5 million refugees and internally displaced people living with a disability worldwide.²
- An estimated 40–70% of refugee populations in conflict settings experience depression and post-traumatic stress disorder.³
- WHO estimates armed conflict will be the eighth most common cause of disability worldwide by 2020.⁴
Reasons for disability inclusion in disaster management

- During disaster responses, people with a disability are often invisible and excluded from accessing emergency support and essential services such as food distribution, medical care, shelter and water, sanitation and hygiene (WASH) facilities.

- Information on disaster preparedness is often not in accessible formats so people with a disability are less aware and prepared for a disaster.

- Environmental, social and attitudinal barriers result in requirements of the 15% of the world’s population with a disability not being met within disaster management responses. It is therefore crucial that disability inclusion in all phases of disaster management occurs so as to ensure the full and equal fulfilment of human rights of people with a disability.

- Disability inclusion in emergency management reduces morbidity and mortality.\(^5\)

- The rate of disability increases during an emergency due to direct trauma, illness from poor living conditions, the breakdown of health services and lack of rehabilitation and an increase in psychological stress.

- The CRPD requires that disaster preparedness and response are inclusive of, and accessible to, people with a disability. In particular, Article 11 and 32 highlight the importance of disability inclusive disaster management through international cooperation.

- The SPHERE guidelines make explicit reference to people with a disability as a vulnerable group. Key actions for disability inclusion are outlined in these internationally recognised standards for humanitarian response.\(^6\)
How to include people with a disability in disaster management?

Disability inclusion in all phases of disaster management including disaster risk reduction – preparedness, prevention and mitigation, along with disaster relief, rehabilitation and recovery is crucial. Disaster preparedness can incorporate disability measures through building knowledge and capacities of governments, organisations, communities and individuals to anticipate disability impact and inclusively respond to and recover from disasters and emergencies. Such preparedness can include disability contingency planning and training; stockpiling of mobility aides and other devices along with general supplies; planning for accessible evacuation and public information in alternative formats. Risk reduction, often done concurrently with preparedness, can incorporate reducing exposure to hazards that can cause disability along with decreasing the vulnerability of people with an existing disability.

The following principles, which adhere to a human-rights approach to disability are used to demonstrate inclusion of people with a disability in all development programs and sectors.

**Awareness** of disability and its implications.

**Participation** and active involvement of people with a disability.

**Comprehensive accessibility** through addressing physical, communication, policy and attitudinal barriers.

**Twin track** identifying disability specific actions combined with mainstream approaches.
Awareness

- Identify the number of people with a disability within the community. This information can be gathered, for example, through meeting local people with a disability and DPOs, census data, household surveys, Community-Based Rehabilitation (CBR) and disability services and facilities for inclusive education.
- Gather information from people with a disability and DPOs on anticipated barriers to inclusion in disaster management efforts.
- Identify and register people with a disability by cross-checking with pre-existing data bases, consulting with DPOs and disability organisations, and visiting homes and community facilities.
- Where possible, identify disability types and recognise those with newly acquired disabilities. Both groups may require referrals to specialist medical services.
- Understand the individual needs of people with a disability for effective inclusion in risk reduction and preparedness.
- Connect with people with a disability and DPOs for contingency planning, coordination and networking with government bodies and other relevant organisations.
- Determine need for, and facilitate access to, specific medication and assistive devices.
- Identify community leaders with a disability who will be able to support awareness-raising, mentoring and training activities.
- Use people with a disability in awareness raising to government, humanitarian organisations and community groups.

Participation

- Consult with people with a disability in the development of early warning systems to ensure accessibility.
- Involve people with a disability, families and DPO representatives in emergency management committees to assist in identifying and supporting people with a disability.
- Allocate a budget to cover travel and participation expenses along with attendance time for people with a disability and DPOs to actively be involved in consultations.
Ensure reunification of people with a disability with their family members and carers as soon as possible.

Demonstrate capacity of people with a disability through their active participation in the planning and response phases along with engagement in recovery and development phases.

Encourage employment of people with a disability in roles relevant to all phases of disaster management.

Facilitate access to suitable assistive devices such as wheelchairs and crutches in evacuation or settlement processes so as to promote independence and improve access to all emergency response services.

Comprehensive accessibility

Comprehensive accessibility = physical, communication, policy and attitudinal access

Hold consultations and other meetings in physically accessible venues.

Identify the preferred communication mode for individuals with a disability. Note that not all people who are blind will have been taught Braille, likewise, not all individuals who are deaf or hard of hearing will have sign language skills.

Be prepared to source alternative communication options including large print, Braille, pictorial, audio and sign language based on individual requirements. These may be arranged through local partners, inclusive education services, CBR and disability organisations.

Consider a variety of communication methods, including visual signs, auditory alarms and peer support, to reach the widest and most diverse proportion of the population, including people with different types of impairments and levels of education and literacy.

Advocate for existing facilities used for shelter sites during a disaster such as schools or public buildings to be made accessible using universal design standards.

Identify need for and replace various assistive devices such as mobility aids, glasses and hearing aids to reduce impact of environmental barriers.
Comprehensive accessibility (cont’d)

- In camps, locate persons with a disability close to water, sanitation, health posts, food and fuel distribution points, and to well lit, secure areas.

- Refer to universal design principles when building/reconstructing accommodation and other infrastructure including community centres, health clinics, schools, roads, public transport points and footpaths as this can be an opportunity to improve overall disability access.

- Consult with people with a disability regarding their specific needs and consider, if possible, relocating households with people with a disability closer to schools, markets or other frequently used venues.8

- Support re-establishment of disability services, such as physical rehabilitation, psychosocial support and financial assistance schemes.

- Ensure inclusion principles are reflected in local policies and laws as they relate to disaster management.

- Dispel myths and negative perceptions about people with a disability and highlight their capacity and potential to play an active role in disaster management processes.
## Twin track

**Twin track enables full inclusion through mainstream access working alongside disability specific supports**

<table>
<thead>
<tr>
<th>Mainstream</th>
<th>Disability specific</th>
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<tbody>
<tr>
<td>Facilitate reunification with family members as a priority.</td>
<td>Facilitate access to specialists and assistive devices such as wheelchairs where required.</td>
</tr>
<tr>
<td>Encourage all emergency staff to receive disability-awareness training.</td>
<td>Allocate a team member to coordinate disability inclusion through communication with people with a disability, their families and organisations, as well as with the rest of the emergency and disaster response team.</td>
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<tr>
<td>Use UN Sphere standards and international conventions to advocate for disability inclusion in mainstream emergency responses.</td>
<td>Position people with a disability closest to well-lit areas near food and WASH facilities.</td>
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<tr>
<td>Ensure universal design principles are taken into consideration for emergency building design, latrine facilities and overall camp planning.</td>
<td>Orientate people with a disability to their environment as soon as possible.</td>
</tr>
<tr>
<td>Actively use people with a disability in all disaster management planning as they can have creative solutions to barriers through their lived experiences.</td>
<td>Identify and respond to disability-related barriers as early as possible.</td>
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Plan Ethiopia

Summary
The UN reports that the Horn of Africa is experiencing one of the worst droughts in last 60 years. There are over 4.5 million people in need of aid in Ethiopia, primarily due to the poor performance of the rains from October to December 2010, which has resulted in drought conditions in the south and south-eastern parts of the country. Plan International recognises the importance of disability inclusion in their emergency responses in order to reach the poorest and most vulnerable members of disaster-affected communities, and to optimise community recovery. As such, Plan and its implementing partner, Gayo Pastoralist Development Initiative, have taken steps to ensure that children and women with a disability, and their families, have access to emergency nutrition, livelihoods and WASH programs, a project funded through the AusAID Humanitarian Partnership Agreement.

How disability has been included
An innovative partnership has been established with a CBR program working in the location of the emergency project. A community facilitator from the CBR program, also a person with a disability, has been appointed as an advisor to the emergency project, providing training to emergency staff on disability awareness-raising and the identification of children with a disability at the village level for malnutrition screening and other project activities. This advisor also visits the families of children with a disability to educate them on disability and the importance of accessing mainstream services. Finally, the CBR program is also involved in the evaluation of the emergency response by following families of children with a disability throughout the response and collecting case studies on how inclusion has impacted on their lives.
In addition to these initiatives at field level, Plan recognises the importance of sharing lessons learnt and building capacity of both disability and emergency stakeholders for disability-inclusive emergency responses. With support from AusAID, they have included in their proposals training for disability organisations working on emergencies and a reflection workshop for emergency response agencies to facilitate disability inclusion into recovery and disaster risk reduction initiatives.

**Lessons learned**

- Disability inclusion can be achieved through innovative partnerships at the village level between emergency and disability stakeholders.

- Capacity development activities for both disability and emergency agencies should be included in funding proposals.

- Providing opportunities for reflection on disability inclusion in emergency response may facilitate inclusion into the recovery phase.
Checklist for disability inclusion in disaster management

- Have the specific needs of people with a disability been identified in all phases of disaster management?
- Have families been reunited and located near accessible facilities including administration and lighting to improve security?
- Are camps, shelters and other facilities meeting universal design standards?
- Are food distribution points physically accessible including the implementation of alternative means of distributing food and supplies?
- Have ‘Rapid Assessment’ forms been amended to ensure pro-active registration with indicators in place to identify approximately 15% of the target group as people with a disability?
- Have questions in the ‘Rapid Assessment’ been included to identify disability type and barriers experienced by people with a disability?
- Have children with a disability been prioritised for routine protection monitoring and has their access to ‘child friendly spaces’ been confirmed.
- Have gender-based violence protection activities included women with a disability?
- Have elderly people with a disability had their specific requirements and protection needs addressed?
- Is information on aid distribution and relief activities produced in a variety of formats (e.g. pictures/posters, audio/radio, plain language)?
- Are emergency staff identifying people with a disability during outreach or when visiting communities?
- Is community consultation occurring at a time and place accessible to people with a disability?
- Has active participation of individuals with a disability or DPOs in decision-making groups been facilitated?
- Is there budget allocation to cover participation expenses and attendance time for consultations with people with a disability and DPOs?
Has the budget identified an allocation of funds for disability inclusion to cover costs of assistive devices and other inclusive response measures?

Have the underlying attitudes and assumptions of program staff relating to people with a disability been identified and addressed?

Have individuals been identified to represent people with a disability on disaster-response committees and in project planning?

Are people with a disability involved in the reconstruction phase?

How has the emergency, including community and environmental changes impacted on people with a disability? If so, what are the responses?
Useful resources for disability inclusion in disaster management


Access to prosthetic and rehabilitative devices makes recovery in Haiti smoother for this child. © CBM


References


