

Inclusive Humanitarian Action (IHA)



1 in 7 people

Persons with disabilities make up 15% of the global population; over 1 billion people experience disability.⁽¹⁾ Disability prevalence is often higher in situations of conflict or protracted crisis - in Lebanon: 22.6%, in Jordan: 22.9%.⁽²⁾

Unintentionally left behind

In humanitarian contexts, persons with disabilities are disproportionately affected and exposed to heightened risks, and remain amongst the most likely to be left out of humanitarian assistance, as they encounter multiple environmental, institutional, and attitudinal barriers. Pre-existing discrimination is compounded by barriers related to the humanitarian situation, making persons with disabilities at greater risk of exclusion and marginalization.

A growing momentum towards disability inclusion has been observed since the adoption of the UN Convention on the Rights of Persons with

Disabilities (CRPD) in 2008, framing a rights-based approach to disability. Awareness and policy developments have led to more concrete changes and commitments on disability inclusion, including the World Humanitarian Summit (2016) with the launch of the Charter on the Inclusion of Persons with Disabilities in Humanitarian Action, the UN Disability Strategy (2019). It has also led to the development of key operational guidelines such as the Inter-Agency Standing Committee (IASC) Guideline on the Inclusion of Persons with Disabilities in Humanitarian Action as a roadmap to operationalize these commitments.

While there has been some progress towards the inclusion of persons with disabilities, they still remain amongst the most invisible groups to humanitarian actors and are left out of humanitarian assistance. Important gaps therefore still remain in ensuring no one is left behind.



Figure 1. Risk of exclusion from participation; IASC guidelines for the Inclusion of Persons with disabilities in Humanitarian Action.

Introducing Inclusive Humanitarian Action

Inclusive humanitarian action is grounded in international frameworks that affirm the rights of all individuals, including the International Humanitarian Law and International Human Rights Law. Disability inclusive humanitarian action requires placing persons with disabilities at the center of the humanitarian response without discrimination, to ensure that they have meaningful access, both in terms of protection and assistance, and to participate in decision making, allowing them to fully enjoy their rights. IHA focuses on the identification and removal of barriers faced by persons with disabilities when accessing humanitarian services across all sectors, while recognizing and ensuring their capacity to engage meaningfully in the process.

Effective key principles and strategies for all humanitarian actors to promote inclusion in their work at global, national and sub-national levels include: implementing a twin-track approach which on one hand mainstreams disability in humanitarian

policies, programs, coordination and service delivery on the one hand, employing targeted actions that respond to and empower persons with disabilities and their families.

Furthermore, the IASC Guidelines provide an excellent framework for action by emphasizing the four must-do actions across all stages of the program cycle.



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The Gaps

What is preventing humanitarian actors from turning commitment to action?

Based on latest evidence from HI's work on IHA, on a global consultation to collect best practices on disability inclusion, and on recent learnings of humanitarian planning processes, the following gaps and challenges contribute to a lack of disability inclusion:

Turning guidelines and standards into practice: while the sector has come a long way in developing comprehensive standards and guidelines for inclusion of persons with disabilities, humanitarian actors willing to mainstream disability often lack the technical know-how to turn guidance into practice to provide an adapted response.⁽³⁾

Humanitarian coordination and programming are not inclusive of persons with disabilities: Persons with disabilities are still not perceived as part of the general population by the humanitarian community; their access to mainstream humanitarian services and assistance is not systematically monitored. Interventions for persons with disabilities are often perceived as being limited to specialized services, to be addressed by specialized actors, without consideration to their mainstream needs.

Lack of systematic data collection and analysis on disability at coordination and program levels: There

is a clear lack of accurate and reliable quantitative and qualitative data on persons with disabilities and the barriers they face in accessing services at coordination and program levels. This leads to humanitarian actors underestimating the scale of the exclusion faced. This is primarily due to continued use of outdated tools and outreach methodologies, which yield alarmingly low levels of disability prevalence, and thus leading to humanitarian actors being unprepared to accommodate persons with disabilities in programming.

Limited participation of persons with disabilities: Persons with disabilities and their families are not meaningfully engaged in the process of humanitarian assistance, resulting in a very limited understanding of the needs and priorities of these individuals.

Limited financial and technical resources to identify and remove barriers for meaningful access and participation: The absence of direct participation of persons with disabilities, coupled with a lack of accurate data and systematic monitoring, humanitarian stakeholders do not have the required evidence to allocate sufficient financial and technical resources to ensure meaningful inclusion of persons with disabilities.

Key Legal, Policy and Operational Frameworks for Inclusive Humanitarian Action

2008 UNCRPD:

- Article 11: Protection and safety of persons with disabilities in situations of risk and emergency.

2016 Charter on Inclusion of Persons with Disabilities in Humanitarian Action:

- Non-discrimination,
- Participation,
- Inclusive services,
- Inclusive policies,
- Coordination and cooperation.

2019 IASC Guidelines for the inclusion of persons with disabilities in Humanitarian Action - Four "must do" actions:

- Disaggregate data,
- Remove barriers,
- Promote participation,
- Empower persons with disabilities.

Disability Data and Humanitarian Coordination

HI supported the Humanitarian Needs Overview (HNO) process in Jordan and Lebanon to ensure persons with disabilities are effectively identified and their needs assessed. In Lebanon, the prevalence of disability rose from 4% to 9% following the integration of the Washington Group Questions in the HNO 2020. This is an essential first step in bringing invisible populations to the forefront.

Disability Data and Humanitarian Programming

Under a technical partnership, HI supported a mainstream humanitarian agency to systematically identify and engage persons with disabilities in order to **capture, analyze and share data** on their unique situation and needs. Alarming trends disproportionately affecting certain populations, including persons with disabilities, is now regularly shared in coordination platforms to inform programmatic decision making.

HI's Approach to Inclusive Humanitarian Action

Within protection mainstreaming principles in humanitarian action, HI is a recognized leader for Inclusion of persons with disabilities, with the added value of systematically addressing the intersectionality of age, gender and **disability** alongside other key contextual factors contributing to risk and vulnerability. HI employs a **twin-track** approach to mainstream disability (in addition to age and gender) in all programming on the one hand, while employing specific actions to address unique needs of persons with disabilities on the other.

HI's approach to IHA in the humanitarian landscape aims to address four key areas:

1. Technical advice and capacity building to humanitarian actors

Use global and sectoral capacity development approaches and tools to promote disability inclusion at programming, service delivery and monitoring levels. Efforts to operationalize the IASC guidelines on IHA via field technical assistance to humanitarian stakeholders.

2. Enhancing data on disability and persons with disabilities for inclusive programming

Improve the collection and use of quality data,

data analysis, and inclusive Monitoring-Evaluation-Accountability-Learning (MEAL) in humanitarian contexts, and share learnings to advocate for the inclusion of persons with disabilities in humanitarian action.

3. Empower persons with disabilities and their representative organizations

Support local capacity development initiatives for civil society actors, including organizations for persons with disabilities (OPDs), to participate in the humanitarian response.

4. Anchor Disability Inclusion in the Humanitarian Coordination Landscape

Ensure data collection and monitoring tools are disability inclusive and influence humanitarian decision-making at local, regional, and national levels. Anchor disability inclusion in the policies and practices of mainstream humanitarian stakeholders. Work closely with protection, age, and gender advisors to ensure disability is systematically considered in on-going protection mainstreaming efforts.

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Recommendations

Donors and UN agencies

- **Develop internal strategies and policies on disability mainstreaming.**
- **Strengthen evidence on disability and monitoring:**
 - Donors and UN agencies have significant influence over the Humanitarian Needs Overview (HNO) and Humanitarian Response Plan (HRP); continued efforts are required to ensure HNOs systematically collect disability disaggregated data and assess barriers.
 - Efforts are also required to ensure HRPs accommodate persons with disabilities, with adequate budget and technical resources, based on a meaningful and disaggregated analysis of the HNO.
 - Ensure all advocacy efforts and needs assessments emphasize the unmet needs of persons with disabilities, include specific recommendations addressing the situation, and are based on disaggregated data on disability, gender, and age (at minimum).
 - Invest in learnings on disability inclusive humanitarian action through research on change processes, case studies etc.
- **Request and support implementing partners to be disability inclusive:**
 - Encourage use of updated tools for disability identification and data collection at all levels; tools which capture functional ability, such as the UN-approved Washington Group Questions, yield far more useful information that can inform programming as compared to more commonly used tools.
 - Ensure the systematic use of disability disaggregated indicators to measure access to services at sector and program levels.
 - Ensure an appropriate portion of beneficiaries of approved projects are persons with disabilities, with dedicated funding to address their specific needs and access barriers.
 - Fund targeted actions for the removal of barriers faced by persons with disabilities.

- **Promote meaningful participation of persons with disabilities in programming and humanitarian coordination.**

Humanitarian agencies

- **Apply the IASC four 'must-do' actions at every stage of the program cycle.**
- **Adapt project design to consider the following:**
 - Active outreach and information sharing methodologies that will reach the most invisible populations.
 - Accurate identification of persons with disabilities using the Washington Group Questions.
 - Barrier identification and analysis via direct consultation with effected populations.
 - Adaptations to services to ensure barriers identified are removed, and services are accessible.
 - Monitoring access of persons with disabilities via disability disaggregated indicators.
 - Ensuring effected populations are empowered to meaningfully engage in humanitarian assistance.
- **Consider partnering with a disability focused actor who can deliver training, capacity building and hands-on coaching to relevant staff; this will ensure any challenges faced in the process of disability mainstreaming are promptly addressed.**
- **Ensure training and capacity building on disability mainstreaming is not focused on field staff only; ensure everyone is on board, including volunteers, field teams, project managers, MEAL/IM staff, Protection focal points, and even senior management. This will ensure learnings from one project are shared with other programs within the organization.**
- **Keep in mind that disability mainstreaming is a process, not a series of isolated actions or trainings.** Ensure you are systematically using data collected to constantly adapt and improve your programming to better accommodate persons with disabilities.

References

1. WHO and World Bank; World Report on Disability, 2011
2. Humanity & Inclusion and iMAP. Removing Barriers, Lebanon; July 2018
3. Humanitarian actors may not have the technical adapt services for persons with disabilities or to use disability data effectively in advocacy efforts; they may understand that IEC material must be developed in multiple formats, but may not have the know-how to do so etc.