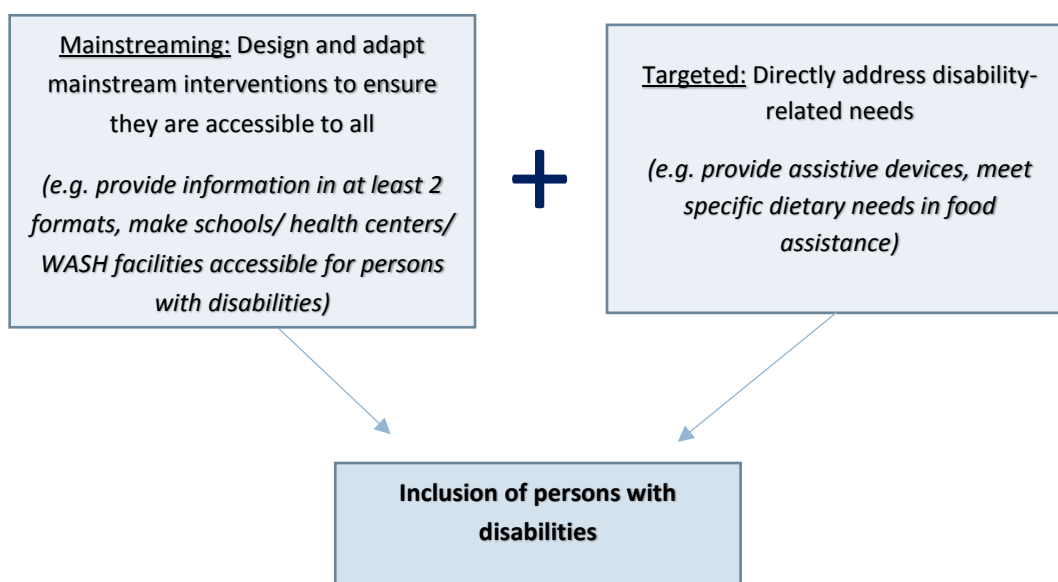# TIP SHEET: INTEGRATION OF DISABILITY IN HUMANITARIAN RESPONSE PLANS

For detailed guidance, including on disability- related considerations in strategic planning, see:
https://www.unicef.org/disabilities/files/Guidance_on_strengthening_disability_inclusion_in_Humanitarian_Response_Plans_2019.pdf

From the HNO (or equivalent), include estimated number of persons with disabilities in need in the **Response Plan Overview** (including **HRP Key Figures)**. Where reliable data is not available, include actions to improve data collection and analysis in **Monitoring and Accountability**.

In **Strategic Response Priorities** and **Sectoral Objectives and Response**, rather than simply listing persons with disabilities as one of the sub-groups to be prioritized, provide a rationale based on the HNO; and describe how the critical problems for persons with disabilities will be addressed, which may require adaptation of the response. Use a twin track approach to design the response (see below) and consider how different response modalities may impact differently on persons with disabilities.

Mainstreaming: Design and adapt mainstream interventions to ensure they are accessible to all

(e.g. provide information in at least 2 formats, make schools/ health centers/ WASH facilities accessible for persons with disabilities)

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Targeted: Directly address disability-related needs

(e.g. provide assistive devices, meet specific dietary needs in food assistance)

Inclusion of persons with disabilities

In **Strategic Response Priorities** and **Sectoral Objectives and Response**, identify opportunities to strengthen participation by persons with disabilities in the response. For example, adapting consultation methods to better include people with disabilities; and improving representation of persons with disabilities in local committees and associations.

In **Monitoring and Accountability**, describe how community engagement modalities, including feedback and accountability mechanisms will be adapted to facilitate access by persons with different types of disabilities (hearing, visual, intellectual, psychosocial and physical), including people who are isolated, have limited mobility or rely on other to support their communication.

In the **Strategic Response Priorities**, consider creating a <u>sub-section or text box</u> presenting key elements of inclusion of persons with disabilities in the response. This doesn't need to have a sole focus on persons with disabilities, but can be integrated with other cross- cutting issues. For example, protection mainstreaming; gender, age and disability sensitive programming; quality programming; or leaving no one behind.	Remember that persons with disabilities, like anyone else from the affected population, have a range of needs related to all sectors. In the **Strategic Objectives and Response**, describe how <u>multi-sectoral response</u> approaches and modalities will be used to address the critical problems of persons with disabilities. Avoid limiting disability- inclusive response to the protection or health sector/s.

In **Strategic Response Priorities**, reference can be made under the description of <u>strategic objectives</u> and <u>specific objectives</u> to how the result or change will impact (and in some cases, differently impact) persons with disabilities and how it reflects the priorities of persons with disabilities themselves. People targeted should be disaggregated by disability (using a 15% target if reliable data on need is not available).

In **Monitoring and Accountability**, consider how disability can be reflected in <u>quantitative and qualitative indicators</u>. At the output level, actions to address critical problems for persons with disabilities (including both mainstreaming and targeted activities- see the twin track approach overleaf) can be reflected through specific indicators; while outcomes in terms of equal access and inclusion may be better reflected through the disaggregation of all relevant indicators by disability[1].

Example indicators	**Example activities**
% of health/ education/ WASH facilities/ shelters constructed or adapted to be accessible to persons with disabilities	Construction or adaptation of facilities or shelters
# of health/ education/ WASH/ shelter/ food security/ protection staff trained on practical approaches to including persons with disabilities	Training of staff
# persons with disabilities engaged in mine risk education activities	Mine risk education delivered in accessible formats and channels
# of persons with disabilities accessing health-related rehabilitation services	Delivery of health-related rehabilitation services

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[1] It Is recommended that tools tested in humanitarian contexts are used to enable disaggregation by disability, such as the Washington Group Short Set of Disability Questions (see http://www.washingtongroup-disability.com/washington-group-question-sets/short-set-of-disability-questions/)