Overview

The purpose of this note is to present guidance on how CERF funding through the 2021 Underfunded Emergencies Window (UFE) allocation should promote both mainstreamed and targeted programming to support persons with disabilities. Persons with disabilities are estimated to represent 15 per cent of the world’s population. In humanitarian contexts, they may form a much higher percentage. They are among the most marginalized people in crisis-affected communities and are disproportionately affected by conflict and emergency situations. In disasters, their mortality rate is two to four times higher than that of persons without disabilities. One in five women is likely to experience disability during her life. Some 46% of persons aged 60 years and over have a disability. One in ten children is a child with a disability.

For the purposes of this note, persons with disabilities are defined as “persons who have long-term sensory, physical, psychosocial, intellectual or other impairments that, in interaction with various barriers, prevent them from participating in, or having access to, humanitarian programmes, services or protection”.

Every year, the Emergency Relief Coordinator (ERC) allocates financial support through CERF’s UFE window for life-saving activities in the least funded and forgotten humanitarian emergencies. Countries are selected based on a quantitative data analysis of humanitarian needs, risks, vulnerabilities, and funding levels, complemented by a review of qualitative, contextual information and consultations including with UN agencies and OCHA headquarters, and NGOs.

In the first 2021 UFE allocation round the Emergency Relief Coordinator is releasing $125 million for 12 countries and an additional funds up to $10 million for 6-7 countries to address foundational issues and advance programming for persons with disabilities. This initiative builds on the successful earmarking of funding in the 2020 UFE allocation for activities addressing gender-based violence.

The projects supported through the $125 million allocation are expected to fully mainstream and directly support persons with disabilities - including men, women, boys and girls with disabilities of different age groups - along with other vulnerable groups such as women and girls. However, the purpose of the additional funding is to incentivize additional catalytic programming that has a transformative effect on support for persons with disabilities.

Mainstreaming support for persons with disabilities ($125mn)

For the purposes of this guidance note, CERF regards mainstreaming as integration of persons with disabilities and associated needs into the wider humanitarian situation that the allocation or project responds to; by contrast, targeting is understood as addressing directly and specifically the needs of persons with disabilities, making it a priority for the respective allocation or project.

All CERF allocations, including funding released through the UFE window, aim to promote an inclusive response that takes into consideration the specific needs of people with disability. For instance, information on the programme should be designed and disseminated in multiple accessible formats (oral, print, sign language, easy-to-read, etc.). Distributions should be planned in a way that allows access for everyone, including persons with disabilities.

The IASC Guidelines on the inclusion of persons with disabilities in humanitarian action (2019) 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. The Guidelines highlight 4 ‘must do’ actions that are required if persons with disabilities are to be included successfully in all phases of humanitarian action:

- Promoting meaningful participation. This includes enabling persons with disabilities to participate in all processes that assess, plan, design, implement, monitor, or evaluate humanitarian programmes, in all phases and at all levels.

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2 Noting that provision of such services is currently limited.
• **Removing barriers.** This includes taking appropriate actions to ensure persons with disabilities aren’t prevented from accessing services but instead are actively enabled.

• **Disaggregating data to help monitor inclusion.** Collecting and using this data\(^3\) can help support planning, implementation, and monitoring of access to humanitarian programmes.

• **Empowering persons with disabilities and developing knowledge/capacity of humanitarian actors.** This includes equipping persons with disabilities and organizations of persons with disabilities (OPDs) with the knowledge, skills, and leadership skills they need to contribute to and benefit from humanitarian assistance and protection. Empowering persons with disabilities should go hand in hand with the capacity development of humanitarian actors on the understanding on the rights and capacities of persons with disabilities. This can include sensitization and learning sessions, coaching and technical support for inclusive practical approaches, revising existing assessment or training tools or documenting good practice and learning in participatory manner. Capacity development of humanitarian actors should be clearly needs based, and accordingly tailored to allow for the better inclusion of persons with disabilities in the delivery of live saving humanitarian assistance.

In developing their CERF UFE funding applications, HCTs and UN agencies are encouraged to consider these four ‘must do’ actions, in consultation with disability and inclusion experts at global, regional and national levels, with dedicated inclusion working groups (where these exist, particularly at the cluster level) and Organizations of Persons with Disabilities or relevant networks in support of people with disabilities.

**Targeted interventions (Up to $10 million)**

As noted above, $10 million is being made available, as part of the UFE round, to address foundational issues and advance programming for persons with disabilities. The objectives of the additional CERF funding for persons with disabilities are to:

- Address the specific requirements of persons with disabilities by providing specific interventions.
- Catalyze lasting improvements by strengthening collective structures and systems to enhance the ability of humanitarian actors to develop and implement quality programmes that are inclusive of persons with disabilities.
- Promote greater accountability in the system, including by increasing and improving the participation of persons with disabilities and organizations of persons with disabilities.

**Partnerships with organizations of persons with disabilities in developing and implementing related interventions are highly encouraged** and should be explained in project proposals (including their role as implementing partners and recipients of sub-grants). **Projects that are funded through the additional envelope of $10 million will be granted up to 18-month project timeframes**, rather than the traditional 12 months, in order to support such partnerships – and in cases where the nature of the activities would require additional time for consultation and engagement with persons with disabilities and related originations and networks.

**Principles**

**CERF encourages HCTs/UNCTs to adopt the following principles:**

- Focus on foundational issues that can inform system-wide change that extends beyond this allocation. For example, strengthening quality data collection, engaging persons with disabilities, enhancing partnerships.
- HCTs/UNCTs should ensure consultations with disability experts at the country level (including appropriate working groups and Organizations of Persons with Disabilities) as part of defining their approach/vision to the envelope for people with disabilities.
- Consider programs that focus specifically on people with disabilities, and where gaps exist in assistance.
- Think through and reflect - in country strategies and projects - how this targeted funding will inform future interventions in this context.
- Look to adopt specific participatory measures to document promising or good practices.

\(^3\) See for e.g. the **WG short set of questions** and the **Child Functioning Module**; the barrier tool developed by global WG for the IOM DTM tool on identifying barriers that can be adapted to other contexts; and the e-learning module on disability inclusive data collection in humanitarian action.
• Adopt delivery modalities, and monitoring, evaluation, accountability, and learning tools or others that can be replicated, broadened, and scaled up.

• Encourage partnerships across the whole spectrum of persons with disabilities work, including building of representative networks, focus on broad engagement, particularly in contexts of displacement.

• In cases where OPDs and other partners are non-existent, look to set up committees that engage persons with disabilities in governance mechanisms.

• Look to set up technical or task forces within the HCT that can link with PSEA and/or accountability initiatives in place (as done in Syria for instance).

• Endeavor to document learning to inform adaptation of existing sector wide standards and SOPs, in applicant countries.

For this earmarked UFE allocation, all activities and initiatives should be designed and documented to ensure sustainability and lesson learning for future allocations/UFE rounds.

Scope of programming
Activities should be in the form of stand-alone targeted projects. In developing project proposals specifically for this additional funding envelope, HCTs are encouraged to prioritize programming that focuses on life-saving humanitarian outcomes that can be funded by CERF, achieved through the following (non-exhaustive) list of potential programme/project activities:

• Improving access to assistive technology assistive technology (including devices and services) and functional rehabilitation to persons with disability.

• Retrofitting accessibility to physical structures where life-saving programming takes places.

• Providing accessible transportation, allowances, and outreach mechanisms to address distance and physical access.

• Providing multi-purpose cash assistance that is inclusive and accessible, builds on partnerships and uses effective modalities such as vouchers to support the additional costs faced by households with members with disabilities. Ensure that the modalities of distribution are inclusive and build on effective partnerships that serve persons with disabilities well- including for example through voucher assistance.

• Improving the accessibility of information and communication channels.

• Strengthening access to digital technology related to life-saving programming.

• Strengthening the capacities of humanitarian staff to work with persons with disabilities (as part of a broader set of humanitarian activities)

• Partnering with organizations of persons with disabilities through implementing partnerships, meant to obtain clear operational outcomes in support of persons with disabilities.

• Supporting the inclusion of persons with disabilities in community-based and other civil society organizations engaged in humanitarian response processes (as part of a broader set of humanitarian activities)

Of note, while efforts focusing on preventing disabilities are also a matter of humanitarian programming and public health interventions, these are outside the scope of this earmarked funding on disability inclusion.

Technical support
CERF encourages HCTs to reach out to disability and inclusion experts at country level and/or the relevant clusters, working groups, OPDs or relevant networks in support of people with disabilities during the design and planning of CERF UFE project proposals. CERF especially encourages proactive outreach and the meaningful engagement of PwD throughout the entire project cycle. HCTs can also contact the CERF UFE disability focal point, Stefan Gherman, who will help to coordinate expert guidance and support. Stefan can be reached at teodor.gherman@un.org. Please copy Robert Gaylard, CERF UFE Lead (gaylardr@un.org).
**Background**

Persons with disabilities are estimated to represent 15 per cent of the world’s population. In humanitarian contexts, they may form a much higher percentage. They are among the most marginalized people in crisis-affected communities and are disproportionately affected by conflict and emergency situations. In disasters, their mortality rate is two to four times higher than that of persons without disabilities. One in five women is likely to experience disability during her life. Some 46% of persons aged 60 years and over have a disability. One in ten children is a child with a disability.

Persons with disabilities are a diverse group, and may experience differently the attitudinal, physical and communication barriers that impact on their participation and inclusion in humanitarian action. Due to the intersectionality of factors such as age, gender, ethnicity, location and race, people with disabilities face compounding marginalization and discrimination. For example, in humanitarian crisis settings, children with disabilities are at a higher risk of abuse and neglect, and women with disabilities are at more risk of sexual violence. Both these factors have been dramatically exacerbated by the COVID-19 pandemic.

The Convention on the Rights of Persons with Disabilities (2006) introduced a new paradigm for persons with disabilities. It shifted policy and policy implementation from a charitable and medical approach to one based on rights. The international system has also become more inclusive following adoption of the 2030 Agenda for Sustainable Development (2015), which affirms that no one should be left behind and that those who are furthest behind should be supported first. The Sendai Framework for Disaster Risk Reduction (2015) and the One Humanity Shared Responsibility: Report of the Secretary-General for the World Humanitarian Summit (2016) affirm the same principles, as do many commitments that derive from the World Humanitarian Summit, including the Charter on Inclusion of Persons with Disabilities in Humanitarian Action.

At the World Humanitarian Summit in 2016 the Charter on Inclusion of Persons with Disabilities in Humanitarian Action was endorsed, reflecting a commitment to address the heightened risk faced by persons with disabilities and their marginalization from humanitarian response. This was followed by development of the IASC Guidelines on Inclusion of Persons with Disabilities in Humanitarian Action, launched in late 2019. These guidelines have been designed to provide practical information for humanitarian actors and other relevant stakeholders, and place persons with disabilities, and their human rights, at the centre of humanitarian action. These guidelines outline key actions that humanitarians need to take to effectively identify and respond to the needs and rights of persons with disabilities.

The extent to which there is a conducive environment for disability programming depends on the enabling environment, which can obviously be very weak in humanitarian contexts. It can depend on the quality of political and legal frameworks on disability, the extent to which services for persons with disability are available, accessible and effective; the presence of operational Organizations of Persons with Disabilities; and the availability and quality of data on persons with disabilities.