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**COUNCIL OF DELEGATES
OF THE INTERNATIONAL RED CROSS
AND RED CRESCENT MOVEMENT**

Antalya, Turkey
10–11 November 2017

**Strategic Framework on Disability Inclusion
by the International Red Cross and Red Crescent Movement**

PROGRESS REPORT (MID-TERM REPORT)

**Document jointly prepared by the
International Committee of the Red Cross, including the ICRC MoveAbility Foundation,
and the International Federation of Red Cross and Red Crescent Societies
in consultation with National Societies and staff and volunteers with disabilities**

Geneva, September 2017

EXECUTIVE SUMMARY

This mid-term report on the main areas of progress towards implementing the Strategic Framework on Disability Inclusion (2015–2019) by the International Red Cross and Red Crescent Movement, adopted by the Council of Delegates in 2015, has been jointly prepared by the IFRC, the ICRC and the ICRC MoveAbility Foundation.

Persons with disabilities represent approximately 15% of the world's population¹ and often face a variety of barriers that negatively impact their health, education and employment outcomes, leading to increasing poverty. Attention to disability inclusion within humanitarian and development work globally has grown significantly since the adoption of the resolution in 2015, as demonstrated by the adoption of the *Charter on Inclusion of Persons with Disabilities* for the World Humanitarian Summit in 2016 and the development of a number of inter-agency policies and guidelines.

Although Movement components have a long history of providing a range of disability-related services and programmes, the Movement recognized that, in line with the Fundamental Principles – humanity and impartiality in particular – the necessary measures should be put in place to ensure that internal disability-inclusive policies are implemented and that people with disabilities can access all the services and programmes that they provide. The potential for the Movement to improve disability inclusion in its own services and support the local voice of people with disabilities in these global processes is significant.

There is already a wide range of disability-related services, programmes and initiatives within the Movement, and attention to the different aspects of disability inclusion was increased with the adoption of the Strategic Framework. These are listed in the sections of the report on each Strategic Objective. Key areas include the IFRC's increased focus on providing guidance to ensure disability-inclusive programming, particularly in emergency response and, more specifically, in shelter programming, the ICRC's increased support for and focus on its physical rehabilitation programme and MoveAbility's renewed strategic direction towards a more comprehensive approach to inclusion. National Societies have continued to provide a range of disability-specific services and increased the inclusivity of both their general programming and their human resources process in a number of notable instances, particularly in providing training for persons with intellectual disabilities and building their capacity to work as volunteers in National Societies.

However, these various initiatives from the different components remain, for the most part, only loosely connected, rather than driven by the strategy, and funding for a comprehensive approach is lacking. The increased collaboration between the Geneva institutions – notably through a shared coordination position and planned joint coordination group – highlights the potential for increased coherence over the next two years.

Only nine National Societies provided the requested data on programmatic implementation. The Council of Delegates is requested to recommend that National Societies provide this information through a separate survey mechanism after the 2017 session of the Council, with a view to assisting National Societies, the IFRC and the ICRC in providing informed and appropriate support for disability inclusion efforts within the Movement.

Based on the experiences summarized in this report, it is proposed to focus on the following priority areas for implementation in the coming two years: **improved accessibility, recruitment of staff and volunteers with disabilities, mainstreaming of disability**

¹ World Health Organization, *World Report on Disability*, 2011.

inclusion throughout programmes and services, partnerships and meaningful engagement with disabled people's organizations, gathering of data on the situation of persons with disabilities, adoption of evidence-based practices, awareness-raising campaigns and advocacy in humanitarian diplomacy.

1) INTRODUCTION

Persons with disabilities represent approximately 15% of the world's population² and often face a variety of barriers that negatively impact their access to health care, education and employment, leading to increasing poverty. In addition, persons with disabilities are disproportionately affected in times of conflict and disaster and are at higher risk of becoming victims of violence or abuse than the general population.

Movement components, and National Societies in particular, have a long history of providing a number of disability-related services and programmes. However, insufficient measures are in place to ensure persons with disabilities can benefit from mainstream programmes and services. The Movement recognized that, in line with the Fundamental Principles (humanity and impartiality in particular), the necessary measures should be put in place.

The Strategic Framework on Disability Inclusion adopted in 2015 was a catalyst for increasing efforts within the Movement based on three strategic objectives, according to which this report is structured:

- Strategic Objective 1: All components of the Movement adopt a disability-inclusive approach.
- Strategic Objective 2: Persons with disabilities have equal access to the services and programmes the Movement provides, thereby enabling their inclusion and full participation.
- Strategic Objective 3: All components of the Movement endeavour to change mindsets and behaviours in order to promote respect for diversity, including disability inclusion.

Attention to disability inclusion within humanitarian and development work has grown since the adoption of the resolution, as demonstrated by the adoption of the *Charter on Inclusion of Persons with Disabilities* at the World Humanitarian Summit in 2016 and the ongoing development of a number of inter-agency policies and guidelines.

The potential for the Movement to improve the disability inclusion of its own services and support the local voice of people with disabilities in these global processes is significant. The ICRC and the IFRC are actively involved in a number of the inter-agency processes and bring the perspective and experience of National Societies. This potential has been tapped to some extent, as outlined in this report, although much more could be done.

2) BACKGROUND TO THE REPORT

This report has been jointly prepared by the IFRC and the ICRC, with input from the ICRC MoveAbility Foundation, to outline the main areas of progress known in implementation of the Movement-wide Strategic Framework on Disability Inclusion (2015–2019) by the International Red Cross and Red Crescent Movement. It serves as a mid-term report, with a final report to be submitted in 2019. Both the process and the content of the report reflect the collaboration between the two organizations on this issue.

² World Health Organization, *World Report on Disability*, 2011.

The data has been primarily collected through the global and regional focal points of the ICRC and the IFRC. In order to provide an overview of National Society action, an 11-question survey was developed as part of the official mechanism for reporting on statutory decisions. Unfortunately, there were only nine responses to this survey from National Societies, the majority of which were from high-income countries. A brief summary of results from the survey are presented in this report. However, the very limited number of responses precludes a comprehensive analysis of the extent of disability inclusion in the Movement, leaving significant gaps. **To complement the overview from the IFRC and the ICRC, we have included a few illustrative examples of National Society action under the various areas of the Strategic Framework, but these are not wholly representative of the full scope of work the survey was designed to collect information on.**

The Council of Delegates is requested to recommend that National Societies provide this information through a separate survey mechanism after the 2017 session of the Council. This is critical to assisting National Societies, the IFRC and the ICRC in providing informed and appropriate support for disability inclusion efforts within the Movement. Another survey asked staff and volunteers who identified themselves as having a disability about the extent to which their organization supports any needs they may have related to their impairment, and the data from this survey is presented in section 3.6.

3) ANALYSIS/PROGRESS

3.1 Movement-wide achievements

Representatives of all Movement components (the ICRC, the IFRC and the Australian, Norwegian and British Red Cross) jointly managed the process to start implementation of the Strategic Framework. The IFRC chaired the meetings of the small Movement Working Group during 2016 and led a collaborative process to develop a plan of action, an expanded Movement coordination group and the process to recruit a Movement-wide disability inclusion coordinator.

The coordinator took up her position in May 2017 in an arrangement that itself demonstrates coordination within the Movement, with a staff contracted and funded by the Finnish Red Cross, on loan to the ICRC, hosted in the ICRC MoveAbility Foundation and with a primary reporting line to the IFRC. The coordinator will oversee implementation of the Movement-wide Strategic Framework and lead the Movement Coordination Group on Disability Inclusion. The coordinator is herself a wheelchair user, which further promotes the objectives of the Strategic Framework towards supporting the inclusion of persons with disabilities as staff.

In March 2016, the ICRC finalized its own institution-wide Framework on Persons with Disabilities for the period 2016–2018. The Framework is aligned with the UN Convention on the Rights of People with Disabilities (CRPD) and the Movement-wide Strategic Framework, and sets out the ICRC's key orientations: maintaining its main areas of contribution, namely protection and assistance activities, legal frameworks, accessibility to programmes and services and employability, broadening its scope to disability *inclusion* and addressing gaps in internal processes, programmes and services.

The existing internal ICRC Disability Working Group met throughout 2016 and 2017 to coordinate efforts for the implementation of the ICRC Framework. In early 2017, the ICRC's Physical Rehabilitation Programme recruited its first headquarters advisor on disability sport and inclusion, who is a wheelchair user, in order to coordinate and continue to expand work in this area. Field positions dedicated to these same issues exist in Cambodia, Ethiopia and India.

In 2016, the ICRC reviewed the mission and business plan of its Special Fund for the Disabled, resulting in the transformation of the Fund into the ICRC MoveAbility Foundation (hereafter “MoveAbility”).

In November 2016, a *Movement Workshop on Disability Inclusion and Victim Assistance in South-East Asia* was hosted by the Thai Red Cross Society, with support from the Norwegian Red Cross and in cooperation with the ICRC and the IFRC. The broad participation of National Societies from the region, partner National Societies, the ICRC, the IFRC, MoveAbility and organizations working with disability inclusion in the region permitted the sharing of lessons learned and the identification of best practices for the inclusion of people with disabilities and assistance to victims of unexploded ordnance. The meeting concluded with a brief survey of each organization’s current situation regarding the Strategic Framework and led to the identification of key action points for each organization to follow up after the event.

3.2 Strategic Objective 1: All components of the Movement adopt a disability-inclusive approach

Enabling action 1.1: All components of the Movement better understand the number and situation of persons with disabilities within their respective areas

In order to better develop programmes to reach persons with disabilities and for improved accountability, the IFRC has been promoting disability disaggregated data in its Strategic Framework on Gender and Diversity issues 2013-2020 since 2015 and in 2017 developed a technical note on measuring “people reached”, including guidance on how to disaggregate by sex, age and disability, to support future assessments and the development of evidence-based practices.

Enabling action 1.2: All components of the Movement identify and address physical, communication and institutional barriers

The IFRC is currently having new facilities built for its headquarters in Geneva. In addition to adherence to local regulations on accessibility, universal design and usability among persons with disabilities are central in the planning of the new IFRC facilities. Comprehensive information on the accessibility of regional IFRC offices has not been collected, although in the process of moving the European regional office, accessibility features were included.

The ICRC has continued to take steps to reduce physical barriers for persons with disabilities, with a particular focus on mobility impairments, both for ICRC-run/supported health infrastructures and physical rehabilitation centres as well as its own premises. For example, all new large-scale facilities built by the ICRC are required to meet ambitious accessibility standards. Examples include the construction of two physical rehabilitation centres in Myanmar and the inauguration of ICRC offices in Phnom Penh and Kinshasa as disability-friendly work spaces. The ICRC’s *Physical Rehabilitation Centres: Architectural Programming Handbook* (2014),³ which outlines accessibility standards, was translated into French in 2016.

Work towards accessibility has focused on the built environment and has been specific to the needs of persons with physical impairments. No information was available on the accessibility of the built environment for people with other types of impairments or on addressing the needs of persons with disabilities in terms of access to information.

³ <https://www.icrc.org/en/publication/4133-physical-rehabilitation-centres-architectural-programming-handbook#>

Enabling action 1.3: All components of the Movement have human resources policies, systems and practices that actively encourage and support the inclusion of persons with disabilities as staff, volunteers and members

In 2017, the IFRC has been reviewing its recruitment processes for “surge” response staff in emergency operations. Essential disability inclusion knowledge criteria have been included in the competencies for all surge staff. In addition, work is ongoing to define technical disability inclusion expert roles to support surge staff in addressing disability inclusion issues in disaster response.

The ICRC is developing a new Human Resources Global Framework to increase diversity and inclusion in its workforce. Approximately 250 consultations with ICRC staff at headquarters and in the field have provided feedback on experiences of workplace culture in relation to diversity and inclusion, with disability inclusion arising as one of several key themes. Several proposals have been made within the framework on how to promote diversity in recruitment.

The ICRC has staff with disabilities in several delegations, notably where it is active in physical rehabilitation centres. However, the current obligatory medical criteria for international assignments exclude people with certain disabilities. The ICRC is currently revising its global talent acquisition policy, which creates an opportunity for adapting these medical criteria for certain positions and to better support the employability of people with disabilities.

In less fragile contexts, MoveAbility has, in three of four regional offices, successfully recruited disability officers who are themselves mobility aid users in order to improve understanding of the context and adapt the MoveAbility response to inclusion.

The Australian Red Cross has developed an exemplary disability inclusion policy. The Accessibility and Inclusion Plan 2016–2019,⁴ which builds on its previous Disability Action Plan (2012–2015), envisions that “*Australian Red Cross respects people of all abilities, enables inclusion and addresses barriers to meaningful participation*”. The focus is on: “*building a culture of inclusion; recruiting, retaining and developing a workforce of staff and volunteers that includes people of all abilities; providing good access and appropriate functionality in properties, assets and facilities for people of all abilities; communicating effectively with and about people of all abilities; and ensuring services are accessible and responsive to people of all abilities*”. Although listed under Enabling Action 1.3, this example from the Australian Red Cross meets several of the Strategic Framework’s Enabling Actions.

The German Red Cross is currently implementing a project titled “*Project Inclusion (P-Ink): Sensitization and Qualification to Develop and Support Inclusive Projects*”, which includes a curriculum for the training of staff on inclusion-related topics, such as the “*Fundamental Principles of the Red Cross/Theory of Inclusion/German Law and UN Conventions*”, inclusion indices, fundraising for inclusive projects and management tools. Training is planned to certify participants as Red Cross inclusion managers after completing 1.5 years of training and initiating various inclusive projects at branch level.

Enabling Action 1.4: All components of the Movement actively build partnerships with People with Disabilities Organisations and other relevant civil society organizations

The Movement in general has not engaged with disabled people’s organizations (DPOs), although several National Societies have partnered with DPOs for mutual capacity building and to better provide National Society services to persons with disabilities. For example, the Palestine Red Crescent Society partners with the General Union of Persons with Disabilities in Palestine, the Palestinian Union for the Deaf and Stars of Hope for Women with Disabilities.

⁴ <http://www.redcross.org.au/accessibility-and-inclusion-plan.aspx>

The Mongolian Red Cross Society has a Memorandum of Understanding with the Mongolian Disabled Persons' Association, and its governing board includes an executive board member from this association.

The Movement has built partnerships with other civil society organizations that work towards disability inclusion. In March 2017, the IFRC renewed its cooperation agreement with the Special Olympics. This partnership started in 2013, supporting activities in 19 countries. As a result of the partnership, protocols on caring for individuals with intellectual disabilities during natural disasters have been compiled in Peru; Special Olympics athletes have been taught basic first aid skills in Venezuela, Botswana, Indonesia and Singapore; asylum seekers in Australia have boosted their confidence through volunteering at Special Olympics Games; young people with and without disabilities have been united through sports in Austria, Lebanon and Kenya; and families have received valuable health information from Red Cross and Red Crescent trainers in Greece, Senegal and Kazakhstan.⁵ Collaboration between National Societies and the Special Olympics in each country also contributes to mainstreaming disability in National Society actions (Enabling Action 2.1.).

The aim of the partnership between DPOs and MoveAbility is to improve the social inclusion of persons with disabilities. For example, in Vietnam collaboration with Action to the Community Development Centre was essential in encouraging the government to become involved in the Universal Health Coverage study. In the same spirit, this collaboration also succeeded in influencing the Vietnamese State health insurance office to include mobility aids in its policy.

3.3 Strategic Objective 2: Persons with disabilities have equal access to the services and programmes the Movement provides, thereby enabling their inclusion and full participation

Enabling action 2.1: All components of the Movement mainstream disability throughout their programmes and services

In the IFRC, mainstreaming disability is embedded within implementation of the gender and diversity framework and the Area of Focus on Social Inclusion. The Gender and Diversity Framework emphasizes disability inclusion as an aspect of diversity, as does the practical guidance document *Minimum standard commitments (MSC) to gender and diversity in emergency programming (Pilot Version)*.⁶ This approach has also been included in regional approaches to gender and diversity.

The 2016–2017 revision of this MSC guide increases and improves the attention to disability inclusion in programming. The IFRC's approach to protection includes a focus on addressing the needs and concerns of persons with disabilities. For example, in IFRC Europe regional programmes, disability inclusion has been incorporated into training and emergency appeal revisions and proposals, mostly when addressing vulnerabilities and individual protection needs.

In 2015, the IFRC developed the guidelines *All Under One Roof: Disability-inclusive shelter and settlements in emergencies* for disability inclusion in shelter programming in emergencies in collaboration with CBM and Handicap International.⁷ A two-day training module on the guidelines was developed, targeting various audiences from decision-makers to shelter specialists and volunteers. The training package is available online, including in accessible

⁵ Special Olympics–IFRC Partnership Report 2016.

⁶ *Minimum standard commitments to gender and diversity in emergency programming: Pilot Version* <http://www.ifrc.org/Global/Photos/Secretariat/201505/Gender%20Diversity%20MSCs%20Emergency%20Programming%20HR3.pdf>

⁷ *All Under One Roof: Disability-inclusive shelter and settlements in emergencies* http://www.ifrc.org/Global/Documents/Secretariat/Shelter/All-under-one-roof_EN.pdf

versions (large print and suitable for screen readers). In 2016, to support the emergency response in Nepal, the manual and training materials were translated into Nepalese and incorporated into the Shelter Cluster's response. The materials are also available in Spanish, initially translated for earthquake response in Ecuador.

As part of the IFRC's Global Water and Sanitation Initiative, latrine access is being improved. Both communal and institutional latrines (typically at schools and health facilities) are being constructed with access ramps and/or larger stall size for access by persons with disabilities on a case-by-case basis. The IFRC WASH strategy includes a focus on accessible and inclusive WASH programming, with the aim of ensuring that IFRC WASH activities systematically consider the needs of persons with disabilities in the future.

In ICRC Protection and Assistance programming, particular attention is paid to the specific needs of persons with disabilities – for example, in activities pertaining to the protection of the civilian population, considerations of such needs are currently being incorporated into guidance on addressing internal displacement and sexual violence. Protection activities also seek to ensure that persons with disabilities are identified and integrated into general assessments and the subsequent response.

In health services, health care needs are assessed by considering the specific needs of persons with mental health disorders and physical disabilities, especially when there are barriers to accessing health care. In accessing health activities in detention, the ICRC closely monitors barriers faced by persons with disabilities and/or if they are at risk of experiencing discrimination.

An example from the American Red Cross highlights how the needs of persons with disabilities can be mainstreamed in disaster preparedness services. A dedicated resource offers persons with disabilities information on how to prepare for disasters and provides manuals and assessment tools that can be downloaded.⁸

Enabling action 2.2: All components of the Movement provide disability-specific services, where relevant and appropriate

The ICRC's Physical Rehabilitation Programme reaches over 398,000 beneficiaries a year in 34 countries, through 150 projects, including 142 service providers, 3 component factories and 5 training institutions. In addition, MoveAbility supports 27 service providers and 5 training institutions in 14 countries, which provide services for around 45,000 beneficiaries.

A growing number of ICRC delegations are involved in sports activities for persons with disabilities, which have great benefits for social inclusion and the reduction of stigma. Activities are ongoing in contexts such as Afghanistan, Bangladesh, India, Gaza, South Sudan, Cambodia and Myanmar. For example, in Afghanistan the ICRC supports a wheelchair basketball programme with 500 active players, 120 of whom are female. Moreover, the ICRC has produced a set of guiding principles on disability sport, as well as guiding principles for setting up wheelchair services in less resourced settings, drawing on its experience in these areas.

In 2015, the IFRC Psychosocial Centre developed a guidance manual and training guide on a psychosocial approach promoting the inclusion of persons with disabilities.⁹ The guide aims to support empowerment, by creating awareness and providing guidance along with practical

⁸ <http://www.redcross.org/get-help/how-to-prepare-for-emergencies/disaster-safety-for-people-with-disabilities>

⁹ <http://pscentre.org/resources/different-just-like/>

resources for inclusive psychosocial activities for all kinds of settings, mainly adapted sports and other physical activities.

MoveAbility has carried out an evaluation of its partnership with the Viet Nam Red Cross Society and will use the findings to develop a model of cooperation with National Societies, applicable throughout the Movement.

Many National Societies have long-standing disability-specific services, such as special needs schools in Hong Kong, Egypt and Palestine. Many have a long history of providing rehabilitation services, such as the Palestine Red Crescent Society's Rehabilitation and Ability Development Department, which provides services through 29 rehabilitation centres and therapeutic rehabilitation units, 12 occupational therapy and physiotherapy service centres, five units dedicated to hearing and speech rehabilitation and community-based rehabilitation for persons with disabilities. The Botswana Red Cross Society has three rehabilitation centres and the Kenya Red Cross is engaged in disability inclusion programming as well as the delivery of direct services.

Enabling action 2.3: All components of the Movement actively adopt prevention and early intervention approaches to address the causes of impairments

Little information was available on implementation of this Enabling Action at the time of preparing this report, due to the limited response to the survey. However, some long-standing programmes are implemented by National Societies. The Palestine Red Crescent Society conducts programmes on mine risk education, road safety and early childhood screening for hearing and mobility impairments. The Cambodian Red Cross Society has an extensive mine awareness programme with a database of people affected by land mines, which is used to support targeted assistance and social inclusion through micro-credit.¹⁰ The Myanmar and Viet Nam Red Cross Societies also have landmine awareness programmes.¹¹ The Mexican Red Cross has committed itself to the national goal of saving more than 60,000 lives and preventing 110,000 disabilities and three million hospitalizations caused by road accidents and actively recruits people with disabilities as volunteers in this programme.¹² The Viet Nam and Russian Red Cross Societies are other examples of National Societies with road safety programmes.

Enabling action 2.4: All components of the Movement actively consider adopting gender-sensitive poverty alleviation and violence prevention, mitigation and response initiatives within its programmes and services, where appropriate and relevant

The IFRC's Minimum Standard Commitments highlight the intersectionality between gender and diversity and demonstrate ways to address this. In regional implementation frameworks, especially in Asia Pacific and in Europe, addressing disability inclusion issues has been closely linked with and informed by the gender and diversity approach to programming.

Australian Red Cross Employment Services helps people with disabilities achieve long-term, sustainable employment by matching their skills with the needs of local businesses and employers. Every year, it connects with 800 employers in Queensland and finds productive, rewarding employment for 1,400 jobseekers, through 46 locations throughout Queensland. The Viet Nam Red Cross, in collaboration with the Spanish Red Cross and MoveAbility, has an extensive programme offering vocational training and support to access the labour market. The German Red Cross also has programmes supporting people with disabilities to find employment.

¹⁰ <http://www.rcrc-resilience-southeastasia.org/wp-content/uploads/2016/11/4C-CRC-data-colection-presentation-in-BKK-28-29-Nov-2016-final-draft.pdf>

¹¹ <https://www.icrc.org/en/document/myanmar-repairing-prosthetics-and-restoring-mobility>

¹² <https://www.grsproadsafety.org/about/members/mexican-red-cross/>

3.4 **Strategic Objective 3:** All components of the Movement endeavour to change mindsets and behaviour in order to promote respect for diversity, including disability inclusion

Enabling action 3.1: All components of the Movement influence and model behaviour to address discrimination and foster the full inclusion of persons with disabilities

In 2016, the ICRC and the IFRC established a partnership with the International Disability Alliance (IDA). The partnership sparked initial enthusiasm for making links with the planned global partnership of National Societies and national members of IDA, but no follow-up has been implemented thus far.

The Palestine Red Crescent Society delivers disability awareness training to its staff and volunteers annually, and the Viet Nam Red Cross has been running public awareness campaigns on the situation and rights of people with disabilities for many years. On the basis of the Australian Red Cross Inclusion Training Package, MoveAbility has developed an awareness-raising campaign in Viet Nam in order to influence the private sector to proactively recruit persons with disabilities.

Enabling action 3.2: All components of the Movement actively increase their knowledge of disability in order to promote evidence- based practice

The IFRC is a member of the Age and Disability Capacity Building Programme (ADCAP) Consortium, a group of seven agencies working to promote age and disability-inclusive humanitarian assistance. The IFRC has worked closely with the Consortium on the development of *Minimum Standards for Age and Disability Inclusion in Humanitarian Action*,¹³ with a specific focus on the intersection between aging, disability and gender. In 2016, the IFRC attended the annual meeting of the Consortium and facilitated a session on sexual and gender-based violence against older persons and persons with disabilities. The 2016–2017 revision of the IFRC *Minimum standard commitments to gender and diversity in emergency programming (Pilot Version)* increases and improves the attention to disability inclusion in programming and is also aligned with the ongoing revision of ADCAP Minimum Standards that will be published in September 2017.

Enabling Action 3.3: All components of the Movement actively advocate for the full and meaningful inclusion of persons with disabilities through Humanitarian Diplomacy

In 2016, the ICRC and the IFRC collaborated with the International Disability Alliance to organize a joint celebration of the 10th anniversary of the CRPD. The event included a panel at the ICRC's Humanitarium hall. Four of the five speakers had a disability, in addition to the pianist who was blind. Speakers called on humanitarian actors to engage directly with persons with disabilities in disaster risk reduction, emergency response and recovery efforts.¹⁴

The ICRC and the IFRC contributed to the drafting of the *Charter on Inclusion of Persons with Disabilities* for the World Humanitarian Summit in 2016, endorsed by a number of States and UN agencies as well as by the Movement. With support from the IFRC, the Viet Nam Red Cross Society spoke during the session at which the charter was endorsed.

The ICRC's Legal Division proactively engaged with States and OHCHR to ensure recognition of the contribution of international humanitarian law (IHL) in the resolution on the rights of persons with disabilities in situations of risk, including situations of armed conflict, humanitarian emergencies and natural disasters, adopted in March 2016 by the UN Human Rights Council.

¹³ *Minimum Standards for Age and Disability Inclusion in Humanitarian Action*

<http://www.helpage.org/newsroom/latest-news/age-and-disabilityinclusive-humanitarian-response-minimum-standards-launched/>.

¹⁴ A short video from the event to mark the 10th anniversary of the UNCRPD shows the highlights: <https://www.youtube.com/watch?v=qNMaAHcKcnw&t=1s>.

The resolution urges States and other relevant stakeholders to take effective measures to promote the inclusion of persons with disabilities in such situations.

The ICRC's Legal Division has engaged in a number of actions to clarify the relationship between the CRPD and IHL. Resources are being developed to analyse the complementary character of the rules in both bodies of law relevant to persons with disabilities to contribute to an improved understanding of disability in international legal frameworks. The ICRC is in touch with the government of New Zealand with a view to influencing humanitarian elements in the upcoming UN General Assembly Resolution on women and girls with disabilities to be adopted in autumn 2017. The ICRC and the IFRC regularly participate in meetings of the Inter-Agency Standing Committee Task Team on Inclusion of Persons with Disabilities in Humanitarian Action. IFRC focal points for shelter and disaster risk reduction are engaged in Sphere Project revisions on disability inclusion.

MoveAbility's primary objective is to lead the setting up of national platforms to bring together relevant stakeholders, such as national authorities, DPOs, physical rehabilitation service providers, training institutions and National Societies, in order to establish and implement national action plans and policies in the physical rehabilitation sector. Such platforms serve the purpose of advising governments on the implementation of relevant legislation, minimum standards and steps to take in order to promote inclusion and service action as well as the engagement of DPOs, civil society and the private sector. For example, in Tanzania the platform is recognized and chaired by the Ministry of Health. The Tanzanian Federation of Disabled People's Organizations (SHIVYAWATA) and the Tanzania Red Cross National Society are actively involved, and MoveAbility acts as technical adviser.

Finally, both the ICRC and MoveAbility participated in the 10th Conference of States Parties to the CRPD in June 2017 and highlighted the need for rehabilitation as a first and necessary step against multiple discrimination as well as the positive impact of social inclusion for persons with disabilities.

3.5 Resolution 4 reports from National Societies

An 11-question survey was implemented as part of the official mechanism for reporting on statutory decisions. Reports were submitted by nine National Societies, which unfortunately does not provide a comprehensive overview and analysis of the implementation of disability inclusion.

Of the nine National Societies who responded to the survey, six report having implemented the Strategic Framework to at least some extent; four have some information on the number of staff and volunteers with disabilities; five report that over half of their facilities are accessible; five have modified human resources processes to encourage persons with disabilities to apply; six work with disabled people's organizations in their country; three report that over half of their programmes and services address the needs and capabilities of persons with disabilities; seven provide disability-specific services; three conduct public activities aimed at increasing disability awareness; five provide disability awareness training to staff; and two engage in humanitarian diplomacy advocacy.

Some highlights from National Society reports show positive examples of partnerships with the local independent living movement and inclusion of DPOs in decision-making positions of disability action programmes. However, the reports indicate that even when a National Society conducts disability mainstreaming in its programmes or provides disability-specific services, representation and engagement with DPOs is lacking or the understanding of the role and

functioning of DPOs is limited.¹⁵ This suggests a need for increased disability awareness throughout the Movement.

3.6 Experiences of staff and volunteers with disabilities

A public survey was conducted to gather information about the experiences of Red Cross and Red Crescent staff and volunteers with disabilities and about disability-inclusive support they may have received or need from the Movement component they have worked with. In total, 179 responses (66% women, 34% men) were received from 20 different countries; 15 respondents identified themselves as having functional impairments.¹⁶ Fifty-seven respondents (32% of all respondents) report experiencing some or significant challenges or barriers in their role within the organization. Ninety-six respondents (54% of all respondents) feel that their organization has made reasonable attempts to accommodate any challenges or barriers they face.

Comments provided by respondents, where responses on challenges faced were focused on the impairment or functional limitation rather than barriers in the environment or attitudes, indicate that there is a need for improved disability awareness from a social and rights-based approach to disability among Movement organization staff and managers. Thirteen respondents highlighted the positive support received from their host organization, for example, modified work hours and improved accessibility of facilities. Comments from 12 respondents indicate that accessibility of facilities is poor and that both managers and staff/volunteers with disabilities should be better informed about reasonable accommodations that can be provided to improve the work environment for staff/volunteers with disabilities. For example, respondents state facing challenges but feel they must find ways to manage themselves, indicating that they have not approached managers to request accommodations. Others provide examples of inaccessible facilities with no indication of modifications to be made.

4) CONCLUSION AND RECOMMENDATIONS FOR THE WAY FORWARD

There is already a wide range of disability-related services, programmes and initiatives within the Movement, and attention to the different aspects of disability inclusion has increased due to the adoption of the Strategic Framework. However, the various initiatives remain, for the most part, only loosely connected.

Despite an initial strong effort after the 2015 Council of Delegates to ensure coordinated, consistent and comprehensive implementation of the Strategic Framework, this momentum was not sufficiently continued during 2016, and the plan of action initially developed for the Framework remains unimplemented. Implementation was hampered primarily by three issues: the lack of a dedicated coordinator for the Movement (and responsibility for disability inclusion being spread across different departments and technical areas within the IFRC and the ICRC), the lack of an active technical Movement working group with broad geographical representation and the lack of funding allocated to coordinating implementation. With a coordinator in place and closer engagement between the IFRC, the ICRC and the MoveAbility Foundation, there is great potential to improve implementation by 2019.

¹⁵ A DPO is a representative organization or a group of persons with disabilities, where persons with disabilities, or family members in the case of persons with intellectual disabilities, constitute a majority of the overall staff, board and volunteers at all levels of the organization.

¹⁶ Assessed using the Washington Group Short Set questionnaire and criteria for identifying persons with disabilities <http://www.washingtongroup-disability.com/washington-group-question-sets/short-set-of-disability-questions/>.

The Movement aims to scale up efforts, with a particular focus on disability inclusion, by expanding disability mainstreaming as well as providing disability-specific services in order to ensure inclusion of persons with disabilities and their access to services provided by the Movement, particularly those who are most marginalized in society, such as persons with intellectual and developmental disabilities and women with disabilities. The priorities outlined below will be supported by a Movement technical/coordinating working group on disability inclusion.

The broad scope of the Strategic Framework provides a comprehensive approach but also requires additional focus on priority areas for implementation in the coming two years. Based on the experiences summarized in this report, it is proposed to focus on the following areas (the relevant Enabling Action from the Strategic Framework is shown in brackets).

Improved accessibility (*Enabling Action 1.2*). The ICRC and the IFRC recognize physical, communication and institutional accessibility as a human right and a critical factor in ensuring access to services and in staff and volunteer recruitment. The ICRC and the IFRC aim to identify and address physical, communication and institutional barriers to headquarters, regional and field offices and implement measures to remove these barriers. Work should be expanded to address accessibility of the built environment for persons with other types of impairments and, particularly, to address access to information, such as accessible websites for persons with visual impairments, provision of information in sign language and easy-to-read materials for persons with intellectual and developmental disabilities.

Recruitment of staff and volunteers with disabilities (*Enabling Action 1.3*). The ICRC aims to address specific challenges related to supporting the employability of persons with disabilities across its global workforce, notably in relation to security, access and accompaniment. Work is ongoing in the ICRC to devise solutions which balance the duty of care towards staff with crucial operational concerns, as part of a wider institutional human resources transformation. The IFRC review of human resources policies and development of surge competencies will feed into measures that encourage and support recruitment of staff and volunteers with disabilities. Emphasis will be placed on ensuring diversity in the recruitment of persons with disabilities, considering, for example, gender, ethnicity, sexual identity and forms of impairment, such as intellectual, learning, mental health, hearing, visual and physical impairments.

Expanded mainstreaming of disability inclusion throughout programmes and services (*Enabling Actions 2.1 and 2.4*). In order to properly respect the principle of impartiality in relation to disability, all programmes should seek to identify barriers to participation by persons with disabilities and include specific strategies on how to address these barriers to enable persons with disabilities to be included in all stages of programme design and implementation. This should be conducted using gender-sensitive approaches and by building partnerships with DPOs.

Established partnerships and meaningful engagement with DPOs (*Enabling Action 1.4*). The ICRC and the IFRC will seek to actively build formal and informal partnerships across the Movement with DPOs and other relevant civil society organizations working towards disability inclusion in the forthcoming implementation period.

Adoption of evidence-based practices, raising awareness and advocacy (*Enabling Actions 3.1, 3.2 and 3.3*). The Movement has vast potential to raise awareness of the situation of persons with disabilities and build positive attitudes towards disability through its components and global network. The ICRC and the IFRC are committed to increasing knowledge of the situation of persons with disabilities – in collaboration with DPOs – through

assessments, evidence-based practices and internal and external communication, among other measures.

Disability awareness raising campaigns and events supported by National Societies can have a major impact at the community level in changing mindsets. In addition, the ICRC and the IFRC are in support of organizing a workshop or side event during the 2019 Council of Delegates in order to provide a forum to discuss progress and remaining challenges and how they can best be collectively addressed by the Movement, particularly with regard to the allocation of funds to implement disability inclusion throughout the Movement. Lastly, the ICRC and the IFRC continue to promote disability inclusion through humanitarian diplomacy and external partnerships.

A related and essential starting point would be a comprehensive overview of National Society action in this area – the survey designed for this report will be shared again with National Societies in order to establish a baseline against which a revised plan of action can be developed. This information would be used to review the priorities listed here and their relevance to National Societies. In addition, information on good practices in disability inclusion can be shared and promoted amongst Movement components.