GPC Protection Conference GBV AoR Sessions, 28-29 May 2018

Title of session: IASC Disability Guidelines – GBV Prevention and Response – Consultation

Key points of the initial presentation

Briefing on the IASC Disability Guidelines development process

In 2016, the United Nations Inter-Agency Standing Committee (IASC) Working Group established a Task Team to develop IASC Guidelines on Inclusion of Persons with Disabilities in Humanitarian Action (herein referred to as IASC Disability Guidelines). The Task Team is co-chaired by the International Disability Alliance, Handicap International and UNICEF. Further details on the Task Team, including Terms of Reference and Work Plan, can be found on the IASC website: https://interagencystandingcommittee.org/iasc-task-team-inclusion-persons-disabilities-humanitarian-action

The development of IASC Disability Guidelines mark a significant step in advancing accountability for the inclusion of persons with disabilities within the inter-agency coordination mechanism. Ensuring non-discrimination requires that such guidelines be gender-sensitive, as well as relevant and appropriate to GBV actors working humanitarian settings globally.

Upcoming activities in the IASC Disability Guidelines development:

- Revising Draft 1 based on feedback from Task Team, regional consultations and online survey.
- Drafting Part 3 Sector-specific sections of the Guidance by sectoral working groups.
- Piloting the Guidance in humanitarian settings (late 2018).
- Launch and roll-out of the Guidance (early 2019).

Preliminary findings from consultations with gender and GBV actors

Only 19 respondents completed the GBV section of the global online survey. Requesting further guidance on:

- Participation and empowerment of women and girls with disabilities.
- Preventing and responding to early and / or forced marriage of women and girls with disabilities.
- Including persons with disabilities in accountability and feedback mechanisms relating to GBV programs.

Recommendations from regional consultations on gender mainstreaming:

- Strengthening capacity of humanitarian actors (including DPOs) on intersection between gender and disability.
- Collection and analysis of sex, age and disability disaggregated data (quant & qual).

- Prioritizing the leadership and participation of women and girls with disabilities.
- Integration of disability in the IASC Gender Marker.

Recommendations from regional consultations on GBV Prevention and Response:

- "Risks and Barriers" Needs to clearly define risks, vulnerability factors, and then barriers to accessing services and assistance.
- Key elements = MUST DO ... different opinions between Africa and Asia.
- Role of different stakeholders Consider diagrams and linkages with other sections.
- Set criteria for the testimony and good practices.

Key discussion points

IASC Disability Guidelines Global Online Survey

This survey was quite long. Recommend extracting the questions regarding GBV prevention and response and re-sending through the GBV AoR to inform the development of Draft 2 of the GBV sub-sector guidance.

Content of the IASC Disability Guidelines

Key Elements = MUST DO structure presents limitations to detailed guidance on:

- Early / forced marriage
- Distinguishing between GBV prevention and response efforts

This section should be aligned with and inform the Minimum Standards for GBV Prevention and Response (to be developed).

Where forced sterilization will fit in? It should be reflected in both the GBV section and SRH sections of the Guidelines.

"Care-givers" versus "support people" – how can we balance these different perspectives? It is important to recognize the social contribution that women and girls make to care-giving. In most humanitarian contexts, these individuals are mothers, daughters and sisters of individuals, and as such don't fit the wider GBV sector's understanding of "support people".

Integrating disability into the Gender with Age Marker – May not be a strategic entry point for disability inclusion, as it is unlikely to have a significant impact to financial resourcing and so forth. It is also going to be a very long and intensive process to adapt it again.

What level of disaggregation is realistic and appropriate? E.g. types of disabilities, Washington group questions. Participants shared that there is an increasing push from donors to disaggregate data by disability, but most responses must align data collection with the government system. As such, it is recommended that the IASC Disability Guidelines focus on strengthening data disaggregation during disaster preparedness and recovery.

Practical examples

Whole of Syria GBV AoR is using the Washington Group Questions in registration of beneficiaries at service delivery points, where actors have time to go through the questions with individuals. However, this requires a lot of training for partners and needs corresponding budget. At the assessment level, it is not possible to integrate the Washington Group questions in full. However, they have adapted the Washington Group questions to better describe the categories of people with disabilities for inclusion in qualitative data collection (e.g. focus group discussions) in the facilitation guide for partners. It is important to advocate for inclusion of persons with disabilities as enumerators and respondents of the assessments.

Examples of connecting groups of persons with disabilities / disability community to GBV partners and humanitarian processes would also be useful.

How can the GBV AoR support the piloting of the IASC Disability Guidelines?

Participants raised the issue of funding for piloting activities. WRC has a small amount of funding from DFAT to support piloting in GBV prevention and response programs. Funding may also be available through the IASC Task Team, but the amount and process is yet to be determined. REGAs can be engaged, but early 2019 may be more feasible for piloting given HRP/HNO processes.

DFID Global Disability Summit

The Summit on 24th July 2018 would be another forum to collect feedback on the IASC Disability Guidelines. This Summit will focus largely on the development sector, with gender and humanitarian as cross-cutting issues.

Action points, decisions taken and follow-up

- Approach the GBV AoR Learning Reference Group they may give feedback to the IASC Disability Guidelines.
- Adapt and re-circulate the survey. For now, the focus will be getting responses from GBV AoR/GBV Sub-Clusters.
- IASC Disability Task Team to set criteria for the piloting process and circulate through the GBV AoR for feedback.
- WRC to submit report from this session, including recommendations moving forward, to the IASC Disability Task Team.

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