

Building capacity for disability inclusion in GBV programming in humanitarian settings



A Toolkit for GBV practitioners

Introduction

Approximately 15 percent of any community may be persons with disabilities. ¹ These rates may be higher in communities that have fled conflict or disaster, as during crisis people may acquire new impairments and have limited access to medical treatment.

Persons with disabilities are among the most vulnerable and socially excluded groups in any crisis-affected community. They may have difficulty accessing humanitarian assistance programs due to a variety of societal, environmental and communication barriers, increasing their protection risks, including to gender-based violence (GBV). For women and girls with disabilities, the intersection of gender inequality and disability makes them especially vulnerable to GBV. In addition, social norms often designate women and girls to be caregivers of people with disabilities, which can reinforce their isolation and further limit their access to social, economic and material support, increasing their vulnerability to violence and exploitation.

While there has been a tremendous amount of advocacy to make GBV programs and services integral to humanitarian response from the earliest stages of an emergency, where these exist, persons with disabilities and their caregivers face particular barriers to accessing those services. They may be isolated in their homes, overlooked during needs assessments and not consulted in the design of programs. Persons with disabilities and caregivers, particularly women and girls in recognition of their increased exposure to violence, have a right to protection in situations of humanitarian crisis, and should be able to access services and participate in GBV programs on an equal basis with others.⁴

The GBV and Disability Toolkit was developed by the Women's Refugee Commission (WRC) and International Rescue Committee (IRC). It is one of the outputs of a two-year project entitled *Building Capacity for Disability Inclusion in GBV Programming in Humanitarian Settings*. The project was conducted in humanitarian settings in four countries – Ethiopia, Burundi, Jordan and the Northern Caucasus in the Russian Federation – with the goal of identifying barriers and piloting approaches to disability inclusion in GBV programming in humanitarian settings. (For more information about the project, including related publications, visit: http://wrc.ms/disability GBV)

This toolkit was created with the input and participation of persons with disabilities, as well as GBV practitioners, over the course of the project. It is intended to support GBV staff to build disability inclusion into their work, and to strengthen the capacity of GBV practitioners to use a survivor-centered approach when providing services to survivors with disabilities. The tools are designed to

¹ World Health Organization & The World Bank (2011). World report on disability. Geneva: WHO.

² Women's Refugee Commission (2008). Disabilities among refugees and conflict-affected populations.

³ Women's Refugee Commission (2014). Disability inclusion: Translating policy into practice in humanitarian action.

⁴ United Nations (2006). Convention on the Rights of Persons with Disabilities.

complement existing guidelines, protocols and tools for GBV prevention and response, and should not be used in isolation from these. GBV practitioners are encouraged to adapt the tools to their individual programs and contexts, and to integrate pieces into standard GBV tools and resources.

Contents of the Toolkit

Section 1: Disability inclusion in GBV program planning. These tools can help GBV practitioners to consult with persons with disabilities and their caregivers in the design of programs and services.

<u>Tool 1: General guidance on including persons with disabilities and caregivers in GBV assessments</u>

This guidance note describes the general principles and approaches to conducting assessments with persons with disabilities and their caregivers in humanitarian settings.

Tool 2: Group discussion quide

This tool describes participatory activities and questions to be used in group discussions with persons with disabilities and caregivers.

Tool 3: Individual interview tool

This tool provides an alternative to group sessions. It can be used for one-on-one interviews with persons with disabilities and caregivers who are isolated in their homes, and with people who may prefer one-on-one communication in a familiar environment.

Section 2: Disability inclusion in GBV program implementation. The tools in this section focus on building the capacity of GBV program staff to work with people with disabilities and their caregivers.

<u>Tool 4: Gender-based violence and disability: A training module for GBV practitioners in humanitarian settings</u>

This training module is designed to support GBV practitioners to understand the intersections between disability, gender and violence in the communities where they work, and to develop strategies to improve the inclusion of persons with disabilities in GBV prevention and response programming.

Tool 5: Pre- and post-training test for the GBV and disability training module

This test can be used with GBV practitioners to identify changes in their knowledge and attitudes relating to disability inclusion, and is accompanied by an answer key for scoring the tests. It should be used in conjunction with the GBV and disability training module.

Tool 6: Guidance on communicating with people with disabilities

This tool provides simple tips and advice for GBV practitioners on interacting and communicating with persons with different types of impairments.

Tool 7: Accessible information, education and communication (IEC) materials

This tool provides five key questions to ask when developing IEC materials to ensure they are disability inclusive, with a practical example from a refugee setting.

<u>Tool 8: Guidance for GBV caseworkers: Applying the quiding principles when working with survivors with disabilities</u>

This tool has been developed to support GBV practitioners in adapting a survivor-centred approach to working with survivors with disabilities.

<u>Tool 9: Guidance for GBV service providers: Informed consent process with adult survivors with disabilities</u>

This tool outlines general principles and steps for obtaining informed consent with adult survivors with disabilities.

Tool 10: Working with caregivers of survivors with disabilities

This tool offers guidance on how to approach working with caregivers of survivors with disabilities to ensure all needs are met and positive relationships are strengthened.

Section 3: Monitoring and evaluating disability inclusion in GBV programs. These tools have been developed to help GBV staff monitor their progress with disability inclusion.

Tool 11: Reflection tool for GBV practitioners

This participatory activity supports GBV practitioners to reflect on changes in their attitudes, knowledge and practices relating to disability inclusion, as well as to identify successes and set goals for further capacity development.

Tool 12: Documenting "stories of change"

"Stories of change" help identify what activities have been most important to women, girls, boys and men with disabilities and their caregivers, the facilitators and barriers to their inclusion, and their suggestions for change.

What to keep in mind when using the Toolkit

- These tools are intended to complement, not replace, existing resources for GBV program
 design, implementation, and monitoring and evaluation. For example, Researching Violence
 Against Women: A Practical Guide for Researchers and Activists (http://www.path.org/publications/files/GBV rvaw complete.pdf) provides extensive guidance on conducting focus
 groups and one-on-one interviews, as well as on how to analyze and utilize data.
- This Toolkit provides general guidance on working with people with different types of disabilities. Every individual, however, will have different needs. These resources should thus be seen as a starting point in supporting GBV practitioners to consult with persons with disabilities and their caregivers, and to consider their needs when designing and carrying out programs.
- As with any global resource, these tools should be adapted to fit the local context. The
 experience and expertise of the local population should be the starting point for implementing
 any of these resources.

The complete Toolkit for GBV Practitioners can be downloaded from: http://wrc.ms/disability GBV