

Disability Inclusive Disaster Risk Management

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Key Messages

- The rights and needs of PwD in disasters are increasingly being addressed through policies, standards and guidelines but much more needs to be done **to remove the barriers to their inclusion** in disaster risk reduction (DRR) and response.
- Effective institutions with supportive attitudes, structures and systems, backed up by good evidence, are key to meaningful disability inclusion. **Human rights-based approaches can be game changer.**
- **Disability advocates and disabled people's organisations** can play a significant role in disaster policy, planning and interventions, but formal **disaster agencies need to improve interaction or collaboration** with them.
- **PwDs are not a homogenous group.** Disability intersects with a range of other individual, social, economic and cultural factors, leading to differing vulnerabilities and inequalities.
- Disability inclusion cannot be **achieved without challenging** the societal and institutional discrimination, marginalisation and exploitation experienced by people with disabilities in disasters and at other times.

Covid-19 & Disability

- COVID-19 virus does not discriminate; but its impact clearly does.
- Over 2.68 crore PwDs in India- Most living in low income, low resource settings with limited access to quality healthcare- Face environmental and societal barriers.
- When disaster strikes, PwDs are disproportionately affected because preparedness, response and recovery efforts do not address their needs.
- People with vision and hearing loss, as well as people with cognitive limitations, deafblindness, multiple disabilities or low literacy levels often cannot access risk communication during emergency events.
- PwD less likely to receive timely warnings; they find evacuation routes and public shelters difficult to access or even inaccessible; appropriate care and shelter facilities are often lacking; and they are overlooked in relief and recovery assistance.
- PwDs are also more likely to be poor or unemployed, socially marginalised, excluded from decision-making processes
- Disasters can be a significant cause of permanent injuries and impairments, and can exacerbate pre-existing conditions through the loss of equipment or medication. UNCRPD-2008 brought attention to disability in the disaster policy agenda.

Data & Evidence

- Evidence and research from disasters in different contexts (Japan earthquakes in 1994/ 2011; Tsunami in 2004 and Hurricane Katrina in 2005) have raised awareness and encouraged efforts to improve practice around disability
- Much better data is needed on disability in disaster contexts, particularly on:
 - the impacts and outcomes for people with disabilities,
 - the nature and extent of impairments resulting from injuries sustained in disasters, and
 - the longer-term health and other consequences of disaster injuries for functioning and wellbeing.

Disability & Disasters

- PwD's vulnerability in disasters is the result of the **interaction between the impairment, the physical environment and social and institutional structures and attitudes.**
- Generally understood in policy statements but in practice, disaster organisations and their staff continue **to focus on helping** individuals with impairments adjust to their situation, rather than **altering the environment to accommodate their needs**
- PwD are often **portrayed as helpless** in the face of disasters.
- Agency assessments **need to focus** on their knowledge, skills and resources for **dealing with hazards and disasters** and their vulnerabilities

Understanding Disability

- People with disabilities are not a homogenous group
- Individuals have varying degrees of resilience to hazard events and other shocks, which are not due simply to impairment
- Disability results from the social, attitudinal and environmental barriers that hinder PwD's full and effective participation in society on an equal basis with others
- It intersects with a range of other individual, social, economic and cultural factors, such as age, gender, ethnicity, religion and poverty.
- Societal norms that maintain existing hierarchies and inequalities lead to different or unequal outcomes for people with disabilities

The Way Forward

- The intersections between social identities must be understood and addressed
- Data collection, analysis and interpretation should take these layers of complexity into account, and pay more attention to distinct groups of people with disabilities, for example CwDs, whose particular physical, psychological and educational vulnerabilities tend to be overlooked in disaster planning
- Need to measure or benchmark the extent to which disaster related initiatives are disability-inclusive, and what effect they have on the resilience and wellbeing of people with disabilities
- Utilizing the facilities and technical know-how in the Global Facility for Disaster Reduction and Recovery (GFDRR)- <https://www.gfdrr.org/en/gfdrr-labs>

- **Ensuring Participation**- Listening to PwDs and learning about their experiences is essential. Disability advocates have played a significant role in shaping international disaster management agendas, notably the Sendai Framework- <https://www.ndma.gov.in/Global/sendai-framework>
- **Discrimination**- Disability inclusion cannot be achieved without challenging the societal discrimination, marginalisation and exploitation often experienced by people with disabilities
- Discrimination restricts their access to education, health, food, rehabilitation services, employment and other forms of social protection

Good Risk Communication is the Key

- While most of the world's population is overwhelmed by instant updates and live news about the pandemic's impact, people with disabilities are yet again left ill-informed due to lack of accessible information.
- Even worse, messages that are either unclear or unrelatable leave them confused. They often don't know how they are supposed to follow the advice safely.
- The WHO and some countries have improved the accessibility of **digital information** by using captioning or a sign language interpretation.

Recommendation-1: Develop plain and clear messages that all affected population can understand and interpret in the same manner

- First step to inclusive risk communication is to check the clarity of the message before circulating it.
- Every risk assessment conducted (physically or virtually) as the outbreak or crisis unfolds must include all sections of the affected population. This will help to understand the different needs of the diverse population groups and subsequently, to design the risk communication in a manner that is clear to all target audiences.
- Accessible communication is not about catchy slogans and jargon, nor it is about technical language.
- Inclusive risk communication must be clear for all, including for people with learning difficulties and those with low literacy.

Recommendation-2: Disseminate messages in multiple formats to reach people with diverse needs

- Risk communication and public announcement by national or regional authorities during emergency should be accessible to people with disabilities with different communication needs.
- The key to improving accessibility in risk communication is to circulate information in multiple/ accessible formats: text captioning, sign language interpretation, braille, large print, loudspeakers, and graphic and pictorial material
- If the message is circulated through press briefings, the person delivering the message should speak clearly and with compassion as if talking directly to the affected communities.

Recommendation-3: Engage partners to reach marginalized populations

- The most accessible message is unlikely to make it to people in hard to reach and poor areas so the array of traditional, alternative and digital information sharing outlets can effectively support inclusive risk communication.
- To bridge the last mile, governments and local authorities should engage with partners in each affected community.
- Disabled People's Organisations can help disseminate accessible information among hard to reach households.
- Other reliable partners include community health workers, teachers and other civil society organisations.

Recommendation-4: Actions that are realistic for people with disabilities

- If messages do not reflect the concerns and the context of people with disabilities, they will have no impact.
- For example the physical distancing measures are impossible to follow for people with mobility, tactile sign language users (Deafblind) and intellectual disabilities who rely heavily on paid or unpaid caregivers.
- The recommended risk mitigation actions should consider the environment and the barriers that people with disabilities experience in their communities.
- Inclusive risk communication should promote specific actions that people with disabilities can realistically take to mitigate risk and protect their lives.

Thank you very much!

References:

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