

PERSONS WITH DISABILITIES AND THE HUMANITARIAN RESPONSE IN HAITI

KEY MESSAGES AND GUIDANCE FOR ACTION

Women's Refugee Commission

There were approximately 800,000¹ persons with disabilities in Haiti prior to the earthquake, including 200,000 children.² An additional 194,000³ - 250,000⁴ were injured in the earthquake, many of whom will suffer from long-term disabilities. There are at least 2,000 new amputees.⁵

Persons with disabilities are often overlooked, neglected and forgotten in disaster relief and humanitarian response. As such, it is vital that service providers from all sectors take their needs, concerns and abilities into account when designing and implementing their programs and activities in order to promote access, inclusion and the full participation of persons with disabilities.

Those living with disabilities were underserved in Haiti prior to the earthquake and often shunned and stigmatized. The emergency response and reconstruction efforts provide an opportunity to amend past neglect and discrimination and assist persons with disabilities to live richer, more dignified lives. Designing interventions, in all sectors, that take into account the specific needs and abilities of people with disabilities can have an enormous effect on improving their well-being and their protection.

This document outlines action for all humanitarian actors to take (general) as well as for those active in the following sectors: **protection, shelter, water and sanitation, food and nutrition, non-food items, health services, education and livelihoods.**

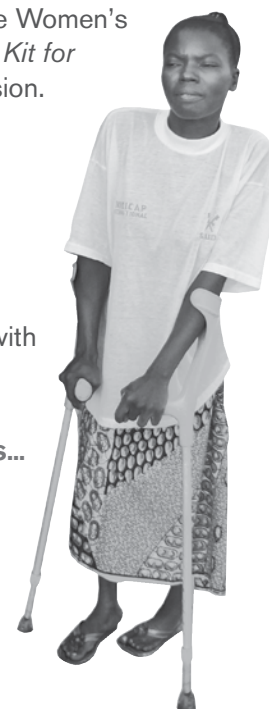
General

- All service providers should consult international and local disability organizations as well as persons with disabilities during assessments and during program planning to ensure their programs provide access and promote inclusion.
- When possible, service providers should link with local Disabled Persons Organizations (DPOs) to ensure that programs are disability sensitive.
- Consult existing tools such as Handicap International's *Disability Checklist for Emergency Response* (www.handicap-international.de/fileadmin/redaktion/pdf/disability_checklist_booklet_01.pdf) and the Women's Refugee Commission's *Disabilities among Refugees and Conflict-Affected Populations: Resource Kit for Fieldworkers*, which provides guidance and action sheets by sector (www.womensrefugeecommission.org/docs/disabilities/disab_kit.pdf).

Protection

- Identify, locate, register and follow up with people with disabilities.
- Identify specific protection risks, including possible physical and sexual abuse, exploitation, neglect and exclusion, of people with disabilities within the community.
- Ensure non-discrimination when providing emergency assistance and promote inclusion of people with disabilities.

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Shelter

- Ensure temporary shelters are accessible and provide easy access for people with disabilities to water, toilets and services.
- Involve people with disabilities in participatory reconstruction planning so as to improve access to shelters, schools, community health centers and other public buildings.
- Use the principle of “universal design” for minimum standards of accessibility when designing shelters and rebuilding community structures. **Universal design** means producing buildings, products and environments that are usable and effective for everyone, not just people with disabilities.

Water and Sanitation

- Involve people with disabilities, including women, in decisions about the location of latrines, water points and bathing areas in temporary camps and shelters.
- Prioritize people with disabilities in water queues.
- Ensure that community toilets and water pumps are accessible to people with disabilities in reconstruction efforts.

Food and Nutrition

- Ensure that people with disabilities are given priority during food distributions and that arrangements are made for those with mobility impairments to receive their rations.
- Take into account the specific nutritional needs and digestive problems of those with disabilities in food aid programs.
- Monitor the nutritional status of those with disabilities.

Non-food Item Distribution

- Ensure non-food item distribution points are accessible to people with disabilities.
- Give priority to those with disabilities during non-food item distributions.
- Introduce mobile distribution systems to reach those who are housebound or immobile.

Health Services

- Ensure full and equal access to health and reproductive health services for those with disabilities.
- Train and sensitize doctors and health care staff on disability issues.
- Ensure appropriate medicines are available and specialized treatment and assistive devices are provided or that health staff have ready referral sources.

Education

- Make temporary and reconstructed schools accessible to children with disabilities.
- Promote inclusive education to mainstream children with disabilities into regular schools and classrooms whenever possible and provide special educational services to address specific learning needs.
- Provide appropriate training and support to teachers to equip them with the skills to address the learning needs of children with disabilities.

Livelihoods

- Tap the skills, experiences and expertise of people with disabilities as program staff, project resource persons and program participants.
- Include people with disabilities in skills training, income generation and employment projects, including cash- and food-for-work projects.
- Provide opportunities for people with disabilities to benefit from grants, loans and savings programs.

Notes

1 JFActivist: Haitians with Disabilities Suffering After Quake, www.jgactivist.typepad.com; January 26, 2010.

2 UN estimate as reported on BBC, Dec. 4, 2009; http://news.bbc.co.uk/today/hi/today/newsid_8393000/8393135.stm.

3 USAID Fact Sheet #13, January 25, 2010.

4 UN estimate on January 20, 2010. www.3news.co.nz/UN-estimates-250000-injured-in-Haiti-quake/tabid/417/articleID/138090/Default.aspx.

5 Handicap International web site, January 27, 2010. www.handicap-international.us.