We open eyes.
DISABILITY MAINSTREAMING IN THE CONTEXT OF COVID 19
FOOD SECURITY CLUSTER
12 June 2020
Draughts and famines

- Every year 8.8 million people die of starvation
- Aid agencies fear that up to one billion people will face starvation due to COVID19
- Malnutrition is a main cause of developmental disabilities
- People with disabilities are twice as likely to live in poverty and struggle to put food on the table
CBM current Food Security and Livelihoods interventions

- **Food Security Crisis Response in Chivi District**
  - Inclusive cash programming targeting 741 HH
  - Inclusive school feeding across 12 Primary Schools
  - Livelihood IGA projects
  - WASH
  - Disability Inclusion mainstreaming including co-ordination with mainstream actors, advocacy, influencing, capacity building and technical advisory support

- **Livelihoods Recovery in Chipinge district**
  - Inclusive cash programming targeting 600HH
  - Livelihood IGA projects
  - Provision of assistive devices to beneficiaries with disabilities

- **COVID-19 response (prevention, food security)**
COVID-19: A biological disaster the world has never seen before – Global Statistics 5/2020

Approx. 6.2 billion (84%) of world population live in low and middle income countries

<table>
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<tr>
<th>CONTINANT</th>
<th>POPUL. MIO</th>
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<th>DEATH</th>
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<td><strong>Totals</strong></td>
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<td><strong>4,799,600</strong></td>
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Impact of COVID 19’

• The COVID-19 pandemic is most immediately a health crisis, the secondary and broader effects will be financial and economic
• ILO raises global full-time formal job loss forecast to 305M amid virus (29-4-20)
• 1.6 billion workers in informal economy also face destroyed livelihoods (29-4-2020)
• ILO: As job losses escalate, nearly half of global workforce at risk of losing livelihoods (19-5-20)
• Humanitarian actors need to ensure that people with disabilities living in poverty don’t fall further behind and decades of investing in our programme work are erased by the impact of COVID-19
Why inclusion of people with disabilities

*People with Disabilities are often among the poorest of the poor*

“*While in dire need of assistance, people with disabilities and sometimes also their families, are often excluded both from their communities and from development initiatives because of inadequate policies, negative attitudes and lack of accessibility which often prohibits their participation*”

The UN Convention on the Rights of Persons with Disabilities that came into force in 2008, obliges states, but also development organisations to include people with disabilities in all development programs (article 32) and humanitarian relief (article 11).

The humanitarian principle of impartiality – providing assistance on the basis of need alone – requires humanitarian actors must respond in a way that considers the needs of people affected by a crisis as they determine priorities.
What is disability?

Convention on the Rights of Persons with Disabilities

‘The long-term physical, mental, intellectual or sensory impairment which in interaction with various barriers may hinder the full and effective participation in society on an equal basis with others.’

The interaction between......Impairment And Barriers in society In a way that prevents participation on an equal basis with others.
Types of Impairements

- Vision impairment
- Hearing impairment
- Speech impairment
- Mental impairment
- Physical impairment

Types of Barriers

- Environmental
- Communication
- Attitudinal
- Institutional
Facts and Figures

- **Over 1 billion** people in the world have some form of disability, that’s 1 in 7
- 80% of all people with disabilities live in a **developing country**
- In Zimbabwe, the persons with disabilities represent **7%** of the population
- **50%** of disabled persons cannot afford health care
- Women with a disability are 2 to 3 times more likely to be physically or **sexually abused** than women without a disability
COVID 19 RISKS for people with disabilities

• Barriers to communication, public health information on prevention measures not being provided in accessible formats
• Water, sanitation and hygiene facilities are inaccessible to some people with disabilities
• Social distancing and self isolation measures are infeasable for some people who depend on carers to provide for essential needs
  ▪ Attitudinal, environmental and institutional barriers
  ▪ Physically inaccessible healthcare facilities, quarantine centers
  ▪ Lack of capacity amongst health workers and humanitarian actors to include people with disabilities
  ▪ Stigma and discrimination in the society
  ▪ Decreased access to health care, food and medications due to increased pressure on healthcare systems, markets and supply chains, made worse by pre-existing accessibility challenges
Mainstreaming Disability in Humanitarian Action

- Meet immediate basic needs e.g. ensure food security, water, hygiene, shelter, communication on prevention of spread of virus in accessible formats and designs for water and sanitation facilities

- Identify and assess most vulnerable persons in community prioritizing persons with disabilities who have lost their livelihood (Jobs, IGA, shops, enterprise, agro business etc.) - Targeting

- Consult with persons with disabilities and DPOs from the beginning and throughout the project cycle - Participation

- Raise awareness and train project staff on Disability Inclusion

- Provide disability specific support (Assistive devices, dietary needs, psychosocial support)

- Preferred option: Contextualized unconditional cash transfer (Physical cash, mobile money or bank transfer)
Advantages of cash transfer

- Allows freedom of choice to buy the things affected people most urgently need while stimulating the local economy
- Promotes dignity and human rights
- Reaches people fast if partner has built organizational capacity and is prepared (Database of clients, Service provider)
- Programme is well coordinated with government and other humanitarian agencies to avoid duplication
- Avoids risks associated with food distribution (security)
- Addresses physical barriers associated with travelling to a food distribution point which could be far for most people with disabilities
- Eliminates the cost of carrying food assistance for most people with disabilities who due to impairment may find it difficult to carry
**Considerations for inkind modality**

- Provide alternative arrangements for **food** and non-food items distribution to **households** of persons with disabilities

- Distribution points to be located at accessible points and preferably at village level

- Include persons with disabilities in Food Distribution Committees
Resources within CBM

- CBM HHoT
- Disability and Gender Tool Kit
- Digital Accessibility Tool Kit
- Humanitarian inclusion standards for older people and people with disabilities 2018
- 16 Minimum Requirements for building accessible shelters
- UNCRPD
- Programme guide for disability-inclusive cash and voucher assistance in humanitarian action
Any questions left?
Thank you!

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