

Disability Inclusive Risk Communication & Community Engagement

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Agenda

1. What is disability
2. Why disability inclusion
3. Increased risks experienced by persons with disabilities during emergencies
4. Good practices
5. Minimum actions in preparedness and response
6. Resources

What is disability?



Why disability inclusive RCCE

- 15 % of the population
- Convention on the Rights of Persons with Disabilities CRPD
Article 11 Situations of risk and humanitarian emergencies
- IASC Guidelines Inclusion of Persons with Disabilities in Humanitarian Action
- UNICEF Core Commitments for Children in Humanitarian Action

Increased risk during emergencies

- Barriers to access essential services; lack of accessible public transit systems; limited capacity of health workers to communicate and work with persons with disabilities; high costs of health care
- Interrupted home, community and social services and supports, including personal assistance
- Inaccessible information and communication = persons with hearing, visual, intellectual or physical disabilities may not receive key information about prevention and assistance
- Prejudices, stigma, and discrimination
- Lack of disaggregated data = inability of surveillance systems to determine the impact on persons with disabilities
- Less likely to be prioritized in resource allocation and priority setting

COVAX uptake in Tanzania among the deaf community

- Misinformation, lack of trust in the health care system
- Health care workers lack communication skills
- UNICEF partnered with CHAVITA (association of the deaf) to manage misinformation at local level
- UNICEF support MoH to develop inclusive RCCE SOPs, guidelines, PSS tools, AAP, mass messaging through media, communities, Internet of Good Things –platform and SMS
- Result: 44% increase in vaccination coverage

Malaria Mass Drug Administration in Uganda

- National EVD task force recommenced Malaria Mass Drug Administration (MDA) along with nets and SBC to prevent Malaria in EVD outbreak districts
- People did not seek treatment for fear of EVD
- UNICEF supported distribution in two districts targeting all
- Door-to-door approach created a chance for the 406 persons with disabilities to benefit from interpersonal communication on EVD, Malaria and the importance of MDA
- Health messages delivered through community engagements, trainings, community radios, and radio talk shows emphasized involvement of persons with disabilities and other vulnerable groups in MDA

**In your opinion, how
disability inclusive is your
RCCE work?**

Minimum Actions: preparedness

01

Include “disability and inclusion indicators” in existing partnerships

02

Build capacity of existing partners

03

Collaborate/partner with Organizations of Persons with Disabilities

Minimum Actions: response

01

Provide life- saving information in appropriate multiple and accessible formats

02

Provide safe and accessible feedback mechanisms

03

Engage persons with disabilities as agents of change

04

Ensure that messages are disability inclusive

05

Collect disability disaggregated data using the CFM (children) and the WGSS (adults)

What resources are you missing to enable you to be more inclusive in your work?

Resources

- [IASC Guidelines, Inclusion of Persons with Disabilities in Humanitarian Action](#)
- [UNICEF: Including children with disabilities in humanitarian action](#)
- [UNICEF: Disability Inclusive Humanitarian Action Toolkit](#)
- [UN Disability Inclusive Communication Guidelines](#)
- [UN Guidelines on Consulting with Persons with Disabilities](#)
- [UNICEF, Social and Behavioural Change Interventions to Strengthen Disability-Inclusive Programming \(2020\)](#)
- [UNICEF Accessibility Toolkit: accessible events](#)
- UNICEF Disability Inclusive SBC Toolkit (forthcoming in Q4)



Thank you.