Multi-Stakeholder Workshop

Geneva, October 2-3, 2017

# Meeting Minutes

The IASC Task Team would like to express is gratitude to the Finish Government that is supporting the organisation of this workshop.

The IASC Task Team also would like to thank those who have shared notes on the workshop to ensure all discussions and decisions are appropriately captured in the workshop minutes.

Finally, the IASC Task Team would like to acknowledge and thank the participants for the richness of the exchange and their contribution to the workshop that have enabled us to reach decisions that will guide the development of the guidelines.

The workshop had more than 40 participants over two days, representing UN agencies, member states, organisation of persons with disabilities (DPOs) IFRC/ICRC, humanitarian actors and wider civil society organizations.

See list of participants:

[list of participants.xlsx](file:///C:\Users\valerie\Documents\1707%20IASC%20guidelines\multi-stakeholder%20workshop\list%20of%20participants.xlsx)

Task Team members list: <http://bit.ly/2yCiFLI> Please add your name if you are not yet registered with the Task Team and would like to stay up-to-date with the guidelines’ development.

## Introduction of the workshop

The Inter-Agency Standing Committee Task Team (IASC TT) on Inclusion of Persons with Disabilities in Humanitarian Action was established in October 2016.

The mandate of the IASC TT is to develop guidelines on Inclusion of Persons with Disabilities in Humanitarian Action by December 2018. The purpose of the guidelines is to change practice across the humanitarian spectrum, to ensure humanitarian action is more inclusive of persons with disabilities and to promote their full and meaningful participation and inclusion in all stages of humanitarian action. The guidelines aim to change humanitarian practice, ensuring that policies, programmes, plans and design standards of humanitarian action are inclusive of persons with disabilities.

The IASC TT currently has 93 members representing: UN agencies, DPOs, civil society organisations, humanitarian agencies, Member States and other relevant stakeholders. The IASC TT receives strong support from Member States as well as financial support from the Governments of Finland and Australia.

The multi-stakeholder workshop had four main objectives:

1. To discuss and identify how the guidelines will look like, its structure, outline, and content.
2. To receive feedback and insight from operational stakeholders
3. To identify the main content headings
4. To set up groups of experts that can contribute to, review and enrich the guidelines’ development.

This workshop is the first step in a series of consultations that will inform the structure, content and format of the guidelines. Furthermore, the outcomes of this specific workshop will inform upcoming regional consultations.

Agenda of the Workshop:

* Presentation of the desk review and discussion
* Presentation of existing guidelines structures, formats, etc.
* Working group and plenary feedback
* Identification of contributions from participants to the guidelines development (expert group)
* Way forward

## Desk Review presentation – Janet Lord, Consultant

See [PowerPoint Presentation](file:///C:\Users\valerie\Documents\1707%20IASC%20guidelines\desk%20review%20report\Lord_PPT_Desk_Review_Disability_Inclusion_Humanitarian_Action_Geneva_Oct2017final.pptx) and final version of the desk review report (when available).

There was extensive work undertaken for the desk review, looking at different legal frameworks including the United Nations Convention on the Rights of Persons with Disabilities (UN CRPD), International Humanitarian Law, Refugee law and others. It is important to note that most of those documents were developed before the UN CRPD, hence have little to no consideration of persons with disabilities. Hence it is important today to find entry points within those frameworks to anchor the guidelines.

A number of key recommendation are part of the desk review that will be considered in developing the guidelines. Some examples below, others can be found in the PowerPoint presentation or in the report itself:

* Identify clearly who are persons with disabilities and who are we talking about as reflected in UN CRPD article 1.
* On being clear about assessing risk in the context of persons with disabilities and which is consistent with the UN CRPD.
* Provide clear guidance on non-discrimination in line with the UN CRPD, ensuring that reasonable accommodation is seen as a key element.

A second aspect of the desk review was to propose possible outlines for the guidelines, which proposed three options as possible ways of developing the guidelines. Key points from the desk review plenary discussion and feedback, which included consideration of the proposed outlines, were as follows:

1. The desk review does not explicitly mention the humanitarian principles, which need to be a key consideration while developing the IASC guidelines.
2. Proposition to address within the desk review the contradiction between “needs-based approach” and “human rights-based approach”.

The desk review highlighted a policy gap at the IASC level on inclusion of persons with disabilities. However, the IASC TT considers that the UN CRPD and the Charter for Inclusion of Persons with Disabilities in Humanitarian action in addition to IASC protection policies and the humanitarian principles provide the necessary policy framework to start the work of guidelines development.

To complement the desk review resources section, there is a need to identify further sectoral/area gaps and identify additional information, expertise resources for:

* Cash based assistance
* Social protection and safety nets
* Humanitarian nexus
* Addressing different humanitarian contexts (rural, urban, protracted crisis, small island such as in the Pacific, etc.)

The desk review report discussion highlighted the need to learn from other IASC guidelines’’ development in considering format, dissemination strategy, roll out strategy, etc.

## Presentation of Existing Guidelines

See presentation : [existing guidelines](file:///C:\Users\valerie\Documents\1707%20IASC%20guidelines\multi-stakeholder%20workshop\IASC%20Guidelines-Ricard%20Pla.pptx)

This presentation provided participants with examples of exisiting guidelines which different groups, use different formats, structures, length, etc. in order to provide information to be used during the working sessions.

1. IASC Guidelines for integrating Gender-Based Violence in Humanitarian Action
   * Audience is defined as being a wide range of humanitarian stakeholders addressing different levels, roles and responsibilities. It is not targeting GBV specialists.
   * A matrix is used to propose key actions to be undertaken by different stakeholders during different phases of humanitarian action. (slide 5-6)
   * Includes table on key considerations for at risk groups (slide 7)
   * Build inter-sectoral coordination (slide 10)
   * More than 200 pages.
2. IASC Guidelines on Mental Health and Psychosocial Support in Emergency Settings
   * For all humanitarian actors
   * Sectoral approach using matrix to list key action but also addressing processes (coordination, need assessment, etc.)
   * Uses a Do’s and Don’ts table
   * Proposes list of key resources
   * Short and practical
   * Is now developed into several products addressing specific audiences such as: advocacy and MHPSS, etc.
3. UNHCR working with persons with disabilities in forced displacement, “Need to Know Guide”
   * Defines and explains key principles (participation and non-discrimination)
   * Lists key actions and key considerations for very practical situations
   * It is short and therefore very popular in the field and implemented; however, UNHCR highlighted that further support was requested by users.
4. UNICEF guidance including children with disabilities in humanitarian action
   * Series of 6 booklets
   * General guidance, child protection, education, nutrition, Health and HIV/AIDS and WASH
   * Includes background information
   * Impact of emergencies on children with disabilities
   * Frameworks and approaches
   * Includes case studies on practical situations
   * Checklist for inclusion during different phases humanitarian action
5. Health Handbook for Women with Disabilities
   * Addresses women with disabilities—i.e. directly addresses the population of concern.

This presentation proposed different ways of addressing key elements of the guidelines:

* Target audience and how to address the diversity of audiences
* Propose guidance according to timeline (preparedness, response and recovery) or to the humanitarian program cycle
* How to address intersectoral coordination
* Formats : checklist, matrix, comprehensive guidelines, series of shorter guidelines, etc.
* Addressing minimum action versus comprehensive approach

## Group Work

After the presentation of background information, participants were divided into three groups to discuss and respond to the questions below:

* Who is/are the target audiences for the guidelines?
* What topics should be addressed in the introduction or as overarching concepts? (i.e. human rights, definition, intersectionality, twin track, etc.)
* Should we have a specific focus on a sector, group of people, topic?
* What topics should be addressed in each chapter as cross-cutting issues?

Material for the group work included the 3 outlines for the development of guidelines proposed in the desk review report.

See 3 options layout: [Outlines options](file:///C:\Users\valerie\Documents\1707%20IASC%20guidelines\multi-stakeholder%20workshop\3%20outlines%20option%20-%20desk%20review.docx)

Option one proposed a guidelines outline following the humanitarian program cycle, option two proposed a sectoral approach and option three combined the two first options addressing both the humanitarian program cycle and a sectoral-based approach.

* Within the desk review report on proposed guidelines’ outlines which one is the best option?
* Are all topics/sectors/issues covered within the chosen outline?
* Do we need to add some sections in the outline?
* Do we need to remove some sections?
* Any other suggestions?

Instructions were that, once the outlines and topics had been identified, the group would identify key elements of format to ensure the guidelines will be practical, easy to understand ensuring implementation in the field. Points for discussions should include, length of the guidelines, use of matrix, checklist, infographic or any other suggestions.

### Who is the target audience?

**Group 1**: Multiple stakeholders and levels - Programming level; field practitioners; people undertaking needs assessments; decision-makers in the humanitarian architecture; NGOs and DPOs which are not usually involved in humanitarian response or architecture; policy makers; donors; government departments.

**Group 2**: The guidelines should be targeted to humanitarian actors and persons with disabilities as humanitarian actors.

**Group 3:** DPOs (capacity building, no experience in humanitarian) – registered organizations, groups, Policy level, Operational level (practitioners).

Decisions:

The primary target audience will not be disability specialist organisations but mainstream **Humanitarian Stakeholders, including DPOs as humanitarian stakeholders**. It will consider a wide range of actors including humanitarian to development actors involved in the response.

It will target **mainstream stakeholders** including Humanitarian Country Teams, local governments, following the humanitarian architecture.

**Different levels of stakeholders, policy makers, program managers, coordinators, implementers, etc. will be addressed via specific sections**. This could be done via different formats either using a matrix or developing several products that specifically address types of stakeholders. A different approach could be to include in the general section a description of the role and responsibility of different stakeholders and then address more implementers in sector specific section. Note that we will also define further skills for implementers ensuring focus and avoiding addressing details for specific professionals such as teachers, case managers, community health workers, etc. that require more specific guidelines.

### What topics should be addressed in the introduction or as overarching concepts? (i.e. human rights, definition, intersectionality, twin track, etc.)?

**Group 1**: participation and empowerment of affected persons with disabilities/DPOs and links with in-country /host communities, including DPOs. It will be important to define participation including participation in decision-making.

**Group 2**: The introduction should include a definition of disability and inclusion. It should also describe the interaction between humanitarian action and development.

**Group 3:** Capacity building of DPOs to participate as stakeholders in humanitarian action.The introduction should include: Impact of emergencies on persons with disabilities; diversity of disabilities; understanding of disability defined by the UN CRPD; data and information related to disability in emergency situations; five key elements for inclusive humanitarian action: disaggregated data, accessibility, priority of protection, capacity building and participation; recognition of inclusive rather than “special” support; risks and opportunities that come during an emergency for persons with disabilities; definition of reasonable accommodation.

**Decisions:**

Recognizing that DPOs may lack knowledge or expertise specific to the humanitarian action field, and in consideration of UN CRPD obligations, **a section will be dedicated to the empowerment and capacity development of DPOs**.

The introduction should also clearly indicate the importance of: **inclusive humanitarian action for persons with disabilities versus specialised support for persons with disabilities,** as well as describe **the risks and opportunities** specific to persons with disabilities in emergencies.

In addition to the identified concept in the Desk Review proposed outlines, the groups highlighted the need to define: **participation of affected persons with disabilities and DPOs (including in decision-making); inclusion; the humanitarian and development nexus; UN CRPD principles;** and a discussion on **intersectionality.**

### Cross-Cutting Issues:

Cross-cutting issues were discussed extensively in plenary sessions, and some topics will need to be addressed both as cross-cutting issues but also as stand-alone topics. There is a need to further investigate what other IASC guidelines, as well as global clusters, address as crosscutting issues. The online global survey will also address the question of cross-cutting issues and will help identify issues to be addressed across the guidelines.

The group work’ results and plenary session discussions identified the following list of cross-cutting issues:

* Cash-based assistance
* Accountability to affected populations
* Mental Health and Psychosocial support
* Age, gender and diversity (intersectionality)
* Reasonable accommodation
* Accessibility
* Mine action and victim assistance
* Non-discrimination
* Participation
* Data collection
* Monitoring and evaluation
* Context-specific diversity, including forced displacement
* Protection
* Human rights
* Role of DPOs and collaboration with humanitarian stakeholders
* Coordination

**Decisions:**

The list of crosscutting issues will be further discussed in the online survey.

Global Clusters and existing IASC guidelines will provide guidance in identifying which cross-cutting issues will be addressed by the guidelines.

### Outline:

The three groups also discussed the outlines’ options proposed by the Desk Review. In general, there is a consensus in using a sectoral approach combined with the timelines of humanitarian action (preparedness, response, recovery).

A number of participants felt that using the humanitarian program cycle as a framework to discuss the different sectors will be more appropriate, however this will need to be aligned with the sector tools and implementation cycles—for example, camp managers’ work, using the camp life cycle rather than the program cycle. A sectoral tailored approach seems the most appropriate to ensure the guidelines will be useful for the users.

**Group 1:** Combined approach between sectoral and humanitarian action phases. The Charter on Inclusion of Persons with Disabilities in Humanitarian Action should be used as a foundation and part 1 of the guidelines could be aligned and reflect the Charter pillars. Part 2 of the guidelines will be sector-specific, targeting practitioners and structured around the humanitarian phases.

**Group 2**: The third option proposed by the desk review report is the preferred structure. However, it needs to be more integrated between sectors and phases of humanitarian action.

**Group 3**: The group opted for a combined outline taking Option 1 to address policy level and option 3 to further address DPOs and practitioners.

**Decisions:**

A revised outline taking into account the outcomes of the workshop will be developed and used for further discussions (IASC guidelines, clusters, etc.) and consultations (online survey, regional consultations, etc.).

Some consensus was reached in ensuring that we have sector specific chapters, however considering crisis timeline, context specific issues (urban, protracted crisis, etc.) and following humanitarian program cycle or sector specific programming cycle.

The online survey will address several of the above points to further define what could be the most suitable outline for the guidelines.

### Format:

**Group 1:** The guidelines should be short and seen as a foundation for further development. Each chapter/sector should not be longer than 10 pages. Development of a mobile app or websites could be instruments to reach a broader audience. It may be interesting also to develop a disability marker to track progresses.

**Group 2**: The guidelines should include both checklists and matrixes at the end of each chapter. The guidelines should include a monitoring mechanism to track how it is used as well as a feedback system.

**Group 3**: The length of the guidelines should be discussed based on a dissemination strategy. The guidelines should be a living document and include a short skeleton with annexes and link to existing resources. It may be interesting to develop two different formats, one long and comprehensive and a shorter one for field use in context of crisis.

All groups highlighted the need to ensure the guidelines are accessible to all. They also stressed the importance of including references/a list of existing resources addressing practical issues.

Plenary discussion also led to recommendation to include case studies and Do’s and Don’ts.

**Decisions:**

There is a general agreement to keep the guideline **short** (10 pages for each section/ sector) and considering developing **different formats** such as a mobile App, website, series of booklets addressing different level of stakeholders and sectors.

The guidelines should also clearly reference existing sectoral guidelines and tools in a resource section.

### Other Considerations from Plenary Discussion:

The desk review highlighted a number of gaps that will need to be further identified and researched, for example, there is limited evidence of exclusion or inclusion of persons with disabilities in cash transfer programming., however this is a growing field of intervention for humanitarian action.

Financing should be discussed as one of the guidelines’ topic, both in terms of inclusive budgeting and implementation of humanitarian action programs , as well as access to funding for programs targeting persons with disabilities.

It is also important to recognise the ever-changing landscape of humanitarian action and to try to develop the guidelines, anticipating them so to make it as appropriate as possible.

A number of issues are identified as both cross-cutting issues and as sector specific issues. It will be important to discuss and find innovative ways of addressing these issues to avoid repetition and to ensure a comprehensive approach and description of sectors across the guidelines.

A number of points will be further discussed via the online consultation survey and in regional consultations. However, a revised draft outline based on the multi-stakeholder workshop in Geneva will be developed and shared in due time.

## Contribution pledges from participants

The last session of the workshop was dedicated to list initial themes and the participants’ contribution to the development of the guidelines.

The [contributions list](file:///C:\Users\valerie\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\YZWVMCET\171006%20contributions%20list.docx) includes:

* Thematic expert support
* Existing resources on specific areas
* Other types of contribution ( funding, capacity development, consultation with specific groups, etc.)

The contribution list is an evolving document that will be used to set up working groups on specific chapters, peer review group and advisors on specific topics. The list will be further developed during regional consultations, briefing on the guidelines to expert groups, clusters, etc.

## Closing:

The workshop was successful with active participation of a wide range of stakeholders that demonstrated their commitments to support the development of the IASC Guidelines.