

Disability Inclusion in Gender-Based Violence Programming in Sri Lanka



One billion people, or 15% of the world's population, experience some form of disability. The United Nations Secretary-General has highlighted this population as a critical group for inclusion. The Charter on Inclusion of Persons with Disabilities in Humanitarian Action was one of the key outcomes of the World Humanitarian Summit in 2016, and called for the development of guidelines on the inclusion of persons with disabilities in humanitarian action. The establishment of the United Nations Inter-Agency Standing Committee (IASC) Guidelines of Inclusion of Persons with Disabilities in Humanitarian Action marks a significant step in advancing accountability for the inclusion of persons with disabilities within inter-agency coordination mechanisms.



IPPF: A global humanitarian organisation

IPPF is a world-leading SRH service provider, and IPPF Member Association (MA) clinics serve as the first place of contact for those who are impacted by SGBV, including intimate partner violence. Our humanitarian work is anchored in the Minimum Initial Service Package (MISP), a priority of which is to prevent sexual violence and respond to the needs of survivors.

We recognise that SRH information and services must be tailored to the needs of persons with disabilities, especially women and girls, in all their diversity. Our work includes providing capacity-building to MAs, leveraging their good practice.

The IASC Guidelines

The Inter-Agency Standing Committee (IASC) Task Team on Inclusion of Persons with Disabilities in Humanitarian Action, comprised of UN Agencies and civil society organisations, was established in 2016. The development of the Guidelines marked a significant step in advancing accountability for the inclusion of persons with disabilities within the inter-agency coordination mechanism. Ensuring non-discrimination requires that such guidelines be gender-sensitive, as well as relevant and appropriate to GBV actors working in humanitarian settings globally.

"When we go to the hospital or police station, we have great difficulties in communication. The public health midwife came to my home when I was pregnant. She gave me advice; however, I do not understand what she is telling me."

A woman with a hearing disability, Sri Lanka



IASC Guidelines on Disability Inclusion: Gender-Based Violence Piloting

In 2018, funds from the Australian Government were made available to the Women's Refugee Commission to pilot a component of the IASC Guidelines. The pilot aimed to demonstrate and document how GBV guidance can been practically applied to support the protection and empowerment of women and girls with disabilities in humanitarian action.

IPPF's Member Association in Sri Lanka, the Family Planning Association of Sri Lanka (FPA-SL) was awarded by the Women's Refugee Commission to pilot these guidelines in early 2019.

FPA-SL, together with the Disability Organisations Joint Front (DOJF), targeted a cross section of government officials representing health, social services, disaster management, women's and children's affairs at the district, division, and community levels. The project contributed to identification of GBV-related risks, barriers, and strategies, strengthened capacity of GBV service providers on GBV and disability inclusion and enhanced coordination and referral pathways.



Case Study

Manjula (R), 38, has a visual impairment and participated in the pilot program in Sri Lanka. 'I learnt how to protect myself in an emergency, as a person living with a disability. I am now aware of family health and how it is impacted during disaster situations. Women with disabilities need to have their sanitary conditions taken care of. Their protection should be there in disasters, and we have to provide the protection. Males and females need to be separated, especially in camps. I can now advocate for people with disabilities to get better services. From the very beginning people need protection from violence because they are evacuated to unfamiliar places. This is a good project for us as we live in such a disaster-prone area. From the grassroots level, from bottom to top, this project should be spread into other areas, so more people learn about this.'

Menika (L), 42, is also living with a visual impairment. She said, 'In this program we learnt about all categories of people living with a disability (PLWD). Before we only knew about our category – visual impairment. We learnt that there are different needs for each different disability type. We also learnt what to do as a PLWD in emergency situations. I had never thought about these protection issues before this program.'

Key Learning

Learning from this pilot projects demonstrated the vital need to:

- ☐ Establish common principles and values across humanitarian and organisations of persons with disabilities stakeholders
- Clearly define the roles and responsibilities of each stakeholder
- Ensure protection is mainstreamed, including Prevention of Sexual Exploitation and Abuse
- Strengthened accountability of government stakeholders
- Participation of women, girls, boys and men, with disabilities in humanitarian action
- Recognise that women and girls often serve as care-givers for persons living with disabilities, which represents an additional vulnerability.

Finally, all pilot partners demonstrated commitment towards the overall objective of the Guidelines, to ensure that 'persons with disabilities are at the centre, both as actors, and as part of the affected population.'





About IPPF Humanitarian

IPPF delivers SRHR information and services in 166 countries around the world, and fights for everyone to exercise their right to make informed choices. IPPF is a locally-owned, globally connected civil society movement. We meet need, wherever it is, whoever requires it, for as long as they want it. Our localised approach ensures we work across the entire disaster management cycle, mitigation, preparedness, response, and recovery.

We are committed to building humanitarian capacity across all 160 IPPF Member Associations and collaborative partners in accordance with our Strategic Framework. In early 2017, we established a global Humanitarian Hub in Bangkok, Thailand and a Sub-Hub in Suva, Fiji with high level leadership and technical capacities connected to humanitarian networks, preparedness and response mechanisms.





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