Sphere

Applying **humanitarian standards** to the global **COVID-19 response**

Inclusion and Dignity: Lessons from Manila

Summary

When food distribution was rolled out across Manila during the COVID-19 lockdown, it missed 78% of households which had people with disabilities. A rapid, targeted survey highlighted their particular needs and the importance of a client-responsive approach to achieving humanitarian standards.

Key question

How can the application of Sphere standards help ensure that no one is left behind?

Humanitarian standards

As stated in the **Humanitarian Charter**, all people affected by crisis have a right to dignity, protection and impartial assistance according to need and without discrimination (also see **Protection Principle 2**). The Sphere **Health Systems standard 1.3** on access to medicines requires that care is guided by evidence through the collection, analysis and use of relevant public health data. **Health standard 1.5** expects people to have access to essential medicines and medical devices. Similarly, access to humanitarian aid for persons with disabilities is a strong theme in **Protection Principle 1** and across the Sphere Handbook.

Disability inclusion during lockdown in Manila, Philippines

By mid-March 2020, the Philippines' COVID-19 alert level was raised to Code Red Sub-level 2, the highest – which meant that there was sustained community transmission beyond capacity. Immediately, an Enhanced Community Quarantine and stringent social distancing measures were imposed in Metro Manila to arrest the rapid spread of COVID-19 to other parts of the country. The public transport system was shut down, schools closed, movements restricted and home quarantine enforced. Whilst these measures were applied equally to everyone, they affected people differently. To support the poorest households, local governments initiated cash and food distribution.

"The current poverty targeting is based on a definition where disability-related needs are not taken into account, resulting in exclusion of persons with disabilities and their households", reported Dr Benjamin 'Jun' Bernandino of the Philippine Coalition on the UN Convention of the Rights of People with Disabilities (UNCRPD). **"**The needs of persons with disabilities are greater than those with no disabilities because of disability-related factors such as maintenance medicine, personal assistance, more expensive modes of transportation and assistive products. Since we are the best experts on our needs, we need to show the solutions we want, be in charge of our lives, think and speak for ourselves - just like everybody else."

A rapid survey of over one thousand households of people with disabilities, conducted by the Coalition on the UNCRPD two weeks after quarantine was declared, found that 68% of respondents had not received any assistance, despite urgent needs for medicines, therapy, accessible transportation, personal assistance or assistive devices, psychosocial support or hospitalisation. COVID-related information and communication was inaccessible to many people with disabilities, particularly for the deaf, excluding them from support and leaving them more vulnerable to the virus. Many distribution sites were also inaccessible which imposed greater hardship and heightened risk for them. The Coalition immediately provided the survey findings to the government with their petition for a more inclusive and responsive COVID-19 response. This triggered high-level directions to local government leaders to adjust their support to be more inclusive of people with disabilities in their communities. This is a good example of effective advocacy for inclusive assistance.

Based on the survey, the International Rescue Committee (IRC) developed the **Client Responsive Programming Framework,** a tool in support of institutionalising a more tailored humanitarian approach. The Framework promotes meaningful participation of

people receiving aid based on the shared understanding that they have the right to decide what kind of assistance they need. By putting people at the center, IRC strives to deliver the assistance that is more empowering, relevant, appropriate, effective and accountable. The framework contains standards and practices to be applied throughout each stage of the programme cycle, moving from consulting people to collaborating with them. IRC's good practices include involving clients in strategic decision-making, and co-designing the response and the feedback channels.

"We specifically focus on engaging with marginalised groups and proactively consider demographic factors like sex and age as well as humanitarian inclusion standards for older people and people with disabilities", states the IRC's Client Responsive Programming Framework.

Lessons

"Many households with children and persons with disabilities fall on the cracks of the targeting system that are being utilized", says Benjamin Bernandino. "It is important that affirmative action to target persons with disabilities and children with disabilities are being undertaken to ensure that they will also survive the crisis that our country is experiencing right now."

The Client Responsive Framework internalises the humanitarian standards and commitments made by the sector. In particular, the IRC's approach reflects **Core Humanitarian Standard Commitment 4** for safe, accessible and appropriate participation.

Resources

- o **IRC's Client Responsive Programming Framework**
- o **Sphere guidance on COVID-19 response**
- o The **Sphere Handbook**, with particular reference to the Core Humanitarian Standard
- o **Humanitarian inclusion standards for older people and people with disabilities**

For more information, contact:

- o Dr Benjamin Bernandino, Philippine Coalition on the UN Convention of the Rights of People with Disabilities (UNCRPD): **junb47@gmail.com**
- o Shiela May Aggarao, Secretary General of the Nationwide Organization of Visually Impaired Empowered Ladies Inc. (NOVEL): **novel.shiela@gmail.com**
- o Valentina Shafina, IRC Client Responsiveness Specialist: **Valentina.Shafina@rescue.org**