

The Bonn Declaration was composed and published as result of the international conference 'Disasters are always inclusive. Persons with Disabilities in Humanitarian Emergency Situations', which took place from 7 – 8 November 2007 in Bonn, Germany.

The conference was organised by Disability & Development Cooperation (bezev), Kindernothilfe, Christian Blind Mission, Caritas Germany International Dptm., Handicap International and Der Paritätische Gesamtverband.

BONN DECLARATION

Preface – Situation Analysis

In humanitarian emergency situations, persons with disabilities are amongst the most vulnerable groups of society and tend to be disproportionately affected by the impacts of disasters. At the same time, they often remain 'invisible', even though their number statically makes up approximately ten percent of any population. Persons with disabilities, be they of physical, sensory, intellectual or psychological nature, are most often not included in the various stages of disaster response and in disaster preparedness measures, neither as recipients of aid to meet their basic as well as specific needs, nor as active stakeholders and designers or planners of aid measures, voicing their own needs and opinions. In addition, the incidence of new disabilities created by disasters is often not sufficiently taken into account and not responded to in an adequate, long-term manner, neither by local Governments, local NGOs or Disabled Peoples' Organizations (DPOs), nor by intervening international NGOs. This lack of long-term rehabilitation perspective can lead to detrimental or even fatal outcomes for injured disaster victims, even after the disaster has long since passed and is no longer present in public awareness. This includes the neglect of severe trauma symptoms, which, if not professionally dealt with, can result in permanent psychological disabilities.

As a basis for a change of mindsets as well as for concrete action, the UN Convention on the Protection and Promotion of the Rights and Dignity of Persons with Disabilities, adopted in December 2006, constitutes the crucial instrument of international law to claim and reinforce equality and full participation of persons with disabilities. Article 11 calls for State parties to undertake "all measures to ensure protection and safety for persons with disabilities in situations of risk, including situations of armed conflict, humanitarian emergencies and the occurrence of natural disasters".

In humanitarian emergency situations, humanitarian aid agencies and other stakeholders are called to comply with minimum standards and indicators of humanitarian aid in order to secure and protect lives, especially of vulnerable groups such as women, children, elderly and persons with disabilities. These minimum standards and indicators can be valuable guidelines, but are not yet sufficiently explicit and practical with regard to inclusion of persons with disabilities (for example refer to the handbook of The Sphere Project, 2004 edition).

In conclusion to the international conference "Disasters are always inclusive! Persons with Disabilities in Humanitarian Emergency Situations", held November 7 and 8, 2007, a number of recommendations for inclusive disaster preparedness and emergency response in the sense of "Humanitarian Aid for ALL" were deduced. It was the common understanding that the most important and at the same time most difficult requirement is to change mindsets in such a way that inclusion becomes a matter of course. From there to actual practical adjustments towards inclusiveness of disaster preparedness and response programs is a much easier step.

- I. Recommendations for Inclusive Disaster Response in General
- II. Recommendations for Inclusive Disaster Preparedness Planning
- III. Recommendations for Inclusive Response in Acute Emergency Situations and Immediate Rehabilitation Measures
- IV. Recommendations for Inclusive Post-Disaster Reconstruction and Development Measures

I. Recommendations for Inclusive Disaster Response in General

It is important to ensure inclusion of persons with disabilities, their families and communities as well as Disabled People's Organisations (DPOs) at every stage of disaster response, from planning to implementation, in order to cater for basic as well as special needs of persons with disabilities in pre, acute and post disaster situations.

Recommendations instrumental for inclusion in all stages of disaster response are:

- 1) Enable full participation of persons with disabilities and their families as active stakeholders and advisors;
- 2) Guarantee full accessibility for persons with disabilities and their families to information and services in pre, acute and post disaster situations;
- 3) Strive for involvement and creation of ownership of local government structures with regard to inclusive disaster response measures;
- 4) Lobby for government action plans for inclusion / disability mainstreaming in disaster response;
- 5) Strive for cooperation and networking between humanitarian aid agencies and organisations specialising in disability issues, both on the national and international level;
- 6) Define and learn from “best practices” of inclusion / disability mainstreaming in disaster response;
- 7) Adapt existing disaster response guidelines to include criteria and practical indicators for inclusion of disability issues;
- 8) Provide easily applicable methodologies and tools for practical inclusive action in disaster response;
- 9) Establish (self-)evaluation mechanisms to monitor and improve the quality of inclusion measures in disaster response;
- 10) Allocate adequate funding for disability issues in disaster response budgets as well as in development aid budgets for disaster prone areas.

II. Recommendations for Inclusive Disaster Preparedness Planning

Special focus must be directed towards inclusive disaster preparedness planning to ensure effective inclusive disaster response when an emergency actually takes place (be prepared = best case scenario).

Since the emergency affects local people in situ on the level of local communities, disaster preparedness planning must be community-based. Tailor-made community based disaster preparedness planning can then respond adequately to the special situations and needs of ALL, including vulnerable groups such as persons with disabilities, in a given community.

Recommendations instrumental for inclusive disaster preparedness planning are:

- 1) Raise sensitivity and awareness that disaster preparedness is important for all members of a community;
- 2) Raise sensitivity and awareness that persons with disabilities have basic and special needs that require specific attention in an emergency situation;
- 3) Mobilize and strengthen the capacities of local human resources, in particular individuals with disabilities, their families (especially the parents of the intellectually disabled), their village communities, local government structures, existing local DPOs, local research institutes etc;
- 4) Provide theoretical and practical training on disability issues (knowledge and skills) for relief workers, volunteers, family members etc. – Possible training topics: understanding disability and related basic and special needs; understanding and overcoming barriers; acquiring and improving practical skills by exercising communication techniques and evacuation methods adapted to the needs of persons with disabilities etc;
- 5) Involve disabled people themselves, their families and local DPOs in local needs assessments (participatory vulnerability mapping of communities);
- 6) Involve and train disabled people themselves, their families and local DPOs for participation in local disaster response task forces;
- 7) Establish a system of accountability for all involved stakeholders (local NGOs, voluntary task forces, local government structures etc), based on a catalogue of criteria / indicators and easily applicable self-monitoring systems to determine the degree and quality of inclusive preparedness.

III. Recommendations for Inclusive Response in Acute Emergency Situations and Immediate Rehabilitation Measures

Most often the “best case scenario”, meaning that inclusive disaster preparedness planning has taken place and preparedness measures are implemented, is not given at the incidence of disaster. Nevertheless, it is possible to include persons with disabilities in relief and in immediate rehabilitation measures.

Recommendations instrumental for inclusive relief and immediate rehabilitation after an acute emergency are:

Include issues of disability in rapid assessments of aid relevant sectors;

- 1) As a tool for rapid assessments, use easy to handle (updated) checklists which comprise disability related questions;
- 2) Find and provide assistance for the 'invisible' persons with disabilities already living in the disaster affected communities, including those with intellectual and psychological disabilities;
- 3) Pay adequate professional medical attention to newly injured or disabled persons to avoid medical complications, secondary disabilities or even fatal outcomes;
- 4) Avoid aggravation of injuries or new disabilities by inadequate transportation of injured persons during evacuation;
- 5) Pay adequate attention to the emotional and social needs of disaster victims to help them overcome normal trauma symptoms;
- 6) Pay adequate professional psychological attention to disaster victims displaying severe traumatic symptoms to avoid long-term psychic disabilities;
- 7) Include local and international experts for special focuses in rapid assessment teams and advisory teams, such as disability experts, psycho-social trauma counsellors, experienced persons with disabilities etc;
- 8) Strive for coordination of intervening stakeholders on the spot, for example through cluster meetings of local and international NGOs representing different aid sectors, including disability specific organisations;
- 9) Build alliances with other vulnerable groups, because what you do for one group (persons with disabilities) is often also valuable for others (elderly persons, pregnant or nursing mothers, mothers with many children etc);
- 10) Incorporate tools for inclusion in the context of relief and immediate rehabilitation into the next revision of The Sphere Project handbook (*knowing about these tools is also an aspect of preparedness*);
- 11) Link relief and immediate rehabilitation activities with long-term rehabilitation and development by negotiation and cooperation with local Governments and authorities.

IV. Recommendations for Inclusive Post-Disaster Reconstruction and Development Measures

Inclusive reconstruction and development, focussing on participation and empowerment of all groups of society and especially of vulnerable groups, leads to better living conditions than before the disaster and at the same time to a higher level of preparedness and thus reduction of vulnerability in the face of a potential next disaster.

Recommendations instrumental for inclusive post-disaster reconstruction and inclusive development are:

- 1) Apply principles of universal accessibility for ALL, including flexibility for adaptations to various needs of persons with disabilities when implementing housing reconstruction projects;
- 2) Include universal accessibility features when involved in planning and reconstruction of infrastructure and public facilities;
- 3) Involve beneficiaries as active participants in every stage of the reconstruction project cycle;
- 4) Facilitate and monitor inclusive planning and reconstruction with the help of expert advice from skilled and specialized persons with disabilities;
- 5) Allocate sufficient time for sensitization, awareness raising, negotiation and cooperation with key (local) stakeholders, such as affected communities, persons with disabilities and their families, DPOs, local authorities (community and national levels), professionals (architects, engineers) etc;
- 6) Lobby for government policies and minimum standards for barrier-free reconstruction, including reconstruction of infrastructure and public facilities (refer to article 9 of the UN Convention on the Rights of Persons with Disabilities);
- 7) Raise awareness for cost efficiency of barrier-free reconstruction from the very beginning as compared to subsequent technical adjustments;
- 8) Further develop and apply tools (checklists, manuals) for barrier-free reconstruction and adapt them to local environments (adjustment of minimum standards to local context);
- 9) Strive for continuation of medical care and rehabilitation as well as psycho-social support for persons injured or disabled by the disaster through their integration into long-term local public health programs;
- 10) Support the development of a referral system linking existing facilities required in long-term rehabilitation;
- 11) Develop self-help capacities of persons with disabilities and their families through livelihood programs (professional training, income generating projects);
- 12) Monitor and evaluate long-term rehabilitation and development measures to make necessary changes for improved impact and sustainability;
- 13) Make disaster preparedness planning a crucial element of and a trigger for inclusive community development (refer to paragraph I. of this document).