**REPUBLIC OF GHANA**

# National Disability Inclusive Disaster Risk Management Guidelines

## To augment the existing humanitarian framework and climate change responses

# ACKNOWLEDGEMENT

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# OUTLINE

# FOREWORD

The National Council on Persons with Disability is the state agency for disability matters and systemic inclusion of persons with disabilities in Ghana. The principal mandate of the Council, as stated in the Persons with Disabilities Act, 2006 (Act 715), is to propose and develop policies and strategies to enable persons with disabilities to participate in the mainstream of the national development process.

The COVID-19 pandemic, which swept through the country in March 2020, highlighted the deficiencies in public policy to fully address the needs of persons with disabilities during disasters. It became even more imperative to policymakers that the country roll out a comprehensive guide that mainstreams the needs of persons with disabilities in the operations of disaster response organizations.

The National Disability Inclusive Disaster Risk Management Guidelines do not create new policies and regulations; instead, they augment the existing framework for mainstreaming disability in disaster risk management.

This National Disability Inclusive Disaster Risk Management Guidelines translates into practice one of the commitments that the Government of Ghana made during the 2018 and 2022 Global Disability Summit to address the concerns of persons with disabilities in humanitarian response.

The Guidelines emphasizes the need for persons with disabilities and their representative organizations to be actively involved in the development of disaster risk response policies, implementation, monitoring and evaluation. It provides concise steps for disaster response organizations to guide their operations across the preparedness & mitigation phase to the response and recovery phases. The unique needs of persons with various forms of disabilities and appropriate reasonable accommodation provisions that must be made are highlighted in the Guidelines.

The National Council on Persons with Disability (The Council) and the National Disaster Management Organization (NADMO) will continue to remain resolute in their

commitment to mobilizing efforts for the full implementation of these Guidelines to accelerate progress towards the fulfillment of the promotion and protections of the rights of persons with disabilities in Ghana.

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# PART ONE – PRELIMINARY MATTERS

## Introduction

Disaster risk management response mechanisms are key development initiatives that support the wellbeing of millions of persons facing disaster risks both globally and nationally. Ghana continues to face disaster risks such as perennial floods, fires during the harmattan season, tidal waves at the coastal areas, pandemics such as HIV/AIDS, the Yellow Fever, as well as the COVID-19. The United States Agency for International Development Climate Change Risk Profile on Ghana (2017) projects that Ghana will experience warmer annual temperatures, reduced and erratic rainfalls, drought-like conditions, and rising sea levels by 2080 due to climate change. Analysts predict Ghana will be disproportionately affected because of intrinsic vulnerabilities to hazards and comparatively low capacities for risk-reduction measures.

Inasmuch as policies and practices are put in place to combat disaster risks and to support the most vulnerable citizens, they have not been inclusive of persons with disabilities who are the most vulnerable among the vulnerable citizens. As a result, disaster risk management response mechanisms fail to respond to the needs of persons with disabilities across Ghana.

The World Health Organization (2017) estimates that about 15 percent, that is about one billion of the World's population are persons with disabilities. It is also noted that about 10 percent of every country's population live with some form of disabilities. The estimate is much higher for developing and low-income countries (15-20 percent). If we go by this estimation, then, Ghana could have as higher as 5 million Ghanaians living with some form of disabilities. Five million persons with disabilities is a significant number whose needs and peculiar vulnerability needs to be catered for in the disaster risk response measures geared towards disaster preparedness & mitigation, response and recovery.

The 2017 disaggregated database of the National Council on Persons with Disability discloses that 261 MMDAs have the presence of the following 26 categories of persons with disabilities listed as:

1. Persons with physical disabilities
2. Deaf persons
3. Persons who are non-verbal
4. Persons with communication disabilities including speech and language disabilities
5. Persons who are hard of hearing
6. Persons with visual disabilities

7. Persons with multiple disabilities such as deafblind
8. Persons with psychosocial disabilities
9. Persons with cerebral palsy
10. Persons with bipolar conditions
11. Persons with attention deficit disorders
12. Persons with schizophrenia
13. Persons with developmental and neurological disabilities
14. Persons with autism
15. Persons with Down syndrome
16. Persons with Turner Syndrome
17. Persons with spinal injury
18. Persons with autoimmune conditions
19. Persons with osteogenesis imperfecta
20. Persons with albinism
21. Persons with intellectual disabilities
22. Persons with epilepsy
23. Persons with leprosy
24. Little persons
25. Persons with hunchback.
26. Burns Survivors

The National Disability Inclusive Disaster Risk Management Guidelines is to augment laws, policies, programs and practices that manage risk disasters and provide for guidelines for the inclusion of all categories of persons with disabilities in disaster preparedness & mitigation, response, recovery and other related matters.

In compliance with Section 42 (1) of the Persons with Disability Act, 2006 (Act 715), the National Council on Persons with Disability with its relevant stakeholders, including the Ministries, Departments and Agencies (MDAs), Metropolitan, Municipal & District Assemblies (MMDAs), the academia, organizations of/for persons with disabilities, civil society organizations that work to promote the interest of persons with disabilities and development partners have developed this Guidelines to enable disaster risk management agencies to specifically and consciously include persons with disabilities in their disaster risk management operations.

The Guidelines are premised on taking prioritized measures for the sustainability, protection and safety of persons with disabilities in situation of risk and humanitarian response. The Guidelines are to be used in conjunction with the Sendai Framework for Disaster Risk Reduction (2015-2030), the Africa Regional Strategy for Disaster Risk Reduction, ECOWAS Humanitarian Policy, ECOWAS Policy for Disaster Risk

Reduction, the National Disaster Management Organization Act, 2016 (Act 927) and other sphere companion standards.

## Objectives

The National Disability Inclusive Disaster Risk Management Guidelines are designed to:

i.  Help understand the needs, capacities, and rights of persons with disabilities.
ii.  Promote the inclusion of persons with disabilities before, during and after disaster risks and emergencies.
iii.  Strengthen accountability of disaster response organizations.

### Twin Track Approach

The National Disability Inclusive Disaster Risk Management Guidelines promote a twin-track approach towards the inclusion of persons with disabilities in humanitarian action. This involves identifying their needs, providing specific interventions targeted at protecting persons with disabilities, to support their empowerment, by integrating disability and age-sensitive measures into policies and programs at all stages of humanitarian response. It promotes concurrent action across two broad sets of initiatives. One set is through specific activities that target persons with disabilities directly and the other relates to mainstreaming disability into broader activities. Interventions on either track alone will not provide the breadth of involvement, integration and support needed for persons with disabilities to fully participate in mainstream society.

### Disaster Risk Management Agencies

This Guidelines seeks to promote and compliment the mandate of the following Ministries, Departments and Agencies:

1. National Disaster Management Organization (NADMO)
2. Ministry of Interior
3. Ministry of Water Resources, Works & Housing
4. Ministry of Defence
5. Ministry of Local Government, Decentralization & Rural Development
6. Ministry of Food and Agriculture
7. Ministry of Finance
8. Ministry of Information
9. Ministry of Health
10. Ministry of Foreign Affairs and Regional Integration
11. Ministry of Environment, Science, Technology and Innovation
12. Ministry of Gender, Children and Social Protection

13. The Inter Agency Standing Committee of the United Nations Country Team

## Principles & Frameworks

The Inclusive Disaster Risk Management Guidelines complements a number of standards and frameworks in international humanitarian law, human rights law and conventions including the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD).

**International Human Rights Framework Underlying the Management of Disaster Risks**

### i. Humanitarian Charter & Minimum Standards in Disaster Response

The Humanitarian Charter provides the ethical and legal backdrop to the protection principles, the core humanitarian standards, and the minimum standards to follow in risk disaster management. These minimum standards are underpinned by the basic principles derived from the UN Convention on the Rights of Persons with Disabilities and the Humanitarian Standards for Inclusion of Older People and Persons with Disabilities. The Charter further requires that humanitarian assistance must be provided solely on the basis of need and in proportion to that need and prohibits discrimination on the ground of disability (SPHERE Handbook on Humanitarian Charter, 2018).

The basic principles include:

1. Humanitarian principles of humanity, impartiality, neutrality and independence;
2. Non-discrimination;
3. Accessibility;
4. Respect for the inherent dignity of persons with disabilities;
5. Active and effective participation and equality of opportunities;
6. Respect for diversity and acceptance of persons with disabilities;
7. Equality between men and women, girls and boys with disabilities;

### ii. Sendai Framework for Disaster Risk Reduction (2015 – 2030)

The Sendai Framework recognizes that the wellbeing of persons with disabilities is affected by disasters and calls for dedicated actions in tackling risk drivers such as inequalities, poverty and pandemics that impact negatively on the social and economic wellbeing of persons with disabilities (Sendai Framework 2015-2030). The Framework suggests a broader and more people-centred preventive approach to disaster risk including practices that are multi-sectoral, inclusive and accessible in order to be more effective and efficient (Sendai Framework 2015-2030).

### iii. Hyogo Framework for Action (2005 – 2015)

The Hyogo Framework for Action acknowledges the increasing vulnerability of populations coupled with socio-economic conditions and the impact of pandemics such as the COVID-19. It points to a future where disasters could increasingly threaten the world's economy, its population and sustainable development of developing countries like Ghana. The strategic goal of the Framework calls for the integration of "effective disaster risk considerations into sustainable development policies, planning and programming at all levels, with a special emphasis on disaster prevention, mitigation, and preparedness and vulnerability reduction".

### iv.  UN Convention on the Rights of Persons with Disabilities (UNCRPD)

The UNCRPD overrides the previous human rights standards by recognizing disability as a social construct, and the need to remove systemic barriers to promote the inclusion of persons with disabilities in situations of emergencies.

The UNCRPD provides enough consideration in terms of prioritizing the socio-economic wellbeing of persons with disabilities including the underlying determinants such as access to food, healthcare, clean water and sanitation, access to inclusive education, transport, social protection including social insurance and employment in situations of risk and humanitarian emergencies.

The UNCRPD introduces a nuanced approach of a new paradigm shift based on a human rights model that promotes equality, inclusion, support and reasonable accommodation recognizing the barriers in society that hinder the effective participation of persons with disabilities (UNCRPD, 2006). According to the Committee on the rights of persons with disabilities, the CRPD "establishes a legal framework which focuses on both the human rights and social development of persons with disabilities. Within this legal framework, persons with disabilities are directly addressed in a unique standalone article creating obligations that apply specifically in situations of humanitarian emergencies and have no derogation clause that can permit the suspension of human rights in public emergencies, wherever they occur in the world" (Statement by the Committee on the Rights of Persons with Disabilities on Disability Inclusion for the World Humanitarian Summit, 2015).

### v.  African Charter on Human and People's Rights on the Rights of Persons with Disabilities 2018

At the regional level, the African Charter on Human and People's Rights guarantees the protection of physical and mental wellbeing of persons with disabilities, including access to health services as well as their social and economic rights (Articles 16, 18 and 22 of the African Charter on Human and People's Rights 1981). Further, the Protocol to the African Charter on Human and People's Rights on the Rights of Persons with Disabilities, though not yet in force, obliges states to take specific

measures to guarantee the safety and protection of persons with disabilities in situations of emergencies and natural disasters and urges states to consult persons with disabilities and ensure their full and effective planning and implementation of response measures during disasters and the post recovery efforts (Article 12 of the Protocol to the African Charter on Human and People's Rights on the Rights of Persons with Disabilities).

## vi.   The Programme of Action for the Implementation of the Sendai Framework for Disaster Risk Reduction 2015-2030 in Africa in line with the African Regional Strategy for Disaster Risk Reduction

The document is the strategic plan for the implementation of the Sendai Framework in Africa. It is intended to provide guidance and direction for actions by all at the continental, regional, national and local levels in Africa to prevent and reduce the risk of disasters for resilience. It comprises and integrates strategic DRR elements to be carried out over the 15-year period of the Sendai Framework. It includes 5-year action plan, comprising of priority activities as Phase 1 of the Programme of Action (PoA). The strategic direction is in the strategic areas of intervention of the PoA while the specific activities of the 5-year programme are guided by the Sendai Framework and prioritized based on continental, regional, national and local strategic needs.

## vii.   The Africa Regional Strategy for Disaster Risk Reduction (2004)

The Strategy builds on existing risk reduction institutions and programmes available in African countries and regional communities and aims to mainstream them to better contribute to disaster risk reduction. The Strategy recognized that disaster risk interventions are best undertaken at the national level and so helps to facilitate initiatives by regional communities and countries to develop their own strategies in harmony with the document as well as to provide a broad range of strategic directions that countries and regional communities can tailor to their specific needs. The objectives of the Strategy are to increase political commitment to disaster risk reduction, improve identification and assessment of disaster risks, enhance knowledge management for disaster risk reduction, increase public awareness of disaster risk reduction, improve governance of disaster risk reduction institutions and integrate disaster risk reduction into emergency response management.

## viii. ECOWAS Humanitarian Policy (2012)

The ECOWAS Humanitarian Policy seeks to standardize the practice of humanitarian action in member states by fostering a balanced linkage between humanitarian action, human security and human development throughout the ECOWAS space based on the principle of regional solidarity. The Policy focuses on the following four priority

areas: conflict; natural disaster, human-made disaster; and mixed-migration and refugee protection. The scope areas entail preparing for and adequately responding to any emergency situation involving refugees and internally displaced persons or other affected persons.

**ix. ECOWAS Policy for Disaster Risk Reduction (2006)**

The policy for disaster reduction of ECOWAS is to facilitate sustainable integration and development of West African states and governments through promoting and supporting effective disaster risk management that helps create safer and resilient communities in social, economic and environmental terms. The policy addresses disasters triggered by natural hazards, exacerbated by conflict but does not contain explicit interventions on conflicts. The policy is not a detailed description or blueprint for national action but an expression of agreed principles, objectives, priorities and institutional aspects of developing effective, efficient and sustainable disaster risk management in the sub-region.

**National Human Rights Framework Underlying the Management of Risk Disasters**

**i.      National Disaster Management Organization Act, 2016 (Act 927)**

The mandate of the National Disaster Management Organization (NADMO) includes all activities from preparedness to response and recovery, preventing disasters, creating awareness in prone communities and institutions about all hazard/disaster types. NADMO also trains and motivates the communities, especially volunteers to initiate actions to prevent and respond to disasters; bring relief to disaster victims, assist to reduce poverty in vulnerable and poor communities through social mobilization for employment creation and income generation at the regional and district level. The object of the organization is to manage disasters and other emergencies and to develop the capacity of communities to respond effectively to disasters and emergencies.

Some of the functions of NADMO include:
a. Responsibility for the implementation of the Government policy on disaster prevention, disaster risk reduction and climate risk management; and of the international, national and district disaster management plans
b. Advising the Government on matters that relate to disaster and emergency prevention rules and regulations and their correlative sanctions
c. Facilitating the development of communities and community-based organizations to respond effectively to a disaster, and to improve their livelihood through social mobilisation, employment generation projects

### ii.      Persons with Disability Act 2006 (Act 715)

Act 715 establishes the National Council on Persons with Disability as the State Agency for disability matters and systemic inclusion of persons with disabilities. The mandate of the Council is to propose and evolve policies and strategies to enable persons with disabilities participate in mainstream national development process. Some of the functions of the National Council on Persons with Disability includes:

a) monitor and evaluate disability policies and programmes,
b) formulate strategies for broad-based inter-sectoral, interdisciplinary involvement and participation in the implementation of the national disability policy,
**c)** promote studies and research on issues of disability and provide education and information to the public on issues of disability.

### iii.     Ghana Fire Service Act, 1997 (Act 537)

At the national level, the mandate of the Ghana Fire Service is to prevent and manage undesired fire. Some of the functions of the Ghana Fire Service include:

a. Offer rescue and evacuation services to those trapped by fire or in other emergency situations
b. provide technical advice for building plans in respect of machinery and structural layouts to facilitate escape from fire, rescue operations and fire management
c. train and organize fire volunteer squads at community level

### iv.      Ghana Ambulance Service Act 2020 (Act 1041)

At the national level, the mandate of the National Ambulance Service is to provide for the effective administration of emergency care services nationwide. Some of the functions of the Ghana Ambulance Service includes:

(a)  Ensure the provision of timely emergency care services for persons involved in accidents, accidents, disasters and any other emergencies.
(b) Collaborate with the relevant agencies:
- Involved in providing emergency care services for purposes of national disaster planning, and
- To co-ordinate volunteer first aid groups in the event of major emergencies and disasters

### v.       Ghana Police service Act 1970 (Act 350)

At the national level, the mandate of the Ghana Police Service is to maintain law and order. Some of the functions of the Ghana Police Service includes:

a. It shall be the duty of the Police Service to prevent and detect crime, to apprehend offenders, and to maintain public order and the safety of persons and property.
b. Every police officer shall perform such functions as are by law conferred upon a police officer and shall obey all lawful orders and directions in respect of the execution of his office which he may receive from his superiors in the Police Service.

**vi.      Ghana National Social Protection Policy 2015**

The vision of the policy is "an all-inclusive and socially empowered society through the provision of sustainable mechanisms for the social protection of persons living in situations of extreme poverty and related vulnerability and exclusion". It adopts the principle that every Ghanaian matter and is capable of contributing to national development.

The objects of the Policy are:

a) Poverty would have been reduced by half through increased and improved effective and efficient social assistance for poor and vulnerable Ghanaians;
b) Employment opportunities would have been considerably enhanced throughout the promotion of productive inclusion and decent work to sustain families and communities;
c) Social security and social insurance would have been increased and improved for all Ghanaians
d) Progress on these objectives shall be measured by targets in line with those proposed under the SDGs

# PART TWO – INCLUDING ALL CATEGORIES OF PERSONS WITH DISABILITIES IN DISASTER RISK MANAGEMENT

Part II of this Guidelines looks at deliberate steps that disaster risk managers could use to consciously include all categories of persons with disabilities in disaster risk management. Accordingly, this section looks at the 3 broad phases of disaster risk management:

1. Prevention, Mitigation & Preparedness Phase
2. Response Phase
3. Recovery Phase

These measures are to complement existing disaster risk management laws, policies and practices.

## Prevention, Mitigation & Preparedness Phase

Preventive measures comprise of mainstreaming disability issues in all policies and plans for disaster management as per government policies such as the Persons with Disability Act, 2006; and various international agreements such as the UNCRPD and Sendai Framework for Disaster Risk Reduction. The goal is to ensure that persons with disabilities and/or their organization make input in all phases of disaster risk management.

Mitigative actions reduce or eliminate the probability of disaster occurrence or reduce the effects of unavoidable disasters. Mitigative measures include building codes; vulnerability analyses updates; zoning and land use management; building use regulations and safety codes; preventive health care; and public education. Its effectiveness will also depend on the availability of information on hazards, emergency risks, and the countermeasures to be taken.

Preparedness strategies involve programs to achieve a satisfactory level of readiness to respond to any emergency situation through programs and policies that strengthen the technical and managerial capacity of stakeholders.

## Response Phase

Response strategies are to provide immediate assistance to maintain life, improve health and support the morale of the affected population. Such assistance may include provision of aid like assisting persons with disabilities with transport, temporary shelter, food and healthcare.

## Recovery Phase

As the emergency is brought under control, the affected population goes through a number of activities aimed at restoring their lives and the infrastructure that supports them. Recovery measures include returning vital life support systems to minimum operating standards, accessible temporary housing, public information, health and safety education, reconstruction, counseling programs and economic recovery.

**RESPONSE PHASES AND ACTION REQUIRED**

| S/N | THEME | ACTION |
|---|---|---|
| **PREVENTION, MITIGATION & PREPAREDNESS PHASE** | | |
| 1. | Data and Identification | The Council shall provide disaggregated data and information on persons with disabilities on its media platform, Ghana Open Data Initiative and upon request |
| 2. | Vulnerability Assessment | The disaggregated data on persons with disabilities in the MMDAs shall be the outcome of the vulnerability assessment |
| | | The Council will provide a framework for assessing the built environment for their suitability for persons with disabilities. |
| 3. | Capacity Building for Risk Disaster Managers | The Council shall build the capacity of Disaster Risk Managers on disability technical knowledge |
| 4. | Awareness Creation | Sensitize the community on the special needs and rights of persons with disabilities for disaster risk response |
| 5. | Simulation Exercises | Exercises/ mock drills shall be conducted regularly for all disaster risk stakeholders in a suitable and age-appropriate to persons with disabilities |
| **RESPONSE PHASE** | | |
| 6. | Information & Communication and Early Warning Systems | Emergency information and early warning messages must be in community-based, age-appropriate, augmentative and alternative formats to ensure that persons with hearing, visual, and psychosocial disabilities, deaf and deafblind |
| 7. | Assistive Devices | Risk Disaster Managers shall rescue, evacuate and preserve the lives of persons with disabilities in addition to their assistive devices |
| | | Disaster Risk Managers are to carefully and diligently stockpile assistive devices to ensure that they are ready for use after the risk disaster response measures |
| 8. | Personal Assistants, Caregivers & Family Members of Persons with Disabilities | Disaster Risk Managers shall rescue, evacuate and preserve the lives of persons with disabilities in addition to their personal assistants, caregivers and family members |
| 9. | Relief & Relief Centers (Safe Havens) | • The Ghana Accessibility Standards on the Built Environment and the related Universal Design information shall guide the design, redesign, and construction of relief centers<br>• The centers shall have accessible toilet and bathrooms and open spaces for communal use |

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|---|---|---|
| | | • The centers shall have the appropriate mode of communication to include all persons with various forms of disabilities |
| 10. | Evacuation Facilities & Transportation | • During search, rescue & evacuation operations, the following categories of persons with disabilities, including children and elderly with disabilities, shall be prioritized:<br>  1. Deafblind<br>  2. Blind<br>  3. Persons with physical disabilities<br>  4. Persons with psychosocial disabilities<br>• Generally, the following groups of persons with disabilities should be prioritized:<br>  5. Children with disabilities<br>  6. Women with disabilities<br>  7. The elderly with disabilities<br>• Search, rescue & evacuation exercises/ mock drills shall be suitable and age-appropriate to all persons with disabilities involved<br>• Search, rescue & evacuation related equipment for use during disasters shall comply with the Principles of Universal Design |
| | | Disaster Risk Agencies shall have disability appropriate evacuation facilities including safe, timely and accessible transportation, including the following accessible features:<br>1. The audiovisual features will enable the blind move independently<br>2. The tactile features will enable the deafblind move independently<br>3. The signage and visual aids will enable the deaf and hard of hearing to move independently<br>4. Animation features will enable persons with psychosocial disabilities to find their bearings |
| 11. | Medical Care/ First Aid | • Persons with disabilities shall be prioritized in medical care and first aid response. However, medical care shall be consistent with medical history<br>• Disaster Risk Managers shall ensure critical care and proper documentation to those who may have acquired disability during disasters |
| 12. | Mental Health Care | Disaster Risk Managers shall provide post-traumatic stress disorders and psychological care to affected persons with disabilities |
| 13. | Food Security & Essential Supplies | Make food distribution centers accessible and have separate lines and means for distribution of food and |

| | | essential supplies to persons with disabilities, their caregivers, their families and personal assistants |
|---|---|---|

| **RECOVERY PHASE** | | |
|---|---|---|
| 14. | Resettlement | The Disaster Risk Managers shall employ measures to restore the livelihood of affected persons with disabilities: <br> 1. Impart appropriate available choice-based skill training to persons with disabilities <br> 2. Integrate various initiatives and schemes, soft loans and entrepreneurship opportunities |
| 15. | Post-Disaster Reconstruction | All post-disaster reconstruction activities shall be in accordance with the accessibility requirements of persons with disabilities, including the Ghana Accessibility Standards on the Built Environment and relevant Universal Design guidelines |
| 16. | Legal Aid/ Grievance Redressal Mechanism | Aggrieved persons with disabilities shall lodge their grievances with the relevant Disaster Risk Management Agency. However, when they are not satisfied, they shall lodge their grievances with the National Council on Persons with Disability for the appropriate referral |
| 17. | Counselling & Community Support | • Disaster Risk Managers shall provide post-traumatic stress disorders counselling to persons with disabilities <br> • Community-led approach should be established to support the rapid restoration of services essential to persons with disabilities and present them with an opportunity to build resilience and improve community circumstance and preparedness beyond their pre-disaster status <br> • There should be a collaborative, coordinated, adaptable and scalable approach where the responsibility for disaster recovery should be shared among all sectors of the community including individuals, families, community, groups, businesses and all levels of government |

# PART THREE - STRENGTHENING DISASTER RISK GOVERNANCE

Part III provides guidelines on strengthening disability inclusion in disaster risk governance through the full participation of relevant stakeholders across all areas and levels of disaster risk governance. This will improve the coherence of policies and programs in the field; solidify coordination between relevant stakeholders including MDAs, CSOs and OPDs; promote compliance with appropriate accessibility design standards; build the capacity of local authorities and actors; and improve accountability.

| SN | THEME | ACTION |
|---|---|---|
| 1. | Institutional Mechanism & Policy Framework | 1. Representation of the National Council on Persons with Disability on the National, Regional and District Disaster Management Committees<br>2. Consultation with the National Council on Persons with Disability in all policies and plans for disaster management<br>3. Persons with disabilities, Organizations of/for Persons with Disabilities and Civil Society Organizations that work to promote the interest of persons with disabilities shall be included in community capacity building and disaster response planning |
| 2. | Monitoring & Evaluation | 1. Mainstreaming of disability into standard monitoring framework for effective implementation of schemes<br>2. Evaluation of schemes through accessibility & social audits by the Council in collaboration with NADMO and relevant partners |
| 3. | Standard Operating Procedures (SOP) | 1. Consultation with the Council to review Standard Operating Procedures for various groups such as rescue personnel, medical & relief workers etc., including Search & Rescue SOP |

# PART FOUR – TOOLS AND RESOURCES

## Annex One: Collaborating Agencies

| Committees | Organizations Involved | Functions |
|---|---|---|
| **National Disaster Management Committee** | <ul><li>Ministry of Interior</li><li>Ghana Health Service</li><li>National Ambulance Service</li><li>Ministry of Water and Sanitation</li><li>Ministry of Information and Media Relations</li><li>Ministry of Local Government and Rural Development</li><li>Ministry of Finance</li><li>Ministry of Food and Agriculture</li><li>Ministry of Foreign Affairs and Regional Integration</li><li>Ministry of Environment, Science, Technology and Innovation</li><li>Ministry of Gender, Children and Social Protection</li><li>The Chief of Defense Staff</li><li>National Platform for Disaster Risk Reduction and Climate Change Risk Management</li><li>Representative of the Consortium of Non-Governmental Organizations</li><li>representative of the Inter-Agency Standing Committee of the United Nations Country Team</li><li>Representative of the Ghana Federation of the Disabled</li><li>Legal Officer of the Organization as the secretary</li></ul> | a. Ensure that there are appropriate and adequate facilities for the provision of relief, rehabilitation, reconstruction and recovery in the event of any disaster;<br><br>b. Liaise with public institutions, nongovernmental agencies and donor agencies for financial support and the provision of logistics for the management of disasters;<br><br>c. Perform any other functions incidental to the functions of the National Disaster Management Committee.<br><br>d. National Disaster Management Committee has the primary responsibility for coordination and management in respect of national disasters<br><br>e. National Disaster Management Committee shall perform its functions expeditiously and efficiently inaccordance with any regulations or directives issued by the President where a national disaster occurs<br><br>f. A public or private institution may provide the National Disaster Management Committee with the assistance necessary to deal with the national disaster<br><br>g. The National Disaster Management Committee shall collaborate with other relevant agencies towards the management of a national disaster |

| Regional Disaster Management Committee | <ul><li>Regional Minister as the chairperson</li><li>the Chairperson of the Regional Platform for Disaster Risk Reduction and Climate Change Risk Management</li><li>the Regional Director of the Organisation as secretary to the Committee</li><li>the Armed Forces Garrison Commander</li><li>the Regional Police Commander</li><li>the Regional Fire Officer; (g) the Regional Director of Health Services</li><li>the Regional Director of Social Welfare</li><li>the Regional Information Officer</li></ul> | a. prepare in respect of the Region , plans for the prevention of disasters and for mitigating the effects of disaster <br> b. co-ordinate the preparation and implementation of district disaster management plans <br> c. perform other functions relevant to the Regional Disaster Management Committee |
|---|---|---|
| District Disaster Management Committee | <ul><li>the District Chief Executive as the Chairperson</li><li>the District Director of the Organization as Secretary</li><li>the chairperson of the District Platform for Disaster Risk Reduction and Climate change Risk Management</li><li>the Member of Parliament in the district</li><li>the District Director of Health Service</li><li>Representative of the Garrison Commander of the Armed Forces</li><li>the District Police Commander</li><li>the District Fire Officer</li><li>the District Information Officer</li></ul> | a. prepare plans for the district to prevent and mitigate disasters in its area of authority <br> b. maintain a close liaison with the Regional Disaster Management Committee in drawing up its plans <br> c. perform in the district the functions directed by the Council or the Director General |

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|---|---|
| | • the District Director of Education<br>• the District Environmental Officer<br>• the District Planning Officer of the District Assembly<br>• the District Social Development Welfare Officer from the Department of Social Welfare | |

## Annex Two: Universal Design

| SN | PRINCIPLE | COMMENTS |
|---|---|---|
| 1 | Equitable Use | The design is useful and marketable to people with diverse abilities |
| 2 | Flexibility in Use | The design accommodates a wide range of individual preferences and abilities |
| 3 | Simple and Intuitive Use | Use of the design is easy to understand, regardless of the user's experience, knowledge, language skills, or current concentration level |
| 4 | Perceptible Information | The design communicates necessary information effectively to the user, regardless of ambient conditions or the user's sensory abilities |
| 5 | Tolerance for Error | The design minimizes hazards and the adverse consequences of accidental or unintended actions |
| 6 | Low Physical Effort | The design can be used efficiently and comfortably and with a minimum of fatigue |
| 7 | Size and Space for Approach and Use | Appropriate size and space are provided for approach, reach, manipulation, and use regardless of user's body size, posture, or mobility |

## Annex Three: Accessibility Needs Table

| CATEGORY OF DISABILITY | KEY CHARACTERISTICS | ACCESSIBILITY NEEDS | ASSISTIVE DEVICES/SUPPORT |
|---|---|---|---|
| 1. Persons with physical disabilities | • Difficulty moving limbs | • Ramps<br>• Lifts<br>• Ground floor<br>• Enough turn around space | • Wheelchair<br>• Walking sticks<br>• Clutches<br>• Walking Stand<br>• Calipers<br>• Prosthetics limbs<br>• Stair chairs/gliding chairs |
| 2. Deaf persons | • Non-verbal<br>• non-hearing | • Hearing aids<br>• Sign language interpretation<br>• Voice magnifiers | • Hearing Aids<br>• Emergency lights<br>• Vibrating mattresses |
| 3. Persons who are non-verbal | • They can hear but are non-verbal | • Sign language interpretation<br>• Voice magnifiers<br>• Lip reading | • Visual aids<br>• Emergency lights |
| 4. Persons with communication disabilities, including speech and language disabilities | • Slow speech<br>• Incoherence | • Pictorial guide<br>• Patience when dealing with them | • Support persons |
| 5. Persons who are hard of hearing | • Difficulty in hearing | • Sign language interpretation<br>• Voice magnifiers | • Hearing Aids<br>• Emergency Lights |
| 6. Persons with visual disabilities | • Total blindness<br>• Partial sighted | • Braille transcription<br>• Visual magnifier<br>• Screen readers | • White canes<br>• Screen reading software<br>• Audio and tactile signs and warnings<br>• Computer devices<br>• Large print |

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| 7. Persons with multiple disabilities | • A combination of other impairments | • History of Medication | • Wheelchair<br>• Walking sticks<br>• Clutches<br>• Walking Stand<br>• Calipers<br>• Prosthetics limbs<br>• Stair chairs/gliding chairs |
| 8. Deafblind | • Non-verbal and non-hearing<br>• Blind | • Tactile interpretation<br>• Braille transcription | • White cane |
| 9. Persons with mental health conditions | • Easily stressed<br>• Easily oppressed<br>• Self-isolation<br>• Easily relegated to the background | • Stress free measures<br>• Conscious effort to include them<br>• Easy and relaxing atmosphere<br>• Flexible timelines<br>• Sniffer dogs to help find them should they be self-isolated | • Pictures<br>• Easy to read text |
| 10. Persons with cerebral palsy | • Lack balance and stability<br>• Stiff/loose muscles<br>• Speech difficulty | • Ramps<br>• Lifts<br>• Ground floor<br>• Enough turn around space | • Wheelchair<br>• Walking sticks<br>• Clutches<br>• Walking Stand<br>• Calipers<br>• Stair chairs/gliding chairs<br>• Adapted seat |
| 11. Persons with bipolar conditions | • Easily stressed<br>• Easily oppressed | • Stress free measures | • Pictures<br>• Easy to read text |

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| | • Easily ignored<br>• Easily relegated to the background | • Conscious effort to include them<br>• Easy and relaxing atmosphere<br>• Flexible timelines | |
| 12. Persons with attention deficit disorders | • Easily stressed<br>• Easily oppressed<br>• Easily ignored<br>• Easily relegated to the background | • Stress free measures<br>• Conscious effort to include them<br>• Easy and relaxing atmosphere<br>• Flexible timelines | • Pictures<br>• Easy to read text |
| 13. Persons with schizophrenia | • Easily stressed<br>• Easily oppressed<br>• Easily ignored<br>• Easily relegated to the background | • Stress free measures<br>• Conscious effort to include them<br>• Easy and relaxing atmosphere<br>• Flexible timelines | • Pictures<br>• Easy to read text |
| 14. Persons with autism | • Easily stressed<br>• Self-isolation<br>• Easily relegated to the background<br>• Some have speech issues | • Stress free measures<br>• Conscious effort to include them<br>• Easy and relaxing atmosphere<br>• Flexible timelines | • Pictures<br>• Easy to read text |

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| 15. Persons with Down syndrome | • Easily relegated to the background<br>• Very sociable<br>• Intellectual disability<br>• Absent minded | • Stress free measures<br>• Conscious effort to include them<br>• Easy and relaxing atmosphere<br>• Flexible timelines | • Pictures<br>• Easy to read text<br>• Age-appropriate interaction |
| 16. Persons with Turner Syndrome | • Easily stressed<br>• Easily oppressed<br>• Easily ignored<br>• Easily relegated to the background<br>• | • Stress free measures<br>• Conscious effort to include them<br>• Easy and relaxing atmosphere<br>• Flexible timelines | • Pictures<br>• Easy to read text |
| 17. Persons with spinal injury | • Not compatible with staircase<br>• Slow movement | • Ramps<br>• Lifts<br>• Ground floor<br>• Enough turn around space | • Wheelchairs<br>• Clutches |
| 18. Persons with autoimmune conditions | • Loose functioning of some body parts<br>• Loss of balance<br>• Slow movement<br>• Easily fatigue | • Dietary support<br>• Should not work for long hours<br>• Careful medication | • Wheelchairs<br>• Walking Aids<br>• Braces |
| 19. Persons with osteogenesis imperfecta | • difficulty using staircase<br>• Slow movement<br>• Brittle bones | • Ramps<br>• Lifts<br>• Ground floor<br>• Handled with care | • Wheelchair<br>• Clutches |

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| 20. Persons with albinism | • Difficulty in seeing<br>• Vulnerable to sun rays | • Visual magnifier<br>• Large screen materials | • Magnifiers<br>• Glasses<br>• Low vision aids<br>• Sunscreens lotion |
| 21. Persons with intellectual disabilities | • Easily stressed<br>• Easily oppressed<br>• Easily ignored<br>• Easily relegated to the background<br>• Generally slow | • Stress free measures<br>• Conscious effort to include them<br>• Easy and relaxing atmosphere<br>• Flexible timelines | • Pictures<br>• Easy to read text<br>• Animation |
| 22. Persons with epilepsy | • Sensitivity to bright lights, loud sounds, flashing etc.<br>• Seizures | • Individual and priority notification where necessary, including assistance to evacuate if required<br>• Education on signs and symptoms for epileptics<br>• medication | • Engage with the person or careers to provide balanced nutrition<br>• Provide a safe environment that prevents injury<br>• Reduce bright lights, flashing etc.<br>• Use of sniffer dogs |
| 23. Persons with leprosy | • Discolored patches of skin, usually flat, that may be numb and faded<br>• Growths on skin<br>• Thick, stiff & dry skin | • Individual and priority notification where necessary, including assistance to evacuate if required | • Wheelchairs<br>• Orthopedic shoes |

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| | • Painless ulcers on soles of feet<br>• Painless swelling or lumps on face or earlobes<br>• Loss eyebrows or eyelashes | | |
| 24.  Little persons | • Short<br>• Some cannot climb<br>• Some have difficulty walking | • Individual and priority notification where necessary, including assistance to evacuate if required | • Personal assistance |
| 25. Persons with hunchback. | • Difficulty in walking<br>• Easily tired over long distance | • Individual and priority notification where necessary, including assistance to evacuate if required | • Wheelchairs |
| 26.  Burns Survivors | • Scars<br>• Disfigured<br>• Self-isolation | • Individual and priority notification where necessary, including assistance to evacuate if required | • Large print<br>• Wheelchairs |

## THE SEAL OF ENDORSEMENTS

The State Agency for Coordinating Disability
Matters and for Systemic Inclusion

The State Agency Mandated to Manage
Disasters

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## MINISTERIAL ASSENT

The Ministers for Ministry for Interior and Ministry of Gender, Children and Social Protection jointly assent to this Guidelines for mainstreaming disability into disaster risk management.

**REPUBLIC OF GHANA**

| **Hon. Ambrose Dery** | **Hon. Lariba Zuweira Abudu** |
|---|---|
| Minister for Interior, Ghana | Minister for Gender, Children and Social Protection |

# NATIONAL COUNCIL ON PERSONS WITH DISABILITY

**The State Agency for Disability Matters and Systematic Inclusion**

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