



Technical brief:

**Key Principles and
Recommendations for
Inclusive Cash and Voucher
Assistance in Ukraine.**

**European Disability Forum /
CBM Global Disability Inclusion
May 2022**

Authors: Adva Rodogosvky and Gordon Rattray

Table of Contents

Introduction	2
Strategic Considerations	3
Programmatic Considerations.....	5
For More Information.....	11
Easy to Read	13
Document credits.....	14

Introduction

This technical brief is intended to provide general guidance for humanitarian agencies operating in Ukraine on how to implement Disability Inclusive Cash and Voucher Assistance (CVA). It aims to ensure that disability is mainstreamed within the CVA intervention and in line with the UN Convention on the Rights of Persons with Disabilities (CRPD), International Humanitarian Law and the Humanitarian Principles.

The [IASC Guidelines on Inclusion of Persons with Disabilities in Humanitarian Action](#) (2019) define four 'must do' actions that are required for persons with disabilities to be included successfully in all phases of humanitarian action. They apply to every stakeholder in every sector and all contexts:

- Promote meaningful participation
- Remove barriers
- Empower persons with disabilities
- Disaggregate data for monitoring inclusion

While always respecting these four key actions, the following eight areas of focus are proposed in order to achieve disability inclusive CVA. We offer specific recommendations for each such area.

Strategic Considerations

1. Ensure that CVA reaches all persons with disabilities, including all who were not able to evacuate
2. Link humanitarian CVA efforts to social protection schemes
3. Support persons with disabilities in institutions

Programmatic Considerations

4. Ensure identification and registration of persons with disabilities
5. Design and adapt delivery modalities to ensure persons with disabilities can access cash and markets by identifying barriers and enablers
6. Consider a realistic Minimum Expenditure Basket (MEB) for persons with disabilities and diverse transfer value
7. Monitor inclusive cash outcomes through CVA and adjust approaches as necessary
8. Engage persons with disabilities and their representatives groups throughout the CVA programme cycle

Strategic Considerations

1. Ensure that CVA reaches all persons with disabilities, including all who were not able to evacuate

According to IOM, as of 17 April 2022 over 7.7 million people were estimated to have been internally displaced in Ukraine since 24 February 2022 amongst them many of the 2.7 million persons with disabilities. Additionally, about 12 million people are also thought to be stranded or unable to leave areas affected by the fighting (BBC, 2022) many of whom are persons with disabilities have not been able to evacuate or seek refuge in shelters due to lack of accessibility communications, transport, and shelters (IDA, 2022). Persons with disabilities are more likely to remain in their home villages, towns and cities even with conflict ongoing (Mercy Corp, 2022).

Recommendations

- Ensure that the already-planned CVA strategy effectively includes persons with disabilities amongst the internally displaced population
- Prioritise a CVA strategy that will support persons with disabilities who remain stranded in the line of contact and in areas of ongoing conflict
- Ensure that the monitoring system has processes and indicators that will effectively measure disability inclusion

2. Link humanitarian CVA efforts to social protection schemes

CVA has been used for many years in Ukraine's social protection and safety net programming, and humanitarian actors can draw on this experience when they set up and scale up cash-based support in emergencies. Nevertheless, whilst humanitarian cash is primarily complementary with Ukraine's mature national protection, there is a high risk of failing to identify some persons with disabilities if identification relies on government data alone. This is primarily because the social protection system is status based rather than risk based and disability status is granted based solely on medical considerations.

Recommendations

- Systematically use [The Washington Group Short Set on Functioning \(WG-SS\)](#) in CVA household surveys to identify persons with functional limitations.
- Ensure that any links with national social protection schemes include the requirements of persons with disabilities

3. Support to persons with disabilities in institutions

Ukraine has one of the highest rates of institutionalization of persons with disabilities in the world (UNICEF, 2021). In the context of the current crisis, adults and children with disabilities who live in institutions face risks of abandonment and barriers to evacuation and likely will be unable to evacuate.

Recommendations

- Support institutions with CVA only if a robust accountability system is put in place to ensure that the cash support directly addresses residents' humanitarian needs. This is pertinent because in Ukraine the cost allocated for individuals with disabilities who are being institutionalized goes to the alternative care arrangements and not to the individuals or their families.
- Ensure that any cash transfers to institutions is a temporary measure, to avoid inadvertently causing harm through increased admissions to institutions or encouraging cash support to institutions as a general policy.

Programmatic Considerations

4. Ensure identification and registration of persons with disabilities

Persons with disabilities are more often socially excluded and isolated from the community and are therefore at higher risk of remaining invisible during identification and targeting processes. They can remain invisible because they are "hidden" by their family or not registered with the government (i.e., they have no birth certificate, have no ID, not considered a person with disabilities, etc).

Whilst the targeting strategy of the Ukraine CWG advises that persons with disabilities constitute a vulnerable group that needs to be prioritized, there is high risk of it failing to identify some persons with disabilities if identification is done unsystematically or if it relies on government data alone. In Ukraine this is pertinent as disability is status based rather than risk based. It is defined solely by medical considerations and does not consider environmental, social attitudinal and institutional and barriers. Specifically, many cash actors in Ukraine invite households (HHs) to self-register for CVA support, using mechanisms which are often unknown and inaccessible to persons with disabilities whilst neglecting to provide accessible information or support to access the self-registry.

Recommendations

- A systematic use of [The Washington Group Short Set on Functioning \(WG-SS\)](#) in household surveys can help to improve identification of persons with disabilities and data should be disaggregated by sex age and disability in line with the IASC Guidelines.
- Providing accessible information and communications on available CVA programming is critical. It is equally critical to develop and enable accessible registration formats and provide support for individuals and HHs who would need support with registration to CVA programming.
- The collaboration with organisations of persons with disabilities (OPDs) and disability-inclusive community groups, and the direct collection of household data is needed to identify 'hidden' or socially excluded people with disabilities.
- Finally, it is important to recognize that living with a disability does not automatically lead to the vulnerability of a person or a household, but it can be a factor that increases the disaster impact on a household, access to aid and overall level of need. Risk Assessments for cash assistance should integrate disability as a criterion, but

consider the household demographic composition, socio-economic characteristics, and the impact of the war holistically in order to better understand the multi-faceted barriers that persons with disabilities are facing.

5. Design and adapt delivery modalities to ensure persons with disabilities can access cash and markets

Delivery modalities may need to be adapted to ensure that persons with disabilities are aware of cash programming, can register to receive CVA and access financial service providers and markets.

As a general rule, CVA should be provided directly to adults with disabilities themselves rather than to their caregivers or legal guardians. Delivery mechanisms should therefore remove environmental, social or institutional barriers¹ that prevent this and reasonable accommodation should be considered. Reasonable accommodation is the provision of support, modifications and/or adjustments that meet the individual needs of people with disabilities to enable them to participate in CVA programming. These measures need to be identified, budgeted, and included in the project design and implementation. For more information on implementation of inclusive CVA programming see CBM Global publication [Disability Inclusive Cash Assistance : learning from practice in humanitarian response](#)

Accessible Cash feasibility – Recommendations

- Conduct a cash feasibility assessment of the appropriateness and accessibility of available delivery mechanisms from the perspective of persons with disabilities. This assessment must include references to financial and technological access and literacy; availability and cost of accessible transport; physical and sensorial access to registration systems and distribution points, and availability of accessible ATMs and banks. It is also critical to identify protection risks associated with CVA and identification of support measures needed.
- Continually assess the barriers that persons with disabilities face in accessing cash and market, and once identified take steps to engage with and consult these populations to identify the most effective ways to ensure their access to CVA.

¹ Institutional barriers can be, for example, discriminatory policies or regulations of a financial service provider.

- Provide specific support (where required) to allow people to independently access the delivery mechanism and markets to use the cash. This may include assisting with issuing identity cards, dedicated staff who can accompany and support people with disabilities, providing shuttle services to access the delivery point (distribution points, ATMs, banking outlets etc), ensuring physical accessibility of central distribution points, individual support with registration and account set-up for e-transfers or household sensitisation meetings.
- Provide information about the cash delivery in multiple accessible and understandable formats (including flyers, posters, information events, signage, radio announcements, social media, sign language).
- If CVA is delivered in person consider priority lanes for persons with disabilities and with possibility to sit, and provide personal assistance and water if needed.
- Where a caregiver receives CVA for a person with disabilities measures should be in place to ensure that cash reaches the end user and that s/he are making the choice of how to utilize the funds.

Accessible Financial Service Providers and Transfer Modalities – Recommendations

- Select Financial Service Providers (FSP) that ensure persons with disabilities will be able to safely access the service. For example, consider whether the FSP is located in physically accessible buildings or locations or whether an understandable format or assistance can be provided by the FSP at the distribution point if needed.
- Alternative CVA providers or modalities should be considered for individuals who are homebound or those who experience difficulties to access the financial service providers. For example, consider using Ukraine postal services who offer door to door service or FSPs that offer outreach banking services such as mobile bank branches.
- In cases where people with disabilities are not eligible to open a bank account themselves, a joint account with a direct relative can be established. As the account name include the person with disabilities, this allows them to access the funds. For mobile transfers, reasonable accommodation² can include purchase of mobile handsets and digital

-
- Sometimes to make sure people are included, we provide "reasonable accommodation". This refers to any necessary and appropriate modification and adjustments (that do not impose a disproportionate or undue burden) where needed in a particular case to ensure to persons with disabilities can

education on how to set-up a mobile account and transact using mobile cash.

- The need for a combination of modalities and complementary programming should be considered in the selection of modalities, in consultation with persons with disabilities to effectively meet all the needs of persons with disabilities.

Access to markets - Recommendations

- Any market assessment needs to consider specific barriers to market access for persons with disabilities including physical access to shops and markets, available accessible transportation and social stigma towards persons with disabilities that may lead to them being actively denied access by caregivers, family members or discriminatory treatment from vendors.
- Cash actors need to identify how market actors can be helped to make their markets and services more accessible to persons with disabilities (for instance by improving accessibility in terms of the environment or communications).
- Market assessments need to consider the availability and costs of specific goods and services needed by persons with disabilities (for example medication, nutritional requirements, specific hygiene items or clothes, specialized health care, assistive devices). These costs would need to be taken into considerations when defining a Minimum Expenditure Basket (MEB) value (see below)

6. Consider a realistic Minimum Expenditure Basket (MEB) for persons with disabilities and diverse transfer value

Evidence from global cash programming demonstrates that MEB calculations on which most humanitarian agencies base their cash transfer value do not systematically consider the additional costs that persons with diverse disabilities and their families have. In emergency contexts these extra costs can include, for example, expenditures for accessible transportation, assistive devices or medical supplies. Thus, the *minimum*

participate on an equal basis with others. The provision of reasonable accommodation is often required to ensure that mainstream development activities are made accessible for people with a disability.

expenditures for a person with disabilities is higher than the minimum expenditures for a person or a HH without disabilities.

Recommendations

- When the transfer value is harmonized with other cash actors, a top-up transfer for persons with disabilities to cover extra cost should be considered to achieve equality of outcome. Persons with disabilities have equal rights to access essential basic needs on an equal basis, that include having their minimum expenditures being met in situations of humanitarian emergencies (articles 5, 11 and 28 of the UN CRPD).
- If that's not possible, cash actors should facilitate referrals to protection top ups that involve one-off payments aimed at meeting the costs of interventions specific to the needs of individuals and families with a person with disabilities.

7. Monitor inclusive cash outcomes through CVA and adjust approaches as necessary

The impact of CVA on persons with disabilities should be monitored throughout the interventions, and relevant adjustments should be made in order to address risks, ensure inclusion and maximize outcomes.

Recommendations

- Post-distribution monitoring should assess if persons with disabilities were able to access CVA support. A systematic use of [The Washington Group Short Set on Functioning \(WG-SS\)](#) in PDMs can help to understand the access of persons with disabilities to CVA and data should be disaggregated by sex age and disability in line with the IASC Guidelines.
- Programme evaluation teams should include women and men with disabilities with diverse lived experience and reports should reflect the views of women, men, girls and boys with disabilities on the programme outcomes.
- Post-distribution monitoring should assess if persons with disabilities in the household have been able to cover essential specific needs they may have because of their disabilities. These needs could include medicine, sanitary items, specific dietary items or specific clothing.

- Market monitoring should continuously assess the availability of specific goods needed by persons with disabilities, and the barriers for persons with disabilities to using cash independently.
- Process and outcome monitoring for inclusive CVA should include the specific barriers and risks that persons with disabilities face when it comes to the access and use of cash. The ability to autonomously access the cash is a key indicator for equal outcomes for persons with disabilities.
- Accountability systems and feedback and complaints mechanisms needs to be accessible, safe and easy to use for all persons with disabilities.

8. Engage persons with disabilities and their representatives throughout the CVA programme cycle

Persons with disabilities must be meaningfully involved throughout the programme cycle. Their requirements, knowledge and preferences for accessing cash, markets and services must be central to any CVA programme design.

Recommendations

- Ensure that women and men representing the diversity of disability and cultural backgrounds in the target population are meaningfully engaged, fully informed and adequately resourced in order to participate.
- Take additional measures if needed to facilitate access to meetings and communication and decision-making forums including for example, provision of live captions or sign language interpreters.
- Budget for accessibility and reasonable accommodation from the beginning of any programme design. This extra budget is an investment, not a cost.
- Partner with OPDs as early as possible. and continuously foster these relationships through all stages of the project cycle, from identifying needs and barriers through planning, implementation, monitoring and evaluation of the CVA.
- At all stages, ensure that the priorities of the OPD (including their capacity building requirements) are heard and addressed.

For More Information

Adva Rodogovsky

Senior Humanitarian Programmes Officer
CBM Global Disability Inclusion

Adva.Rodogovsky@cbm-global.org
feph.org

Gordon Rattray

Programme Coordinator
European Disability Forum

gordon.rattray@edf-

The European Disability Forum

The European Disability Forum is an independent NGO that represents the interests of 100 million Europeans with disabilities. EDF is a unique platform which brings together representative organization of persons with disabilities from across Europe. EDF is run by persons with disabilities and their families. We are a strong, united voice of persons with disabilities in Europe.

CBM Global

CBM Global Disability Inclusion is a dual mandate organization that works alongside people with disabilities in the world's poorest places to fight poverty and exclusion and transform lives. Drawing on over 100 years' experience and driven by Christian values, we work with the most marginalized in society to break the cycle of poverty and disability, treat and prevent conditions that lead to disability and build inclusive communities where everyone can enjoy their human rights and fulfil their full potential. We work in over 20 countries, investing in long-term, authentic partnership with the Disability Movement and maximizing our impact through a coordinated mix of inclusive community-based programmes, local to global advocacy and delivering inclusion advice to other organizations.

References

Cash Working Group Ukraine (CWG) (2022)

<https://www.humanitarianresponse.info/en/operations/ukraine/cash-working-group>

CBM Global Disability Inclusion (2021) Disability Inclusive Cash Assistance: learning from practice in humanitarian response

Disability Inclusion Helpdesk Report No: 79 Impacts of the Ukraine invasion for persons with disabilities and priority entry points in humanitarian response 11th March 2022
<https://www.sddirect.org.uk/media/2466/disability-inclusion-helpdesk-query-79-ukraine-invasion.pdf>

Inter Agency Standing Committee (IASC) (2019) [IASC Guidelines on Inclusion of Persons with Disabilities in Humanitarian Action](#)

United Nations (UN) (2006) [Convention on the Rights of Persons with Disabilities \(CRPD\)](#)

Washington Group on Disability Statistics (2022) Washington Group short set of questions on Functioning (WG-SS) – [English](#) and [Ukrainian](#)

Easy to Read



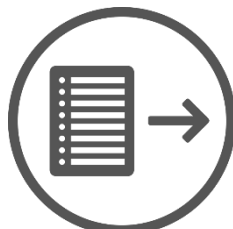
This document is about **EDF and CBM Global guidance in giving support money to people affected by the Ukraine war.**

It aims to give organizations working in Ukraine rules to follow to make sure people with disabilities receive support.

It is based on the IASC (international) guidelines. It explains in 8 points how to include people with disabilities in humanitarian crises.

Every point has clear recommendations to follow for organizations to include people with disabilities.

This document was made by EDF in collaboration with CBM.



If you want more of this document in Easy to Read,

You can phone us at
+ 32 2 282 46 00



Or email us at
info@edf-feph.org

Document credits



The European Disability Forum
Mundo Madou
Avenue des Arts 7-8
1210 Brussels, Belgium.

www.edf-feph.org



Global Disability Inclusion
Van Heuven Goedhartlaan, 13 D
1181, LE Amstelveen, Netherlands

www.cbm-global.com

This technical brief has been prepared in the framework of EDF Ukraine programme funded by CBM. For more information, consult our [webpage about the project](#).

