



**Disability inclusive health,  
safety & security management  
A vital part of Duty of Care**

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## **General Facts and Information**

**This briefing paper aims to encourage security managers and policy makers towards implementing disability inclusive safety and security protocols and standards as an integral part of Duty of Care within the humanitarian, development and private sector.**

### **Defining disability inclusive health, safety and security**

Disability inclusive health, safety and security considers potential threats to & vulnerabilities of all people, including those with different impairments and therefore people who are confronted with different types of barriers and challenges.

Ultimately, CBM aims to reach a level of Health, Safety & Security (HS&S) management, where it is not necessary anymore to mention the disability inclusiveness. Instead, CBM's objective is a holistic change of mind-set that is reflected throughout all of the components, procedures and plans of CBM's security management policy and duty of care approach.

CBM defines disability as a combination of an impairment and a barrier. An impairment on its own would not lead to disability should there be a completely inclusive and comprehensively accessible environment.

### **Key elements of disability inclusive HS&S**

#### **1. Development of SOPs, guidelines and contingency plans**

Naturally, it is impossible to cover all possible scenarios and contingencies that one might encounter. Each setting, emergency situation, type of disability and individual coping strategies will pose different challenges both for persons with disabilities as well as for those that are available or assigned to assist them. However, taking into consideration specific scenarios, triggers a dialogue and assessment to consider what situations you could encounter in the setting where you are working. Thinking of these in advance and discussing what you would do, will greatly enhance your preparedness, may avoid an incident and, where needed, will improve your response to a crisis situation.

#### **2. Trainings**

CBM provides in-house security trainings<sup>1</sup> on a regular basis for its staff in programme countries and for visitors and headquarters staff travelling to those countries. CBM draws on its staff and partners who have a disability to support the training and build disability inclusive scenarios into the training sessions and simulations. This provides practical experience and examples of the challenges that people with disabilities face in real life situations.

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<sup>1</sup> For agencies interested in implementing disability inclusive safety & security trainings, contact [hssunit@cbm.org](mailto:hssunit@cbm.org) to get in touch with an experienced trainer.

The training gives staff the opportunity to experience, learn and ask what a fellow traveller with a disability may need to stay safe in a chaotic and potentially dangerous situation such as a road block, a crime setting or a natural disaster. The main focus is on prevention of hurt and trauma but it also raises awareness on the importance of planning ahead and preparing for suitable responses to a crisis situation from a management perspective. Each session is unique and all participants learn new elements of inclusion in a setting where tested and communicated skills truly matter and, in some cases, may even be a situation of life or death.

### **Example – road mission and roadblock**

*A CBM vehicle with four persons approaches an irregular checkpoint. The young men at the checkpoint wear uniforms and carry firearms, but don't appear to be part of the government security forces.*

*The vehicle comes to a halt, and the soldiers shout aggressively to the occupants to get out of the car. It appears they are asking for money. They try to open the doors (which are locked), which makes them even more aggressive. A person with a visual disability is sitting in the car. The colleague sitting beside her in the vehicle has already explained, before approaching the checkpoint, what is going on, and continues to explain the situation to her discretely. Nonetheless, the blind colleague is rather nervous, since she cannot judge the situation and has to rely on the information shared by her colleague.*

*Meanwhile, the driver opens the window wide enough to allow for a conversation, and explains to the commander what CBM does and the purpose of the journey (visiting the near-by school for children with a disability). The driver also mentions that there is a person with a visual disability in the car, and that this person will need additional support to exit the vehicle, and whether it is really necessary to exit the vehicle.*

*On hearing this, the commander changes his attitude and posture, mentioning that his brother's daughter is going to the aforementioned school. He waves to the other soldiers to let the vehicle pass, while somewhat apologetically saying he thought the vehicle was from the oil company further down the road.*

### **3. Briefings**

During induction or pre-travel briefings, CBM's HS&S Unit includes specific briefing points for persons with disability. For example:

- Recommendation to use a "buddy system" for crisis situations
- Consider S&S training for the personal assistant (PA), if applicable
- Personal risk analysis looking at specific angles (what to do if equipment is lost/broken/stolen which is needed for communication, mobility etc.)
- Ensuring fellow-travellers are instructed what to do in critical situations (e.g. an aggressive situation at a vehicle checkpoint)
- Consider evacuation routes & protocols (is the wheelchair suitable for the terrain you might encounter?)
- Carry special supplies of batteries, tools & spare parts during travel
- Consider the level of insurance (including that for a personal assistant)

### **Example – disability inclusive travel preparations**

*Susan, a young programme officer working for the CBM office in London, is blind and has never travelled outside of Europe. In three weeks' time, she'll be traveling to Niamey, Niger, to attend a meeting with local CBM partners. During the mandatory pre-departure briefing, she is given detailed advice, and in addition, travel preparations are coordinated between Susan, the head office and the country office.*

- *Susan receives the name and contact details of the local colleague who will be waiting at the airport in Niamey to pick her up.*
- *Susan is encouraged to be very clear about what she needs, what she expects, what she can organize for herself, and what she requests others to organize for her.*
- *The head office communicates with the country office in Niamey to ensure that the person picking Susan up is briefed and has her contact details and a description.*
- *The country office arranges for the colleague to have permission to access the restricted area within the airport, in order to help Susan identify her checked-in luggage from the conveyer belt, and support her with the immigration formalities.*
- *Upon arrival at her hotel, Susan will ask for a hotel room on the second floor, and familiarise herself with her surroundings and the emergency exits.*

## **4. Feedback & incident reporting mechanisms**

It is vital to ensure that formally established incident reporting (hotline) systems are checked for usage and accessibility by staff with a disability. Rather than assuming a system is usable, it is best to ask colleagues with a variety of disabilities what possible accessibility barriers they may encounter trying to use the system.

For example: a person with a hearing impairment may be unable to use a common hotline and may require a system that is 24/7 accessible by SMS / text message.

Staff manning a hotline and a Crisis Management Team should also be trained (scenario based simulations) to support staff remotely in various challenging accessibility scenarios.

On doing pre-departure briefings we recommend to urge travellers to report back after their journey and share what went (not so) well. Based on this information future briefings and travel preparations can be shared with others.

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