

SOUTHERN AFRICA FEDERATION OF THE DISABLED

The national situation
of persons with
disabilities in disaster
risk reduction
strategies and
mechanisms

A case of Malawi,
Zambia and
Zimbabwe

REPORT

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Director General
Mussa Albert Chiwaula



"One of the key activities implemented in the project is peer exchange Visits in Malawi, Zimbabwe and Zambia. This picture shows the participants for the peer exchange visit, which was conducted in Malawi."

Executive Summary

This executive summary provides an overview of the baseline study and mapping exercise conducted to assess the national situations of persons with disabilities in Zimbabwe, Zambia, and Malawi, with a focus on Disability Inclusive Disaster Risk Reduction (DiDRR) strategies and mechanisms. The study aimed to identify the existing challenges, gaps, and best practices in promoting inclusivity and opportunities related to the inclusion of persons with disabilities in DRR efforts. The baseline study employed a comprehensive and participatory approach, involving data collection from multiple sources, including government agencies, civil society organizations, disability rights groups, Organizations of Persons with Disabilities (OPDs) and individuals with disabilities. The research methodology consisted of desk reviews and interviews, ensuring a holistic understanding of the current state of DiDRR strategies and mechanisms in the three countries. The study revealed a lack of awareness and understanding of disability-inclusive approaches to disaster risk reduction among stakeholders. Additionally, physical and communication barriers hindered the participation and access to information for persons with disabilities. Zimbabwe, Zambia, and Malawi have made progress in developing policies and legal frameworks for disability rights and disaster management, but implementation gaps were identified. There is a need to strengthen the enforcement of existing policies and ensure alignment with international standards, such as the Sendai Framework for Disaster Risk Reduction and the United Nations Convention on the Rights of Persons with Disabilities. Limited capacity and expertise among government officials, emergency responders, and DRR practitioners were observed.

Training programs focused on disability-inclusive approaches are essential to enhance the knowledge and skills necessary for effective implementation. Data on disability and disaster risk reduction are often lacking or incomplete. There is a need to establish robust mechanisms for data collection and monitoring to inform evidence-based decision-making and policy formulation. The baseline study and mapping exercise highlighted the need to prioritize disability-inclusive approaches in disaster risk reduction strategies and mechanisms in Zimbabwe, Zambia, and Malawi. By addressing the identified challenges and implementing the recommended actions, these countries can enhance the resilience and inclusion of persons with disabilities, ensuring their active participation and protection during times of disaster. The findings of this study serve as a foundation for future interventions, policy reforms, and collaborations to foster a more inclusive and resilient society for all



ACRONMYS

ADRA	Adventist Development and Relief Agency
BMZ	Federal Ministry for Economic Cooperation and Development, Germany
CARD	Churches Action in Relief and Development
CBM	Christian Blind Mission
CCA	Climate Change Adaptation
DEC	District Executive Committee
DIWA	Disabled Women in Africa
DMMU	Disaster Management and Mitigation Unit
DCP	Disaster Contingency Plan
DiDRR	Disability Inclusive Disaster Risk Reduction
FODPZ	Federation of Organisations of Disabled People in Zimbabwe
FEDOMA	Federation of Disability Organisation in Malawi
ICDS	Inter-Censual Demographic Survey
MACOHA	Malawi Council for the Handicapped
NAPA	National Adaptation Programmes of Action
NDCs	Nationally Determined Contributions
REPSSI	Regional Psychosocial Support Initiative
UNISDR	UN Office of Disaster Risk Reduction
PDMO	Provincial Disaster Management Office
PoA	Programme of Action
QUAPAZ	Quadriplegics and Paraplegics Association of Zimbabwe
SADC	Southern Africa Development Community
SAFOD	Southern Africa Federation of the Disabled
ZAFOD	Zambia Federation of the Disability Organisations
ZAVH	Zimbabwe Association of the Visually Handicapped

INTRODUCTION

This report details the findings of the baseline study and mapping exercise for national situations of persons with disabilities concerning Disability Inclusive Disaster Risk Reduction (DiDRR) strategies and mechanisms in Zambia, Zimbabwe and Malawi and at a regional level targeting the Southern Africa Development Community (SADC).



Background

Southern Africa Federation of the Disabled (SAFOD) is the regional umbrella organisation of ten national affiliate representative organisations of persons with disabilities in Southern Africa. SAFOD is implementing a project in South-East Africa (Zimbabwe, Zambia and Malawi), on Disability Inclusive Disaster Risk Reduction (DiDRR) in collaboration with Christian Blind Mission (CBM) with support from the Federal Ministry for Economic Cooperation and Development, Germany (BMZ). The project is implemented with seven local partners, Adventist Development and Relief Agency (ADRA) and Zambia Federation of the disability organisations, (ZAFOD) in Zambia, Regional Psychosocial Support Initiative (REPSSI) and Federation of Organisations of Disabled People in Zimbabwe (FODPZ) in Zimbabwe, Churches Action in Relief and Development (CARD), and Federation of Disability Organisation in Malawi (FEDOMA) and Malawi Council for the Handicapped (MACOHA) in Malawi.

Project Objective

To contribute to reducing the increased risk of persons with disabilities in climate change-related disasters by strengthening inclusive disaster risk reduction processes and climate change adaptation processes.



Objectives of the Study

The study will overall provide a comprehensive understanding of the challenges, needs, and opportunities for enhancing the inclusion of persons with disabilities in DRR efforts. Specific objectives of the study are:

- To give a more in-depth analysis of the situation of persons with disabilities in relation to disaster risk reduction.
- To provide SAFOD and country level partners with sufficient information on how responsibilities for DRR and climate change adaptation are distributed, and whether the issues have different audiences and processes.

Purpose

The purpose of this assignment is to gain a comprehensive understanding of the status quo, challenges and opportunities related to inclusion of persons with disabilities in DRR efforts. The results of the study will be discussed in three national workshops (one per country) and results to inform the implementation of the project at the policy level. The results will help to further specify the planned training measures as well as the advocacy activities and thus also to substantiate the advocacy plans of SAFOD as well as the national OPDs.

Deliverables

- An in-depth analysis of the situation of persons with disabilities which will form a framework for the activity.
- A comprehensive stakeholder mapping analyzing the relevant actors according to their relevance and previous experiences in implementing inclusive disaster risk reduction and climate change.
- A detailed national level analysis of how government responsibilities for DRR and climate change adaptation in the three target countries (Zambia, Malawi and Zimbabwe) are distributed and whether the two issues have different audiences and processes.
- A detailed analysis of the relevant policy processes at the regional level– with a special focus on SADC.
- An analysis of regional progress, gaps, and good practices identified in relation to disability-inclusive DRR policy and practice to enable evidence-based advocacy on the global level.

Scope of the evaluation

To carry out mapping of the national situation of persons with disabilities in disaster risk reduction strategies and mechanisms in Zambia, Zimbabwe and Malawi and at a regional level targeting the Southern Africa Development Community (SADC).



Methodology

Theoretical Framework

The study was influenced by the Grounded theory. Grounded theory methods emerged from the fruitful collaboration of sociologists Glaser and Strauss (1965, 1967, 1968); and Strauss and Glaser (1970). The theory had a qualitative tradition of ethnographic fieldwork and case-studies. However, by the 1960s, that tradition had eroded as sophisticated quantitative methods gained dominance and believes in scientific logic, objectivity and truth supported and legitimised, reducing qualities of human experience to quantifiable variables (Chamaz, 1996). Yet Constructivist grounded theory lies squarely in the interpretive tradition. Constructivists study how and sometimes why participants construct meanings and actions in specific situations. The theory holds that while experiences can be acquired from participants, it concedes that such experiences of participants cannot be replicated. A constructivist approach means more than looking at how individuals view their situations. It does not only theorise the interpretive work that research participants do, but also acknowledges that the resulting theory is an interpretation (Bryant, 2002; Charmaz, 2000, 2002a).

Thus, constructivists attempt to become aware of their presuppositions and to grapple with how they affect the research. They realize that grounded theorists can ironically import preconceived ideas into their work when they remain unaware of their starting assumptions. The Grounded theory also speaks to the co-construction of reality between the research participants and the researcher. Its strengths also lie in its interactive nature in data collection. Thus, as researchers, if we notice that the initially targeted participants are not exhaustive, it is flexible to allow us to go back to the field to collect data to address the missing information. Of importance is that constructivism fosters researchers' reflexivity about their own interpretations as well as those of their research participants. A constructive approach was complimented by objectivity approaches to acquire some quantitative aspects of the research.



Methods

A blended research design of qualitative, quantitative and rights based participatory approach was used to generate as much information as necessary and to triangulate the findings. The methodological package was variegated and used multiple data collection methods from the qualitative and quantitative approaches. In addition, the consulting team adopted a flexible and iterative approach to the study within the overall scope of the TORs. A blend of qualitative and quantitative methods was preferred because it allowed quantification of achievements as well as bringing qualitative nuance to the achievements thereby enabling us to answer what, how, and why questions.

Desk Review and Analysis

A review of project documents including feasibility study report, fact sheets on the most recent weather systems, proposal, progress and monitoring reports was conducted and relevant data was extracted for analysis and presentation. Existing Policy and Legislative frameworks persons with disabilities in disaster risk reduction and Climate Change Adaptation at a regional level targeting the Southern Africa Development Community (SADC) were also reviewed.

Remote In-depth Interviews

In-depth interviews were conducted with officials in strategic decision-making positions at National, Provincial, District and local/community level. The stakeholders were consulted through human rights-based, gender-sensitive and disability inclusive approach. Annex 3 shows the list of organisations that participated in the study from Malawi, Zambia and Zimbabwe.

Data Analysis

Qualitative data from key informant interviews were analysed using the thematic approach where by all responses from the various stakeholders are grouped under the themes used in the survey and then coded and analysed to give conclusions.



Findings

Situation of persons with disabilities which will form a framework for the activity

Worldwide, persons with disabilities constitute about 15% of the world's population with majority found in developing countries (80%). Official government statistics from the Africa region report the percentage of persons with disabilities to be as low as 2-5%, but in some countries it is likely closer to 20-22%, due to the prevalence of conflict, forced displacement and a lack of access to adequate medical services.

Persons with disabilities are usually the first victims of disasters. Their resilience is impacted by multiple vulnerability drivers such as poverty, inequality, fragmented livelihoods, inequitable access to education, health care and medication, lack of social protection, inadequate infrastructure and fragile housing, overpopulation, social exclusion, and discrimination. Article 11 and 32 of the UN Convention on the Rights of Persons with Disabilities requires that persons with disabilities benefit from and participate in disaster relief, emergency response and disaster risk reduction strategies. However, due to stigma and various challenges that disability presents, PWD are often overlooked throughout the disaster management cycle, are seldom considered as important actors in disaster prevention and are excluded from the DRR decision making and planning processes (Gutnik and Roth, 2017; WCRWC, 2008).

For example, a survey of persons with disabilities by the UN Office of Disaster Risk Reduction (UNISDR) in 2014 found that 85.57% of respondents from 137 countries had not participated in community disaster management and risk reduction processes in their communities. The study also revealed that less than 25% of PWD are able to evacuate immediately without difficulty in the event of a sudden disaster, have someone to help them to evacuate and are aware of their community's disaster preparedness plan while only 14% are consulted during the preparation of disaster preparedness plans. Failure to consult with persons with disabilities and their representative organizations in the development of plans to respond to emergency situations means that these obstacles will remain during emergencies. The exacerbated risks faced by persons with disabilities are widely acknowledged, but not adequately addressed. Moreover, disasters and humanitarian crises contribute to an increase of persons with impairments, a factor that needs to be considered in planning for disability-inclusive disaster responses.

The survey revealed that persons with disabilities, depending on the nature of the hazard, sometimes are not able to escape the situation and are left behind to fend for themselves.

Persons with disabilities are often invisible, especially those with sensory and intellectual disabilities and with mental health problems, with the implication that relief workers tasked with providing evacuation and relief services fail to support them because they lack knowledge and capacity as to how to address their needs. This can result in increased risk of death and injury because of mobility challenges and communication problems. Inaccessibility of transport and shelter may worsen the situation.

The needs of persons with disabilities are often overlooked in the aftermath of disasters, especially during evacuations or in the early phases of humanitarian emergencies. This is because DRR plans may not even include persons with disability; and because systems are often unprepared on the ground, lack capacity or even will and commitment to include them as legitimate participants in disaster mitigation, preparedness, response, and recovery.

As a result, they are more likely to be injured or to perish in disasters. They also struggle to reconstruct their lives, as recovery efforts too, are often unprepared or insufficiently resourced to support. They face additional barriers to accessing services and assistance, including rehabilitation and assistive products. They encounter physical barriers in accessing basic services, such as safe drinking water and sanitation, during evacuation. There is also more discrimination based on disability when basic services and resources are limited.

The needs of persons with disabilities are also excluded during longer-term recovery and reconstruction efforts. Persons with disabilities have many of the same needs as everyone else (food, shelter, WASH), but it is how they are provided that matters. Much of the environment is a no-go area for persons with disabilities. Infrastructure is not constructed for all citizens but for those without disabilities. Public places, the transport system, the road network, are not fitted with disability features including most evacuation centres and refugee camps.

A study by UNDRR (2014) supports this as it revealed that only 20.6% of believe they can evacuate immediately without difficulty in the event of a sudden disaster event. This barrier, which greatly hampers the mobility of persons with disabilities has hugely contributed to lack of effective inclusion of persons with disabilities in DRR and climate change adaptation processes.

Particularly women, children and older persons with disabilities, persons with disabilities are more vulnerable to exploitation, violence, physical, sexual, and emotional abuse especially during emergencies. Cases of rape have been reported especially in refugee camps and evacuation shelters. There are also few opportunities for formal participation of refugees with disabilities in camp management and programme planning, implementation, and management.



The disruption and destruction of services and social safety nets reduce the quality of life of persons with disabilities. They become more dependent and isolated due to loss of their assistive and mobility devices, services, and support structures in a disaster. Attitudinal, physical, and social barriers mean they are excluded from or unable to access mainstream assistance programmes.

Services provided in camps such as toilets and schools in most cases may not be built disability friendly. Although efforts are being made to make sure that persons with disabilities access these services the progress is slow in the face of climate change and increase in frequency and intensity of climate induced hazards.

Food distribution procedures are often inaccessible, especially for those with physical or visual impairments, or put persons with disabilities at risk. Some distribution points are far and difficult to navigate especially for those with physical disabilities.

However, there is limited information on disasters and persons with disabilities. Generally, this is due to lack of sex-disaggregated data more so on persons with disabilities as well as how to define people with disability. Often, data is not disaggregated and persons with disabilities are not accounted for, which marginalises them further. Rarely do reports indicate the number of persons with disabilities affected by disasters according to disability type. Humanitarian agencies refer persons with disabilities to specialist agencies, rather than making their own services accessible, which perpetuates discrimination and exclusion.

Furthermore, shocks – either environmental, like a major natural disaster, or financial, like the death of the main bread winner, illness of a family member or loss of a job – can have a considerable negative impact on households with persons with disabilities. They can lead to a decrease in income and assets as well as to a reduction in food production, food stocks or food purchases.

Persons with disabilities face unique challenges in various situations, including those related to climate change adaptation and disaster risk reduction. The study provides a framework for understanding these situations and discuss how persons with disabilities fare in the context of Zambia, Malawi, and Zimbabwe.

1. Physical Accessibility: Persons with disabilities may encounter barriers in accessing physical infrastructure, such as buildings, transportation, and public spaces. This can limit their ability to participate in climate change adaptation and disaster risk reduction activities.

2. Communication and Information: Persons with disabilities may face difficulties in accessing and understanding information due to communication barriers. Information about climate change, disaster preparedness, and response strategies must be provided in accessible formats, such as braille, sign language, or easy-to-read materials.

3. Social and Cultural Factors: Societal attitudes, stereotypes, and discrimination can lead to exclusion and marginalization of persons with disabilities. In many cases, they may be overlooked or not adequately included in decision-making processes related to climate change adaptation and disaster risk reduction.

4. Economic Challenges: Persons with disabilities often experience higher rates of unemployment and poverty, making it difficult for them to afford adaptive technologies, emergency supplies, or relocation in the face of climate-related disasters.

5. Unique Needs and Capacities: Persons with disabilities have diverse needs and capacities. Some may require specific accommodations, such as accessible shelters, evacuation plans, or assistive devices, while others may possess valuable skills and knowledge that can contribute to disaster risk reduction efforts.



Climate Change Adaptation and Disaster Risk Reduction in Zambia, Malawi, and Zimbabwe:

1. **Zambia:** The Zambian government has recognized the importance of including persons with disabilities in climate change adaptation and disaster risk reduction efforts. However, challenges persist, including limited accessibility to infrastructure, inadequate provision of assistive devices, and insufficient awareness and training on disability-inclusive approaches.
2. **Malawi:** Malawi has taken steps to mainstream disability issues into its policies and programs on climate change and disaster risk reduction. However, implementation gaps remain, especially in terms of ensuring inclusive participation, accessible information, and targeted support for persons with disabilities during emergencies.
3. **Zimbabwe:** Zimbabwe has made progress in recognizing the rights of persons with disabilities and promoting their inclusion in various sectors. However, there is still a need to strengthen disability-inclusive approaches in climate change adaptation and disaster risk reduction, including addressing physical barriers, enhancing accessibility, and providing tailored support to persons with disabilities.

In all three countries, efforts to address the challenges faced by persons with disabilities in climate change adaptation and disaster risk reduction should focus on promoting inclusive policies and frameworks, improving accessibility, enhancing awareness and training, fostering meaningful participation, and ensuring the provision of necessary support and accommodations.

Due to a lack of comparative information available, the extent of these challenges in many African countries is unclear. It is unknown how many persons with disabilities were affected for example by Cyclone Idai in 2019 in Malawi, and Zimbabwe. Many factors make it difficult to collect this data in Africa. Resources are often constrained due to competing priorities and/or capacity challenges, definitions regarding disability may vary, and in many places, disability-inclusive policy commitments have yet to be translated into targeted approaches or implementation efforts.






Malawi

The 2018 national census shows that there are 1,734,250 persons with disabilities in Malawi, representing about 11.6% of the total population aged above five. The measured prevalence of disability in Malawi has increased from 3.8% in 2008 to 10.4% in 2018. The significant increase was linked to an extension of the list of types of disability included in the 2018 Malawi Population and Housing Census (MPHC), which for instance included intellectual and self-care related functional difficulties. Persons with disabilities are defined as having difficulties or problems in one or all the following areas: seeing, hearing, walking/climbing, speaking, intellectual, self-care and other difficulties. About 10.4% of the population aged 5 years and older in Malawi had at least one type of disability, translating to a disability prevalence of 10.4%, with 55% of these being females. As shown in Table 1, the most common type of disability is visual (49%), followed by mobility (27%) and hearing (24%). Of the total population about 0.8 percent (134,636) are persons with albinism. The highest proportion of persons with disabilities is in the Northern Region (12.6%), followed by the Central (10.6%) and the Southern Region (9.4%).

Table 1: Proportion of Persons with Disabilities in Malawi

Type of disability/difficulty	Percentage
Visual	49
Hearing	24
Mobility/walking	27
Vocal/speaking difficulties	9
Difficulties in self-care	9
Learning or remembering things difficulties	16
Other difficulties	18




Despite the existence of supportive national policies and laws on disability, persons with disabilities continue to be excluded in various socioeconomic spheres in Malawi. Most persons with disabilities remain disempowered and discriminated against in terms of access to various basic services as well as meaningful involvement in development work compared to their counterparts, due to several reasons.

Because of high poverty levels and low social inclusion among persons with disabilities in Malawi, disasters disproportionately affected this vulnerable population. For example, Cyclone Freddy affected districts which hosted about 1.1 million persons with disabilities. About 10.3% of the persons with disabilities in the affected areas. The cyclone has also increased the physical limitations of persons with disabilities, through constrained access to public services, and the social limitations, through discrimination. It has also brought about secondary impairments and new barriers. For example, people with albinism who are dependent on relatives have been displaced to areas where they have no relatives. A total of 47,424 persons with disabilities (24,186 female) have been displaced. In addition, for some persons with disabilities, Tropical Cyclone Freddy has caused separation from or loss of relatives, assistive and mobility services, livelihoods, records such as personal national identification cards, and specialized health services. Furthermore, the cyclone washed away bottles of sunscreen, upon which persons with disabilities rely heavily.

Malawi has signed and ratified the Convention on the Rights of Persons with Disabilities. This guarantees the rights of all persons with disabilities including in situations of risk and humanitarian emergencies (Article 11). The provisions in the Convention should guide the development of the response plan. There is an active Federation of Disability Organisations in Malawi (FEDOMA) with 11 affiliates. These organisations are well placed to be involved in providing support to people with disability. However, both the disaster risk management and disability inclusion areas are underfunded by the state or the municipal budgets, as well as from other sources. It was revealed through the research that DIWA conducted that Persons with disabilities were not specifically targeted with response initiatives which shows that there is a gap of planning inclusive programs in different organisations and even in Donor funding.

There is also lack of access to climate and disaster risk information and communication due to lack of representation of persons with disabilities in the media. Media workers were not disability sensitive and did not know how to present content involving persons with disabilities other than through a perspective based on compassion. During different disasters in Malawi not much is released on how persons with disabilities were affected. This was also revealed through media training DIWA conducted with different media personnel on disaster reporting and documentation from different stations in Malawi. Most participants were not aware of disability instruments and commitments that Malawi has made on disability issues.




Lack of this information and exposure limited them in reporting situation of persons with disabilities. Considering the accessibility to adapted climate and disaster risk information, communication and provision of related services, there was little streamlined risk information flow reaching the communities and in a format which would be understandable for the persons with disabilities, such as sign language, Braille, simplified language, etc. The existing risk information including early warning notifications and alerts, was not provided in accessible formats and through the media and networks that would reach the persons with disabilities. Furthermore, there was absence of mediums and modalities to deliver emergency notifications and messages to persons with disabilities, e.g., TV and radio, notification through text messages on mobile phones, social media, direct contact for information, etc.

KIIs also noted that insufficient integration in the policy and regulatory framework, ineffective institutional architecture and unsatisfactory inclusion of persons with disabilities lead to disability inclusion being overlooked in the creation and prioritization of adequate climate and disaster risk reduction measures and actions. For example, the National Disaster Risk Management Policy, 2015, Government of Malawi, has no provisions for persons with and rather merely indicates that it is linked with the Elderly and Disabilities Policy.

In terms of policy coherence between disaster risk reduction and climate change adaptation, a case study conducted in Malawi by the United Nations Office for Disaster Risk (2022) also noted that DRR is not included in climate change adaptation financing. In addition, the National Disability Mainstreaming Strategy and Implementation Plan 2018-2023 was intended to strengthen the inclusion of disability across sectors however, the implementation has been a challenge, except for the education sector. DoDMA was to be the lead implementer in collaboration with other partners, including FEDOMA, MACOHA, among others, but are often not included during policy formulation but are only provided with final plans for review and comment.

Through research, the Disabled Women in Africa (DIWA) conducted, there was no inclusion and participation of persons with disabilities and their organizations in the planning stage. Listening to persons with disabilities and learning about their experiences is essential. Participation in decision-making is considered a key issue by persons with disabilities and by their organisations.



Lack of coordination or engagement between formal actors and persons with disabilities and their representative organisations is widely reported. Many stakeholders were not inclusive in their programs making a large population of persons with disabilities left behind. Moreso, tools used to collect data of the persons with disabilities are not Inclusive as they do not segregate data according to one's disability type. Much better data is needed on disability in disaster contexts, particularly on the impacts and outcomes for persons with disabilities, the nature and extent of impairments resulting from injuries sustained in disasters, and the longer-term health and other consequences of disaster injuries for functioning and wellbeing.

When examining the effects of Tropical Cyclone Freddy on persons with disabilities in Malawi, several considerations come into play. While information about this particular Tropical Cyclone, the study can provide some general insights into the potential impact on individuals with disabilities in the context of Malawi:

1. **Evacuation Challenges:** Persons with disabilities encountered difficulties during evacuations due to limited mobility, inaccessible transportation, and a lack of awareness about their specific needs. Efforts should be made to ensure inclusive evacuation plans that include accessible transportation options and consider the requirements of individuals with disabilities.
2. **Accessibility of Shelters:** Emergency shelters were not always adequately equipped to cater to the needs of persons with disabilities. Accessibility features such as ramps, widened doorways, accessible toilets, and appropriate medical facilities should be available to accommodate individuals with disabilities and ensure their safety and well-being.
3. **Disruption of Support Systems:** Tropical Cyclone disrupted vital support systems that individuals with disabilities rely on, such as personal care attendants, medical equipment, and accessible transportation services. The loss of these services had a significant impact on their ability to cope during and after the cyclone. It is crucial to have contingency plans in place to ensure the continuity of support services for individuals with disabilities.

4. **Communication Barriers:** Individuals with hearing impairments and speech disabilities faced challenges in receiving timely and accurate information about the cyclone, evacuation orders, or relief efforts. Providing accessible communication methods, such as sign language interpreters, captioning, or alternative formats, is essential to ensure that individuals with disabilities can access important information and make informed decisions.

5. **Infrastructure Damage:** Tropical Cyclone Freddy caused extensive damage to infrastructure, including roads, buildings, and public spaces. This damage created barriers for individuals with mobility impairments, making it difficult for them to access essential services, such as healthcare, rehabilitation centres, and community support networks. Rebuilding efforts should prioritize accessibility and consider the needs of individuals with disabilities.

6. **Healthcare and Rehabilitation Services:** Tropical Cyclone Freddy disrupted healthcare services, including access to medication, medical facilities, and rehabilitation services. This disruption had a significant impact on the health and well-being of individuals with disabilities in Malawi who relied on these services. Efforts should be made to restore healthcare and rehabilitation services promptly, ensuring that individuals with disabilities can access the care they require.

7. **Mental Health Impact:** The experience of enduring a cyclone and its aftermath affected the persons with disabilities in Malawi and took a toll on the mental health of individuals with disabilities. Loss of homes, displacement, and disruption of routines led to increased stress, anxiety, or depression. It is important to provide mental health support and counselling services to individuals with disabilities to address their specific needs.

In summary, the effects of Tropical Cyclone Freddy on persons with disabilities in Malawi were far-reaching. To mitigate these impacts, it is crucial to develop inclusive disaster preparedness plans, improve accessibility in emergency shelters, ensure the continuity of support services, and prioritize the specific needs of individuals with disabilities throughout all stages of disaster management.





Zambia

According to the World Health Organization estimates, about 2 million women and men in Zambia, or 15 per cent of the population, have a disability.⁴ Preliminary results from the disability survey undertaken by the Central Statistical Office in 2015 indicate a 7.2 % prevalence rate, translating into 1,080,000 persons with disabilities in Zambia.⁵ Disability was more prevalent in urban areas for both males and females, at 7.7 percent and 9.1 percent, respectively. Of the total population of persons with disabilities, the most common disability reported was physical disability with 38.8% and sight at 30.2%. In addition, most persons with disabilities live in rural areas where access to basic services is limited. Prevalence of disability by province shows that Copperbelt has the highest percentage of persons with disabilities (14.3%), followed by Luapula Province (13.7%). Eastern Province had the lowest with 8.2%.

The majority of Zambians with disabilities live in poverty and generally have disproportionately low literacy levels compared to persons without disabilities. Persons with disability often have to resort to street begging as a means of survival.

Persons with Disabilities in Zambia are faced with many challenges, the most critical one being their access to different services and the non-regulation of entities that are providing some services to them.

This is exacerbated by among other things the inadequate mainstreaming of disability in the overall legislative framework; inadequate mainstreaming in Ministerial and other stakeholders policies and operations and the lack of or in some cases insufficient awareness among the different stakeholders of disability issues and the roles they can play in supporting persons with disabilities claim their rights.

When a child is born with a disability, they are considered to be a curse of God or a product of witchcraft. Thus begins the trajectory of systemic exclusion, marginalisation, pity, stereotype behaviours, neglect, abuse and lack of support, breeding dependence, charity, pity and segregation.

Much of the information given out to the public on matters of national importance, including DRR matters, is scarcely in accessible formats, such as braille, large print, pictorial, audio, and sign language. Usually, persons with disabilities are unaware of warnings, support programs, or other vital and urgent information related to DRR. Additionally, this lack of information in accessible formats makes it very difficult for them to be effectively included in DRR and climate change adaptation processes.

Due to climate change, disasters are likely to increase in frequency and intensity, affecting just about every citizen of the world. As it is well known, it is the vulnerable populations, those that are less resilient that suffer the most when disasters strike. In Zambia, it is persons with disabilities who society has placed at the furthest end of the human development and participation spectrum that bear the brunt of the negative impact of disasters. Yet every human being is potentially a person with a disability, thus making DRR programming inclusive of persons with disabilities should logically be everyone's business and every stakeholder's concern. ZAFOD feels Zambia has the capacity, if provided with political will, to actualise inclusive DRR programming and ensure the safety, adaptation and recovery of all citizens from the effects of climate change and disasters, especially citizens with disabilities.



As already indicated, there are no strategies for implementing inclusive DRR programmes and mechanisms. First and foremost, persons with disabilities experience barriers that prevent them from meaningful participation in public life and national development. These include attitudinal, environmental, institutional, and communication barriers. Thus, persons with disabilities struggle greatly to build resilience towards disasters because most of them do not have livelihoods; they are not a priority for education, survival skills training, healthcare, employment, provision of assistive technologies, access to human development services and resources. They continue to be perceived as dependent citizens, even as a burden to the so-called able-bodied family and community members. When disaster strikes, persons with disabilities are likely to be the most affected economically, physically, mentally and otherwise. Experiences may include abuse, neglect, distress, depression, physical injury, illness, etc.



Zimbabwe

There are 2,6 million persons with disabilities (PWDs) in Zimbabwe (15% of Zimbabwe's total population), in common with PWDs worldwide, who suffer from a documented lack of access to fundamental freedoms and rights across the entire social, economic, political and cultural spectrum that other people in society

take for granted, encounter veritable hurdles at every Disaster Risk Management level. However, in the National Disability Policy (2021), the government of Zimbabwe recognise the lack of precise and reliable data on disability and the need for the country to use the WHO-World Bank (2011) disability prevalence of 15%. Thus, there are 2,250,000 persons with disabilities in Zimbabwe. Latest statistics derived from the 2017 Inter-Censual Demographic Survey (ICDS)8 indicated higher prevalence among females (10.2%) than males (8.4%). The Zimbabwe Living Conditions Survey conducted by the Ministry of Health and Child Care and UNICEF (2013) used the Washington Group tool and indicated the most prevalent disabilities in Zimbabwe as Physical (31%), Visual (26%) Multiple (13%), Hearing (12%) and intellectual (8%). The proportion of the population with some form of difficulty in performing activities in rural areas (73%) is higher than in urban areas (27%). In addition, 14,832 (0.11%), or 1 person in 900, had some difficulty in either hearing or seeing, combined with a lot of difficulty or cannot do at all in the other domain. The 14,832 was composed of;

- 7,927 who had both some difficulty hearing and a lot of difficulty seeing,
- 1,004 who had some difficulty hearing and unable to see at all,
- 5,591 who had both some difficulty seeing and a lot of difficulty hearing,
- 310 who had both some difficulty seeing and unable to hear.

Important to note is that available disability data is outdated, fragmented and inconsistent, or there is no reliable data on most at-risk groups, including persons with disabilities affected by disasters that could be used for the formulation of disaster risk management plans. Where it exists, disaggregated data is usually used to identify vulnerable groups for prioritizing humanitarian response and is less likely to be used for disaster risk reduction. Data is also often not shared among the key stakeholders, which hampers data-informed risk planning and leads to consistent gaps in inclusive programming.

In Zimbabwe, the DRR-related policy and strategic planning documents highlight the importance of providing access to information and communication, including early warning. In practice, most early warning systems established in various communities from national to local levels are not accessible to persons with disabilities, nor do they consider the full diversity of persons with disabilities and the needs of marginalized communities, who are often left behind during crises. While indigenous Early Warning Systems are also in place, such information has not been adequately shared with persons with disabilities, as they continue to be excluded due to the prevailing attitudinal barriers, especially at local level.

IEC materials are generally not accessible and are developed without consultation with persons with disabilities. CBM is advocating for disability inclusion and has supported translation of some of the IEC materials for early warning signs in accessible formats. The Department of Civil Protection allocated resources to print several Braille IEC materials through the Midlands State University, however, this was of a one-off action. Many persons with disabilities in Zimbabwe are unable to read materials produced in Braille. Reports indicate that alternative audio formats that could be played via memory cards or phones in vernacular languages would be helpful.

The National Disability Policy 2021 of Zimbabwe has a section on disability inclusion in DRR, which provides good basis for OPDs to advocate for disability inclusion in situations of risk and humanitarian crises (in line with the Article 11 of the UN Convention on the Rights of Persons with Disabilities – CRPD).

While the Department of Civil Protection is in charge of humanitarian affairs in Zimbabwe, its work is also closely linked to DRR. A number of players have been seen incorporating gender, disability, and other cross-cutting aspects in the Humanitarian Response Plan. Reports indicate that such references need to be extended to the pre-disaster stage as well, with a need to focus on disability inclusion in disaster prevention, risk reduction and preparedness.

In Zimbabwe, the study found good examples of direct representation of persons with disabilities in DRR. OPDs have been active in amplifying the voices of persons with disabilities through awareness-raising initiatives and trainings for key DRR actors and communities. I/NGOs are reportedly implementing efforts aimed towards disability mainstreaming, including convening meetings close to communities to ensure that persons with disabilities participate. CBM and implementing partners have made a deliberate effort to engage with other humanitarian actors in different forums to highlight the plight of persons with disabilities in DRR. CBM and the Centre for Humanitarian Analytics sit on the Advisory Committee of the National Disaster Management Committee and contribute to discussions of policy issues regarding the interests of persons with disabilities. However, the eventual aim should be to support OPDs themselves to contribute to these discussions as part of the Advisory Committee.

One of the main barriers preventing the effective implementation of DiDRR in Zimbabwe is limited resources. This limits the ability to develop accessible information and early warning systems, and train Disaster Management Committees from national to sub-national levels on mainstreaming disability in early warning systems and actions. Local authorities also do not consider disability inclusion in their annual budgets due to the lack of awareness and competing priorities. In Zimbabwe, despite emphasis on providing accessibility in disaster situations for persons with disabilities regulated by the national legislative framework, there is limited evidence of this in practice (e.g., there is a lack of accessibility of early warning systems and evacuation centers).

Despite an emerging role of OPDs in Zimbabwe, their participation in DRR forums continues to happen on an ad-hoc basis and is mainly driven and supported by CBM. Persons with disabilities at the community level are usually unable to participate in DRR-related meetings or contribute meaningfully to decision-making that affects their lives. This is often due to the poverty-disability cycle, as most committee membership requires a certain level of literacy. Given that most persons with disabilities have not had sufficient educational opportunities, they are generally looked down upon and do not make it into these committees.

Participants with disabilities indicated a lack of knowledge on disability issues by most staff within Civil Society Organisations. CSOs do not have a common engagement platform, which impedes service provision to persons with disabilities. Several key informants from CSOs revealed that there is a service duplication tendency in CSO programming districts. Instead of complementing each other to provide comprehensive services to persons with disabilities, CSOs are competing to provide for the same services to a finite demographic.

Persons with disabilities were not traditionally involved in DRR, especially at the decision-making level (e.g., in the committees responsible for DRR planning). Recent recurrent disasters have created opportunities for inclusion and an emerging leadership of persons with disabilities in DRR. For example, OPDs participate in the Ward Development Committees, particularly in areas affected by the recent humanitarian crises (e.g., Cyclone Idai), where they are now able to influence local-level planning and decision-making. The Zimbabwe Association of the Visually Handicapped (ZAVH) has trained the Civil Protection Unit in Mwenezi and Chivi Districts in collaboration with CBM on disability-inclusive DRR, including on accessible early warning systems. There is also an increase in national associations, i.e., consortiums of OPDs, presenting an opportunity for involvement of persons with disabilities in decision-making and influencing DRR-related policy-making and practice.

In Zimbabwe, the vibrant civil society and active I/NGO community that often work in collaborative partnerships that greatly contribute to making desired changes. This has been evident with the promotion of inclusion of “vulnerable” groups such as child-headed households and older people in humanitarian response, the development of accessible early warning systems in certain localities, etc. Drawing on the lessons from gender inclusion efforts in the country, which has been a slow process and considered a ‘women’s issue’ at the beginning, there is a need for OPDs to engage more with mainstream organizations so that disability inclusion becomes a shared agenda.




Malawi



A comprehensive stakeholder mapping analysing the relevant actors according to their relevance and previous experiences in implementing inclusive disaster risk reduction and climate change

At the national level, the Ministry of Gender, Community Development and Social Welfare is responsible for disability issues in Malawi. There is also a National Coordinating Committee of Disability (NACCOD) to oversee other Ministries on issues of disability however, this is apparently not functional. Other national disability organizations include the Malawi Council for the Handicapped (MACOHA) which was established by the Handicapped Persons Act 1971 to design, implement and monitor rehabilitation programs and services for the socioeconomic empowerment of persons with disabilities, and FEDOMA which was established in 1999 as a federation of Organization of Persons with Disabilities in Malawi with a membership of 12 OPDs.

MACOHA has an Officer at the District level that sits on the District Civil Protection Committee. FEDOMA is represented at the District level by the District Disability Forum (DDF) which is comprised of 12 members with representation from each of FEDOMA's affiliate members (1 male, 1 female from each affiliate). There are also Area Disability Forum's at the TA level and Village Disability Forums at the Group Village Headman (GVH) level. The role of the DDF is to look out for the welfare of persons with disabilities and provide a bridge between persons with disabilities and authorities and organizations that offer services. There are also District, Area and Village Parent Groups under PODCAM.



The Department of Disaster Management Affairs, under the Office of the Vice President, is responsible for DRR policies and engages with MoGCDSW during planning. The National Disaster Preparedness and Relief Technical Committee is comprised of the Directors of various Ministries.

Civil Protection Committees at the District (members from both government and non-governmental organizations), Area (at the Traditional Authority level), and Village levels (at community level with Group Village Headmen) implement disaster risk management interventions and are responsible for ensuring that issues of disabilities are considered. There is also a District Executive Committee (DEC) which is headed by the District Commissioner of Planning and Development, who oversees disasters.

Churches Action in Relief and Development (CARD) has a strong background working in DRR; experience implementing BMZ projects; have strong local networks through churches; experience implementing resiliency building initiatives; and are currently working on DRR-related projects in two TAs in Nsanje District (related to agro-ecology, climate change and environmental management, development of contingency plans and humanitarian response)

While they have limited experience implementing disability inclusive projects, they are intentional about disability mainstreaming in their activities (e.g. have a policy for 5% inclusion of persons with disabilities); have previously implemented a DfID-funded disability mainstreaming project and expressed a willingness to continue to increase their capacity related to DI. They are also willing to work with the other project partners (e.g. FEDOMA and MACOHA) who are well-positioned to contribute technical competencies related to disability inclusion.

Federation of Disability Organizations in Malawi (FEDOMA) is the disability umbrella organization. FEDOMA has structures at all levels (i.e. National, District, and subdistrict levels), and membership that cuts across disabilities to support project implementation.

FEDOMA is part of the social protection cluster under DoDMA and has experience with disability inclusion DRR. They also have established structures at the District and subdistrict levels and have strong DRR partners (e.g. Red Cross). FEDOMA is well positioned to do advocacy at the national level in collaboration with MACOHA and to conduct disability inclusive capacity building.



Malawi Council of the Handicapped (MACOHA)'s strengths are capacity building on disability inclusion. MACOHA has an Officer at the District level who is the link between the DDF and DCPC. MACOHA works "hand in hand" with FEDOMA related to advocacy. For example, during the development of the 2012 Disability Act, MACOHA worked with FEDOMA to bring the bill to parliament. MACOHA, FEDOMA, the MoH and the Ministry of Labour have also collaborated on delivering disability-inclusive training. Both MACOHA and FEDOMA have limited capacity at the National and District levels (e.g. human and financial resources). The pandemic has worsened this, with reduced funding for disability-inclusive initiatives. It is suggested that CARD, as the lead partner, also manages the financial and administrative work for activities led by MACOHA and FEDOMA.



Parents of Disabled Children Association of Malawi (PODCAM) is strong in disability inclusion and/or DRR, and strong in advocacy related to disability and the Red Cross Society has strong networks of volunteers. Both Red Cross and PODCAM have structures at subdistrict levels.

Zambia



The Ministry of Community Development, Mother and Child Health (MCDMCH) is entrusted with formulating policy for persons with disabilities. The Zambia Agency for Persons with Disabilities (ZAPD) has the responsibility to coordinate the implementation of the National Policy on Disability and acts as an advisory body to the Ministry. The Ministry Education, Science, Vocational Training and Early Education (MESVTEE) has responsibility for developing science and technology and for the provision of technical education and vocational training. The Technical Education, Vocational and Entrepreneurship Training Authority (TEVETA) has responsibility to improve technical education and vocational training, while linking them to the requirements of the employment sector. The known bilateral organisations that have been active in supporting disability organisations in Zambia include among others JICA, SIDA, NORAD, FINNIDA, DFID and some embassies and High Commissions such as those of the United States, Finnish, Swedish, Danish, Germany, Irish and the British.

The Disaster Management and Mitigation Unit (DMMU), under the Office of the Vice President, is responsible for the implementation of all disaster management programmes and activities including disaster preparedness, prevention, and mitigation. The DMMU serves as the Secretariat to the entire national disaster management structure including the Early Warning System which covers all sectors. The Provincial Disaster Management Office (PDMO) is managed by the Provincial Disaster Management Coordinator who provides technical support to the Provincial Disaster Management Committees, District Disaster Management Committee and community-level satellite committees. The Provincial and District Disaster Committees comprise members from across key government departments including Agriculture, Community Development, Education, Forestry, Policy, and Social Welfare. Where present, the Red Cross is also consulted and/or invited to participate in these committees given the organization's extensive experience in emergencies and volunteer network. These committees are headed by the Provincial Minister and the District Commissioner.



Churches Action in Relief and Development (CARD), a member of ACTAlliance has structures in Zambia with ACTAlliance having national, sub-regional and regional forums that provide opportunities to collaborate on humanitarian response, sustainable development and advocacy initiatives and programs. These forums could provide an opportunity to advocate and build capacity related to DiDRR. In addition, the Adventist Development and Relief Agency (ADRA) has a background in implementing DRR projects in Zambia. The focus of ADRA's work includes health, education, and sustainable livelihoods (including climate-smart agriculture). The organization has limited experience in disability- inclusive disaster risk reduction but is well-positioned to engage in this sector.

Given its focus on DRR, the organization has a long history of working with the Disaster Management and Mitigation Unit. Beit Cure Zambia performs over 1,600 life-changing reconstructive, orthopaedic, ENT, and audiological surgeries each year for children suffering from treatable disabilities. The organization has recently expanded its programming to include working and supporting OPDs beyond mobile clinics and surgeries. They support skills training, financial literacy, training on human rights, village savings and loans associations, and support to caregivers of children with disabilities. The organization's long history and engagement with persons with disability, however, it does not have experience in DRR.



Zimbabwe



Zimbabwe has two umbrella OPDs which are the Federation of Organizations of Disabled People in Zimbabwe (FODPZ) and the National Association of Societies for the Care of the Handicapped (NASCOH). The affiliate membership for the two organisations is 28 and 70, respectively. However, several OPDs are running without affiliation to the umbrella bodies. Historically, NASCOH established in 1967, was developed by DSOs but opened later to OPDs. Below is a list of CSOs, INGOs, and NGOs that are most active in the provision of disability services. Christian Blind Mission; JF Kapnek Trust; Leonard Cheshire Disability Zimbabwe; Jairos Jiri Association; Zimcare Trust; Development Aid from People to People (DAAP); SAVE the Children Norway; Voluntary Services Overseas; Plan International, Homefields Residential Care and Faith-Based Organisations. The country also has some residential special schools such as Emerald Hill School for the Deaf, Danhiko, St Giles, and King George VI among others.

The UNDP promotes the integration of persons with disabilities in their programmes, including the Strengthening of Climate Resilience of Agricultural Livelihoods in Agro Ecological region I and II (SCRALA) project. The project supports the GRZ to strengthen the capacity of farmers to plan for climate risks that threaten to derail development gains, promote climate-resilient agricultural production and diversification practices to improve food security and income generation, improve access to markets, and foster the commercialization of climate-resilient agricultural commodities. There are 14,000 direct and indirect beneficiaries. Apart from a success story of a person with disability whose livelihood was transformed through increased household income and food security because of the SCRALA project's intervention under the plausible goat enterprise, no further details are provided on the number of beneficiaries with disabilities who have benefited from this project in the UNDP report.



The Skills for Energy in Southern Africa Project (2021 – 2024) is an ILO-supported project which intends to train over 1,600 technicians, engineers and managers in the South-Eastern Africa region (including Zambia) to support the rapid deployment of technology in renewable and efficient energy and contribute to a more sustainable and low-carbon energy mix. Reportedly, gender and disability inclusion are mainstreamed, however, no details are provided how this is being done.

OPDs continue to face significant operational challenges due to their limited organizational, human, financial, and technical capacities. They continue to face difficulties associated with operating in Zimbabwe's economic, social, and political environment. Although the two main independent commissions (Zimbabwe Human Rights Commission and the Zimbabwe Gender Commission) have been active in monitoring and reporting on human rights issues, their knowledge and capacities on disability inclusion remain limited. The country does not have standard operating procedures in place for mainstreaming disability as a cross-cutting issue in all sectors of the economy available coordination mechanisms are inadequate. There is also lack of effective coordination between the government, donors, UN agencies, civil society, and OPDs on disability issues, leading to inefficiencies and duplications. Staff in the DDA and other Government departments are tasked with advancing disability, financial, and technical capacities.

The Federation of Organizations of Disabled People in Zimbabwe (FODPZ) is an umbrella body of organizations working with and for persons with disabilities. A key objective of FODPZ is to "take cognizance of all existing and prospective bylaws, policies and legislation, including all statutory instruments, assess and evaluate their likely impact on persons with disabilities and take a considered position and advocate on them with the aim to represent and secure their best interests."

At the District levels, the Department of Civil Protection is currently in the process of recruiting District Disability Officers who will report to Provincial Disability Officers. FODPZ member organisations have local structures within Wards and Districts. The presence of these OPDs varies by region and the specific disability focus of the OPD. The Department of Civil Protection (DCP) is the lead government agency for the humanitarian response and disaster risk reduction (DRR) in Zimbabwe. In the event of a disaster, the DCP coordinates all the activities with the help of the army, police, and civil society to conduct search and rescue and response for those who are affected by the disaster. The DCP leads the coordination through the National Civil Protection and Provincial Civil Protection Committees.

CBM Zimbabwe has been instrumental for advocacy for Disability Inclusive Disaster Risk Reduction (DiDRR) and tangible support for disability inclusion through the provision of resources and training for OPD participation at the national level. For example, the Zimbabwe Association of the Visually Handicapped (ZAVH) and the Quadriplegics and Paraplegics Association of Zimbabwe (QUAPAZ) have been capacitated in DRR through support from CBM.

The Federation of Organizations of Disabled People in Zimbabwe is the umbrella organization of OPDs in Zimbabwe. FODPZ has representative members from all disability organizations in the country. FODPZ's well-recognized policy and legislative role in addition to having strong working relationships with the government, where in some previous senior leaders of FODPZ are members of parliament, could have strong benefits for the advocacy objectives of the project. If capacitated, FODPZ's national and subnational influence could be instrumental in realizing the goals of inclusion and advocacy.

The Zimbabwe Red Cross is an established organization in the humanitarian sector and a key stakeholder for the DCP both at the national and subnational levels. Key areas of potential collaboration could include the Red Cross' community disaster response teams, its volunteer network, and its youth school safety program. This is because these programs and personnel within them have been trained in general humanitarian response and have not received specific disability-inclusive training. The Red Cross' current 5-year strategic plan (2021-2025) includes disability inclusion.

Malawi



A detailed national level analysis of how government responsibilities for DRR and climate change adaptation in the three target countries (Zambia, Malawi and Zimbabwe) are distributed and whether the two issues have different audiences and processes.

Malawi is highly vulnerable to climate change impacts and natural hazards, including floods, droughts, and cyclones. The government of Malawi recognizes the importance of addressing these challenges and has taken steps to integrate DRR and CCA into its policies and programs. Most Malawi policies on disasters has been developed through experiences and lessons learnt by the government, civil society organisations and development partners in different disasters. Even though the Government of Malawi recognized disasters as one of the key factors hindering economic growth and poverty reduction and the need to shift from 'disaster response culture' to integration of disaster risk reduction into sustainable development planning and programming.

Disaster risk reduction covers both climate and non-climate disasters such as floods, cyclones, droughts, storms etc. Climate change is one contributing factor of high disaster impact which leads to high suffering of persons with disabilities, because during disasters, persons with disabilities are at more high risk than those without disabilities. Controlling climate change will lead to a low impact of disasters, which will result in low suffering of persons with disabilities.

Malawi has a National Climate Change Management Policy (2016) that provides guidance on the implementation of climate change management programmes and adaptation to its impacts in the country. The country developed a National Adaptation Programmes of Action (NAPA) in order to respond to urgent and immediate needs for adapting to the adverse impacts of climate change among rural communities in vulnerable areas of the country. A Disaster Risk Management (DRM) Policy has been developed to address natural disasters. In addition, the Department of Disaster Management Affairs (DoDMA) has formulated and adopted a Disaster Contingency Plan (DCP) to minimise damage to property and loss of life. The MGDS II (2011-2016) also included disaster risk management under the theme of Social Support and Disaster Risk Management. All these have been enforceable through the Disaster Preparedness and Relief Act of 1991. However, very insufficient measures were undertaken both through DCP and MGDS II to focus on specific needs of persons with disabilities.¹¹

The National Resilience Strategy, as a tool developed from Sendai Framework for DRR, recognizes the inclusion of persons with disabilities in DRR initiatives. It takes persons with disabilities as important resource persons in such initiatives.

However, the most recently passed Disaster Risk Management Act has only one section that provides for disability inclusion, i.e representation of persons with disabilities in DRM structures mostly at community level. National level structures have no representation. The other relevant instruments have no serious disability inclusion provisions. Practice on the ground has shown that to a greater extent persons with disabilities are not included in DRR initiatives more especially response programs.

In pursuance of this disaster risk reduction strategy, the Department of Disaster Management Affairs in Malawi has in the past decade not only advocated a paradigm shift from a reactive to a more proactive approach, but it has also put in place institutional mechanisms and developed policies and strategies for mainstreaming disaster risk reduction at all levels in the country.

But all these strategies and mechanisms were not specifically addressing persons with disabilities. It is now through Protection cluster group development they are drafting Standard Operation procedures for specifically supporting persons with disabilities. This SOPs will also address how different sectors are supposed to take care or include persons with disabilities in their programs and interventions.

At first the strategies were not specifically addressing specific needs and vulnerabilities as most interventions or relief services were not user friendly to persons with disabilities e.g., evacuation centres were not accessible, SRH services were not considering women with disabilities, data was not segregated and there were no special services offered to persons with disabilities during disaster risk reduction. Through development of SOPs different sectors will be able to follow strategies and mechanisms for supporting persons with disabilities.

Government Responsibilities for Disaster Risk Reduction(DRR)

a.Department of Disaster Management Affairs (DoDMA),

The Ministry of Homeland Security is responsible for coordinating and overseeing disaster management efforts in Malawi. It focuses on disaster preparedness, response, and recovery, including early warning systems, contingency planning, and emergency relief operations.

b.National Disaster Risk Management Policy

The government has formulated a National Disaster Risk Management Policy to guide DRR actions across various sectors. This policy aims to enhance resilience, promote risk reduction, and strengthen disaster response and recovery capabilities.

c.District and Local Authorities

DRR efforts are implemented at the district and local levels, where District Disaster Risk Management Committees (DDRMCs) and Local Government Authorities (LGAs) play crucial roles. These entities work on risk assessment, contingency planning, community engagement, and capacity building to enhance DRR at the grassroots level.

Malawi

1. The Ministry of Natural Resources, Energy, and Mining is responsible for coordinating climate change-related activities in Malawi. It focuses on developing policies, strategies, and plans to promote climate resilience and sustainable resource management.
2. Malawi has developed a National Adaptation Program of Action (NAPA) to identify priority areas for adaptation interventions. It outlines specific adaptation projects and activities to address climate change impacts, such as water resource management, agriculture, and infrastructure development.
3. Department of Climate Change and Meteorological Services, under the Ministry of Natural Resources, Energy, and Mining, is responsible for monitoring and assessing climate change impacts in Malawi. It provides climate information, weather forecasting, and early warning systems to support adaptation planning and decision-making.

While DRR and CCA are separate issues, there is a growing recognition of their interlinkages. Climate change exacerbates the frequency and intensity of natural disasters, making it important to integrate DRR and CCA efforts. The government of Malawi acknowledges this and seeks to mainstream climate change considerations into disaster management and vice versa. The audiences for DRR and CCA are often overlap but differ in some aspects.

DRR efforts primarily target disaster-prone communities, vulnerable populations, and local authorities involved in disaster management. On the other hand, CCA initiatives encompass a broader range of stakeholders, including government agencies, development partners, civil society organizations, research institutions, and communities. The audience for CCA is more diverse due to the cross-cutting nature of climate change impacts and adaptation responses.

- **Policy Development:** The government formulates policies and strategies specific to DRR and CCA, which provide the framework for implementation.
- **Planning and Implementation:** District and local authorities, in collaboration with relevant stakeholders, develop DRR and CCA plans and implement projects at the grassroots level. These plans integrate risk assessments, vulnerability mapping, early warning systems, and adaptation measures.
- **Capacity Building and Awareness:** Efforts are made to enhance the capacity of government officials, communities, and other stakeholders in DRR and CCA. Awareness campaigns and training programs are conducted to promote knowledge and understanding of risks, climate change impacts, and adaptation practices.
- **Monitoring and Evaluation:** Monitoring and evaluation mechanisms are established to assess the effectiveness and impact of DRR and CCA interventions. This helps in identifying gaps, improving strategies, and ensuring accountability.

It is important to note that the specific processes and institutional arrangements may have evolved in recent years, and it is advisable to consult the latest government documents, reports, and policies for the most up-to-date information on DRR and CCA in Malawi.

Zambia



In Zambia, the responsibilities for Disaster Risk Reduction (DRR) and Climate Change Adaptation (CCA) are primarily divided among multiple government agencies and departments at the national level. The Ministry of Lands and Natural Resources, the Ministry of Water Development, Sanitation, and Environmental Protection, and the Department of Disaster Management and Mitigation in the Office of the Vice President are some of the key entities involved in addressing these issues. Most stakeholders and the general public in Zambia consider persons with disabilities as incapable of leadership. Despite the readiness and availability of persons with disabilities to take up leadership positions, negative attitudes have hampered meaningful inclusion of these equal citizens in DRR programming. Currently, all DRR decision-making structures do not have persons with disabilities sitting

There is 0% self-representation for these citizens, mainly due to the attitudinal barrier. In most cases, a person who is resilient or adaptive to the effects of climate change is also likely to recover better from a disaster, resume their livelihood. This is not the case for most citizens with disabilities in Zambia. They are unable to adapt to the effects of climate change because their human capacity development, 'through education and life-skills training' has been neglected. They are neither adaptive to climate change nor the negative impact of disasters. In both instances, their survival and recovery are at the mercy of their caregivers, rather than from within their human capabilities.

Currently, there are no officially developed or documented DRR strategies and mechanism that are deliberately or specifically designed for persons with disabilities in Zambia. ZAFOD is in the process of facilitating a training with the national Disaster Management and Mitigation Unit (DMMU) to enhance meaningful disability inclusion in DRR programming.

DRR in Zambia is primarily managed by the Department of Disaster Management and Mitigation (DMMU). The DMMU is responsible for coordinating disaster management activities, including risk assessment, early warning systems, emergency response, and post-disaster recovery and rehabilitation efforts. The DMMU collaborates with various stakeholders, including other government ministries, local authorities, non-governmental organizations (NGOs), and international partners to implement DRR initiatives.

The Ministry of Lands and Natural Resources and the Ministry of Water Development, Sanitation, and Environmental Protection have key roles in addressing climate change adaptation in Zambia. These ministries are responsible for developing and implementing policies, strategies, and programs to enhance climate resilience and promote sustainable development.

They work on initiatives such as climate change vulnerability assessments, ecosystem management, sustainable land use practices, water resource management, and promoting renewable energy sources. While there is an overlap between DRR and CCA, they have different audiences and processes in Zambia. DRR primarily focuses on reducing the risks and impacts of natural hazards on communities and infrastructure.

Its audience includes government agencies, local authorities, emergency response organizations, and communities at risk of disasters. CCA, on the other hand, targets a broader audience and aims to address the long-term impacts of climate change on various sectors, including agriculture, water resources, health, and infrastructure. Its audience includes government ministries, development partners, civil society organizations, researchers, communities, and individuals affected by climate change.

The processes for DRR and CCA in Zambia involve coordination, policy development, planning, and implementation at different levels. DRR processes include risk assessments, early warning systems, emergency preparedness and response planning, capacity building, and post-disaster recovery and reconstruction efforts. These processes often involve collaboration between relevant government agencies, local authorities, NGOs, and communities.

CCA processes involve assessing climate change vulnerabilities, developing adaptation strategies and action plans, integrating climate considerations into sectoral policies, and promoting sustainable practices. These processes require coordination between relevant ministries, research institutions, NGOs, international partners, and communities.

Zimbabwe

In Zimbabwe, the government is responsible for managing both disaster risk reduction and climate change adaptation efforts. Qualitative findings indicate that there are mixed views on how responsibilities for DRR and climate change adaptation intersect in relation to persons with disabilities. National level key informants were of the view that there is a growing recognition of the links between climate change adaptation (CCA), disaster risk reduction (DRR), and disability. The United Nations Development Programme (UNDP) has developed a Risk-Informed Development Strategy Tool that integrates disaster risk reduction and climate change adaptation into development planning. This tool aims to ensure that development programs are inclusive of Persons With Disabilities and other vulnerable groups.

DRR and climate change adaptation intersect in relation to persons with disabilities through inclusive development planning, policies, and programs that take into account the specific needs and vulnerabilities of persons with disabilities with disabilities. The vulnerabilities impact persons with disabilities differently as there are variables like the type of disabilities, severity, geographical location, gender and economic status. It would mean that DRR and climate change adaptations has to take into consideration the dynamics in the disability field and provide for reasonable accommodations. However, there are still gaps and challenges in implementing these strategies, including systemic discrimination, poverty, and lack of accessibility.

Contract to views of national level KI, local level KI were of the view that there is a thin intersection between responsibilities for DRR and climate change adaptation and Persons With Disabilities. They indicated that Civil Protection Committees and Environmental Management Committees were not properly representing Persons with disabilities. These responsibilities are typically distributed among various ministries, agencies, and departments. An exploration of each issue is presented here:

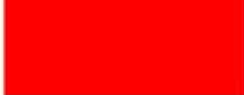


Disaster risk reduction in Zimbabwe is primarily overseen by the Department of Civil Protection (DCP), which operates under the Ministry of Local Government and Public Works. The DCP is responsible for coordinating and implementing disaster risk reduction activities at the national level. It collaborates with other government ministries, local authorities, non-governmental organizations (NGOs), and international partners to enhance preparedness, response, and recovery capacities in the face of disasters. The DCP's work involves activities such as early warning systems, emergency response planning, risk assessments, and community education and awareness. However, Zimbabwe does not have exclusive legal and policy requirements in place to ensure persons with disabilities' participation in preparedness activities, humanitarian needs assessments, related monitoring processes, and programs and projects related to situations of risk and humanitarian emergencies, climate-related hazards, and DRR. There is a lack of OPD representation in the following DRR-related committees:

- National Civil Protection Committee;
- Department of Civil Protection;
- Food and Nutrition Council;
- Zimbabwe Vulnerability Committee;
- Provincial Civil Protection Committee;
- District Civil Protection Committee,
- Emergency Services Subcommittee;
- National Food and Water Subcommittee;
- National Epidemics and Zoonotic Crisis Subcommittee,
- National Resource Mobilization Subcommittee.

The DRM Bill has been revised on three occasions, but is still not endorsed, and there is also little coverage of inclusive disability disaster risk management in the bill. The whole bill mentions persons with disabilities on two occasions, sections 61 (i) and 70 (i) & (2). The Civil Protection Act (Chapter 10:06) which is the legislative instrument regulating disaster risk management and humanitarian action in Zimbabwe, does not provide a comprehensive cover on disability inclusion. Section 26 of the Act [Titled Disability Benefits] does not articulate how persons with disabilities are afforded inclusive humanitarian aid in crisis, emergency, and disaster situations.

Climate change adaptation in Zimbabwe involves addressing the impacts of climate change and building resilience in various sectors. Several government ministries and agencies are involved in climate change adaptation efforts. The Ministry of Lands, Agriculture, Fisheries, Water, and Rural Resettlement is responsible for coordinating climate change adaptation in the agricultural sector, focusing on sustainable agriculture practices, water management, and crop diversification. The Ministry of Environment and Climate, is responsible for overall climate change policy and coordination, including adaptation measures in sectors such as tourism and conservation.



Other relevant ministries, such as the Ministry of Energy and Power Development and the Ministry of Local Government and Public Works, also play a role in climate change adaptation within their respective areas of responsibility. Regarding the audiences and processes, while there may be some overlap between the audiences and processes of DRR and CCA, they are distinct issues with their own specificities. The audience for disaster risk reduction includes various stakeholders such as government agencies, local authorities, communities, NGOs, and international organizations. The primary focus is on preparedness, response, and recovery from disasters, with an emphasis on ensuring the safety and well-being of affected populations. The audience for climate change adaptation includes a broader range of stakeholders, including government ministries, sectors (such as agriculture, water, energy, and tourism), local communities, NGOs, researchers, and international organizations. The focus is on addressing the long-term impacts of climate change and building resilience in sectors vulnerable to climate-related risks.

The processes for disaster risk reduction involve activities such as risk assessments, early warning systems, emergency response planning, capacity building, and community engagement. These processes are often coordinated through the Department of Civil Protection, in collaboration with other relevant stakeholders. Climate change adaptation processes involve developing and implementing policies, strategies, and plans to address the impacts of climate change. These processes typically include vulnerability assessments, adaptation planning, mainstreaming climate change considerations into sectoral policies, promoting sustainable practices, and enhancing institutional capacities. It's important to note that the government's approach to disaster risk reduction and climate change adaptation may evolve over time, influenced by changing priorities, international agreements, and emerging challenges. Therefore, it is advisable to continuously monitor the distribution of responsibilities and processes related to DRR and CCA in Zimbabwe.

In conclusion, this report has provided a detailed national-level analysis of the distribution of government responsibilities for Disaster Risk Reduction (DRR) and Climate Change Adaptation (CCA) in the three targeted countries: Zambia, Malawi, and Zimbabwe. The findings reveal varying patterns of responsibility allocation among these nations. While there are similarities in the institutional frameworks and policies addressing DRR and CCA, there are also notable differences in terms of audience and processes. The report underscores the importance of recognizing these distinctions in order to effectively address the challenges posed by both disasters and climate change. By understanding the unique circumstances and priorities of each country, policymakers and stakeholders can develop tailored strategies and approaches that engage relevant audiences and promote coordinated efforts towards DRR and CCA. It is imperative for governments, international organizations, and local communities to collaborate and strengthen the linkages between disaster risk reduction and climate change adaptation to build resilient societies and safeguard the well-being of vulnerable populations in the face of future challenges.


Relevant policy processes at the SADC level

Hardly persons with disabilities are reflected in any policies or any documents, strategies, or national action plans on climate change. The three countries are party to the Sendai Framework for DRR, Sustainable Development Goals and Paris Agreement on Climate Change, which make significant references to persons with disabilities. The 2030 Agenda for Sustainable Development includes 17 Sustainable Development Goals (SDGs), 231 indicators and 169 targets. The 17 goals are universal and seek to realize human rights for all persons, gender equality and the empowerment of all women and girls. Unlike the MDGs, the SDGs, make specific reference to disability, target all persons, and are inclusive. Further, disability is specifically reflected in indicators and targets for Goal 4 (Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all), 8 (Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all), 10 (Reduce inequality within and among countries), 11 (Make cities and human settlements inclusive, safe, resilient and sustainable) and 17 (Strengthen the means of implementation and revitalize the Global Partnership for Sustainable Development).



Under international human rights law, governments have clear obligations to respect, protect, and fulfil the rights of persons with disabilities in the context of their efforts to respond to climate change. The preamble to the Paris Agreement affirms that “Parties should, when taking action to address climate change, respect, promote and consider their respective obligations on human rights,” including the rights of persons with disabilities.

Under the 2015 Paris Agreement, countries were called to outline the post-2020 climate actions they intended to take in the form of Intended Nationally Determined Contributions (INDCs). As countries formally join the Paris Agreement, these commitments are converted to Nationally Determined Contributions (NDCs) – efforts that each country will take to reduce emissions and adapt to the impacts of climate change.



NDCs are to be submitted by State Parties every five years, with each successive NDC representing a progression in ambition compared to the previous NDC. However, only Zimbabwe refers to Persons with Disabilities in the NDC. This means Malawi and Zambia are neglecting their obligations to respect, protect, and fulfil the rights of persons with disabilities in their responses to the climate crisis.

In Zambia and Malawi's climate policies, persons with disabilities are listed amongst other groups especially vulnerable to climate change impacts, but without further detail as to the measures that should be taken to ensure the inclusivity of adaptation measures. In Zimbabwe, the National Climate Policy identifies specific ways in which persons with disabilities and those with chronic illnesses have been excluded from development initiatives and decision-making.

It also identifies the need to build adaptive capacity in vulnerable groups; to mainstream these groups in all climate change responses; and to ensure equitable access to and ownership of resources for climate change adaptation by vulnerable groups. In addition, Zimbabwe's National Adaptation Plan also includes specific obligations with respect to persons with disabilities and other vulnerable groups, such as the promotion of user-friendly, climate-smart technologies, and support for the development and dissemination of simplified meteorological and agrometeorological information.

The greater vulnerability of persons with disabilities to the impacts of climate change is due in large part to disabling environments, policies, and cultures, including the added vulnerabilities that accompany poverty, the inaccessibility of information about risk and hazard, and discriminatory attitudes towards persons with disability. The challenges faced by persons with disabilities are further exacerbated when they also belong to another vulnerable group. As a result of these factors, persons with disabilities are neglected in the development of policies and programs for climate adaptation and face barriers in receiving services and information in a timely manner and accessible format.

In cases where disability has been included, it is largely to indicate the vulnerability of persons with disabilities to climate change impacts or to signal the need for their inclusion, without providing concrete measures to enhance their resilience and adaptive capacity. Moreover, there are no references to disability in any State Party's climate mitigation policy.

The exclusion of persons with disabilities from most domestic climate policies is especially troubling given the evidence that they are disproportionately affected by climate impacts and are often adversely affected by measures adopted to reduce carbon emissions. The ongoing failure of most States to take affirmative measures to prevent the harms caused by climate change and to effectively consider their rights and perspectives in the design of climate policies constitutes clear breaches of their obligations under the UNCRPD and international human rights law. The Sendai Framework for Disaster Risk Reduction 2015-2030, adopted at the Third UN World Conference in March 2015, emphasized the importance of disability-inclusive disaster risk, calling for the inclusion of persons with disabilities in design and implementation of policies, plans and standards on disaster risk reduction, and for promoting the contribution of persons with disabilities in the process.

The United Nations Human Rights Council, the Committee on the Rights of Persons with Disabilities, and the Office of the United Nations High Commissioner for Human Rights have each specifically recognized the disproportionate impacts of climate change for persons with disabilities and called on States to adopt disability-inclusive human rights-based approaches to combating climate change.

The UN Convention on the Rights of Persons with Disabilities (CRPD) was adopted in 2006. The Convention shifts the narrative and view about persons with disabilities from "objects" of charity and medical treatment towards viewing persons with disabilities as "subjects" with rights, who are capable of claiming those rights and making decisions for their lives based on their free and informed consent as well as being active members of society.

Moreover, it reaffirms that "all persons with all types of disabilities must enjoy all human rights and fundamental freedoms".





Article 11 of the CRPD specifically requires States Parties, in accordance with their obligations under international law, to take all necessary measures to ensure the protection and safety of persons with disabilities in situations of risk, including armed conflicts, humanitarian emergencies and natural hazards.

In Article 4.1, it also calls on States to 'undertake to ensure and promote the full realization of all human rights and fundamental freedoms for all persons with disabilities without discrimination of any kind on the basis of disability'. In particular, State parties to the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) are obliged to:

(1) assess and take into account the differential impacts of climate change on the rights of persons with disabilities through an intersectional approach;

(2) develop and implement evidence-based climate mitigation and adaptation policies to prevent and minimize the adverse impacts of climate change on persons with disabilities;

(3) provide accessible information on climate change to persons with disabilities, strengthen their capacity to participate in climate decision-making that concerns them, and ensure that they have access to judicial or administrative proceedings and effective remedies when they suffer harm from climate action and inaction; and

(4) support international efforts to combat climate change and enhance the climate resilience of persons with disabilities in developing countries.

The African Disability Protocol adopted in 2018 requires States Parties to ensure that persons with disabilities are not discriminated against and enjoy equality. It also recognises the particular vulnerabilities and rights of women, children, youth, and older persons with disabilities.

Additionally, the Africa Disability Protocol extends rights to family and caregivers of persons with disabilities who might otherwise be subject to discrimination as a result of their association. It also further recognises the specific protection needs of persons with disabilities in periods of armed conflict or other humanitarian situations.

The Southern Africa Development Community (SADC) whose objectives are to achieve development, peace, and security, and economic growth, alleviate poverty, enhance the standard and quality of life of the peoples of Southern Africa, and support socially disadvantaged groups through regional integration, based on a foundation of democratic principles and equitable and sustainable development.

SADC recognizes the multidisciplinary nature of disaster risk management and as such relies on several protocols including the Protocol on Politics, Defence and Security Cooperation; Protocol on Health (1999); and the Regional Water Policy (1995) to address disasters. However, there is no specific protocol on DiDRR.

DiDRR is a relatively new concept in the region with governments, countries, Organizations of Persons with Disabilities (OPDs) and other non-state actors beginning to learn and invest in DiDRR. Indeed, with the exception of Zimbabwe, none of the lead Disaster Risk Reduction (DRR) agencies had experience in DiDRR. Of note, none of the national disability or DRR policies in the three-country had a focus on DiDRR.

SAFOD is engaged in the coordination of activities of OPDs and advocates for the rights of persons with disabilities as well as nurturing and strengthening its affiliates and other stakeholders in Southern Africa to ensure the promotion of inclusive development and human rights for persons with disabilities.

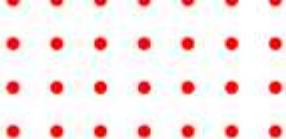
SAFOD has a strong regional disability advocacy component and remains an important mechanism to connect national federations, including those from each of the proposed project countries: the Federation of Disability Organizations (Malawi), Zambia Federation of Disabled (Zambia) and Federation of Organizations of Disabled People in Zimbabwe (Zimbabwe).

It is worth noting that specific to DiDRR, the African Union's (AU) Africa Regional Platform on Disaster Risk Reduction (AfRP) in Ethiopia and the United Nations Office for Disaster Risk Reduction Regional Office for Africa (UNDRR-Africa) in Kenya are important continent-wide organizations.



Zimbabwe, Zambia and Malawi signed up and also party to the following:

- SADC Regional Disaster Preparedness and Response Strategy (2016) – With regard to this, Zimbabwe has started working on preparing a National Emergency Preparedness and Response Plan (EP&RP). The DCP is planning on developing this with input from development partners (NGOs, UN agencies, relevant GoZ ministries, the private sector and universities and research institutions).
- SADC and Africa Risk Capacity MOU on Disaster Risk Management and Financing (2019-2021) – there is on-going exchange of data and information on climate early warning is being done, largely through the Southern Africa Regional Climate Outlook Forum (SARCOF). At the national level, SARCOF has been established and scaled down as NACOF (National Climate Outlook Forum). Zimbabwe has also kick-started drought and flood risk modelling to strengthen preparedness and EWS. This information will be made available to NGOs and communities.



Other Regional and International Agreements Related to DRM and Climate Change

- The Convention on International Trade in Endangered Species of Wild Fauna and Flora (CITES, 1973);
- The Vienna Convention on the Depletion of the Ozone Layer (1992);
- The Montreal Protocol on Substances that Deplete the Ozone Layer (1987);
- The Basel Convention on the Control of Transboundary Movements of Hazardous Wastes and their Disposal;
- The Bamako Convention on the Ban of the Importation into Africa of Hazardous Waste (1991);
- The United Nations Framework Convention on Climate Change (UNFCCC, 1992); and
- The Convention on Biological Diversity (CBD, 1992).
- UN Convention to Combat Desertification
- The Universal Declaration of Human Rights
- The Geneva Conventions that spell out the role of National Red Cross Societies
- The Convention on the Elimination of All Forms of Discrimination against Women of 1979
- The Convention on the Rights of the Child of 1989.
- Kyoto Protocol on Climate Change
- The Cartagena Protocol on Biosafety
- The African Charter on Human and Peoples' Rights of 1981
- Agenda 21 (United Nations Conference on Environment and Development (1992)

Regional progress, gaps and good practices

Progress has been made in adopting the Guiding Principles of the Sendai Framework for Disaster Risk Reduction 2015-2030 within the Africa regional policy documents. Three key documents refer to disability and inclusion; however, classify persons with disabilities as belonging to “vulnerable” groups entitled to protection and participation in decision-making related to disaster preparedness and response.

The importance of improving data disaggregation by gender, age, and disability has been recognised, as data is considered as the basis for risk-informed planning and decision-making. This was highlighted in the Programme of Action (PoA) for the implementation of the Sendai Framework in Africa, which was adopted in 2017 as one of the essential elements for policymaking and practice. The document emphasizes gender and leadership of young people, however, persons with disabilities are only prioritised in terms of evacuation.

During the 8th Africa Regional Platform for Disaster Risk Reduction, progress on disability inclusion was also made through the adoption of the Nairobi Declaration and Programme of Action (Phase II: 2021- 2025). The Nairobi Declaration further reiterates the importance of disability informed risk assessments and encourages the states to apply “a whole-of-society” approach. A positive outlook is also observed in Phase II of the PoA, which underlines the importance of inclusion and active involvement of persons with disabilities in the design of disaster risk reduction policies, accessible communication, and awareness raising. Inclusive risk assessment and more specifically, disability disaggregated data are seen as a priority in the region for 2021-2025.

The need to develop capacities, train, and directly involve persons with disabilities in DRR remains insufficiently considered at the regional level. For example, while the PoA Phase I planned on capacity building of persons with disabilities in DRR, this approach was not expanded further in Phase II. While issues of gender inequality and exclusion from DRR initiatives have been addressed by developing Gender Strategies and Action Plans on the regional level, disability inclusion often remains overlooked. Several reports indicate the slow progress made in Africa in terms of implementation of disability-inclusive DRR. Notably, participation of persons with disabilities and their leadership remains limited. The Africa Report on Disaster Risk Reduction 2015-2018, previews the implementation of “Building Back Better” principles, however, it does not address disability inclusion as part of this approach.

Gaps or challenges in implementing DRR strategies and mechanisms for Persons with Disabilities

The biggest gap is the lack of implementation of the provisions contained in these global and local instruments. Lack of implementation stems from non-allocation of resources in the national budget, consequently non-inclusion of citizens with disabilities in public life, DRR programming and national development in general. Additionally, apart from disability-based legal frameworks, the rest of the national policies are not inclusive of persons with disabilities, largely due to lack of consultation with relevant stakeholders. Thus, disability becomes an after-thought in national development, including DRR programming.

Qualitative findings pointed to the fact that there are several challenges in implementing DRR strategies and mechanisms for persons with disabilities. Persons with disabilities are often left behind in relief and response efforts due to inaccessible disaster preparedness plans, systemic discrimination, and widespread poverty. These issues pose significant challenges in implementing DRR strategies and mechanisms for persons with disabilities. There is need for more inclusive disaster risk reduction and management activities that take into account the specific needs and vulnerabilities of persons with disabilities.

Another challenge is the lack of a systematic way of assessing disabilities and referring persons with disabilities to comprehensive government services and programs, such as social protection. This can make it difficult for persons with disabilities to access the support they need during and after disasters. Specific challenges that were highlighted by KI include:

- 1.Lack of resources to come up with adequate assistive devices for people with disability;
- 2.Lack of personnel qualified enough to capacitate persons with disabilities on sign language for those in need with service;
- 3.Design challenges for public buildings as we find still grapple with buildings that are not friendly to people with disability;
- 4.Lack of separate emergency response modalities due to lack of skills and resources;
- 5.Lack of policy guidance, and where available, there is lack of consistence and lack of enforcement and compliance to streamline DRR in disability policy and to start implementing same from early education.



Barriers to effective inclusion of persons with disabilities in DRR and climate change adaptation processes

Barriers to effective inclusion of persons with disabilities in DRR and CCA processes include:

- Inaccessible physical environments and transportation;
- The unavailability of assistive devices and technologies as they are expensive to procure;
- Non-adapted means of communication, gaps in service delivery,
- Discriminatory prejudice and stigma in society.
- Lack of policy implementation is also one key factor that prevents persons with disabilities from participating in DRR and CCA processes.
- Lack of resources and where available are not fully and deliberately invested accordingly and this is partly due to poor planning due to lack of skill and other reasons.
- The perception on both sides of the isle, people without disability have low perception on people with disability hence planning for them in most cases instead of planning with them whilst people with disability also suspect they are not fully being understood and taken seriously.
- Policy gaps and inconsistency when it comes to implementation.



A comprehensive understanding of the challenges, needs, and opportunities for enhancing the inclusion of persons with disabilities in DRR efforts in Zimbabwe, Zambia, and Malawi:

Table 1: Malawi

Challenges	Needs	Opportunities
<ul style="list-style-type: none"> • Limited accessibility: Persons with disabilities face challenges in accessing DRR information, warning systems, evacuation routes, and emergency shelters due to physical and communication barriers. • Inadequate infrastructure: Lack of accessible infrastructure hampers the inclusion of persons with disabilities in DRR efforts. • Limited awareness and understanding: Limited awareness among disaster management agencies, first responders, and the general public about the specific needs and capacities of persons with disabilities. • Communication barriers, particularly for individuals with hearing or speech disabilities. • Social stigma and discrimination exacerbating exclusion and marginalization. • Limited data and research on the experiences of persons with disabilities in disasters. 	<ul style="list-style-type: none"> • Accessibility: Ensuring that physical infrastructure, information, communication, and transportation systems are accessible and inclusive for persons with disabilities. • Inclusive planning and policy: Inclusive policies and legislation that prioritize the rights and inclusion of persons with disabilities in DRR and CCA efforts. • Capacity development: Providing training and awareness programs to enhance the capacity of persons with disabilities, their families, and relevant stakeholders in DRR. • Accessible communication channels and information dissemination during emergencies. • Enhanced accessibility of evacuation routes, shelters, and early warning systems. • Capacity building and training for stakeholders on disability-inclusive approaches. • Comprehensive data collection and research on the experiences and needs of persons with disabilities. 	<ul style="list-style-type: none"> • Collaborative partnerships: Establishing collaborations between disability organizations, government agencies, civil society, and other stakeholders to promote inclusive DRR approaches. • Technological advancements: Utilization of technology and innovation for accessible and effective DRR and CCA measures. • Advocacy and awareness: Engaging in advocacy campaigns and awareness-raising initiatives to promote the rights, needs, and contributions of persons with disabilities in DRR. • By addressing these challenges and meeting the identified needs, Zimbabwe, Zambia, and Malawi can enhance the inclusion of persons with disabilities in DRR and CCA efforts, making their communities more resilient and better prepared for disasters. • Alignment with international commitments like the Sendai Framework and the UN Convention on the Rights of Persons with Disabilities. • Collaboration and partnerships among government agencies, disability organizations, and other stakeholders. • Community engagement to ensure the participation and inclusion of persons with disabilities. • Promotion of inclusive education and training programs for meaningful participation.

Table 2: Zambia

Challenges	Needs	Opportunities
<ul style="list-style-type: none"> • Limited accessibility: Persons with disabilities face challenges in accessing DRR information, warning systems, evacuation routes, and emergency shelters due to physical and communication barriers. • Limited awareness and understanding: Lack of awareness among disaster management agencies and the general public about the specific needs and capacities of persons with disabilities hinders their inclusion in DRR efforts. • Inadequate policies and legislation: Weak implementation and enforcement of disability-inclusive DRR policies and laws. • Social stigma and discrimination contributing to exclusion and marginalization. • Insufficient data and research on the experiences of persons with disabilities in disasters. 	<ul style="list-style-type: none"> • Inclusive risk assessment: Conducting comprehensive risk assessments that consider the vulnerabilities, capacities, and needs of persons with disabilities. • Capacity development: Providing training and skill-building initiatives to enhance the capacity of persons with disabilities, their families, and relevant stakeholders in DRR. • Inclusive planning and policy: <ul style="list-style-type: none"> - Inclusive policies and legislation prioritizing the rights and inclusion of persons with disabilities in DRR and CCA efforts. • Accessible communication channels and information dissemination during emergencies. • Enhanced accessibility of evacuation routes, shelters, and early warning systems. • Capacity building and training for stakeholders on disability-inclusive approaches. • Comprehensive data collection and research on the experiences and needs of persons with disabilities 	<ul style="list-style-type: none"> • International frameworks: Utilizing international frameworks like the Sendai Framework for DRR and the United Nations Convention on the Rights of Persons with Disabilities to guide and support inclusive DRR efforts. • Knowledge sharing: Promoting the exchange of best practices and lessons learned among countries and stakeholders to enhance the inclusion of persons with disabilities in DRR. • Empowerment and participation: Promoting the active participation and meaningful involvement of persons with disabilities in all stages of DRR. • Collaboration and partnerships among government agencies, disability organizations, and other stakeholders. • Community engagement for the meaningful participation and inclusion of persons with disabilities. • Utilization of technology and innovation for accessible and effective DRR and CCA measures. • Promotion of inclusive education and training programs for empowering persons with disabilities.

Table 3: Zimbabwe

Challenges	Needs	Opportunities
<ul style="list-style-type: none"> • Limited accessibility: Persons with disabilities face challenges in accessing disaster-related information, warning systems, evacuation routes, and emergency shelters due to physical and communication barriers. • Discrimination and stigma: Negative attitudes and discrimination towards persons with disabilities can lead to their exclusion from DRR planning, decision-making, and response processes. • Inadequate policies and legislation: Weak enforcement of disability-inclusive DRR policies and laws hampers the effective inclusion of persons with disabilities. • Limited data and research on the experiences of persons with disabilities in disasters. 	<ul style="list-style-type: none"> • Inclusive planning and policy: Developing and implementing inclusive DRR policies and plans that address the specific needs and rights of persons with disabilities. • Accessibility: Ensuring that physical infrastructure, information, communication, and transportation systems are accessible and inclusive for persons with disabilities. • Capacity development: Providing training and awareness programs to enhance the capacity of persons with disabilities, their families, and relevant stakeholders in DRR. • Comprehensive data collection and research on the experiences and needs of persons with disabilities. 	<ul style="list-style-type: none"> • Collaborative partnerships: Establishing collaborations between disability organizations, government agencies, civil society, and other stakeholders to promote inclusive DRR approaches. • Technological advancements: Utilization of technology and innovation for accessible and effective DRR and CCA measures. • Advocacy and awareness: Engaging in advocacy campaigns and awareness-raising initiatives to promote the rights and inclusion of persons with disabilities in DRR. • Promotion of inclusive education and training programs for meaningful participation.



Conclusion

The baseline study and mapping exercise conducted for the national situations of persons with disabilities in Zimbabwe, Zambia, and Malawi regarding Disability Inclusive Disaster Risk Reduction (DIDRR) strategies and mechanisms holds significant importance in advancing the inclusivity and resilience of these countries. The baseline study provides a comprehensive understanding of the current conditions, vulnerabilities, and needs of persons with disabilities in the context of disaster risk reduction in Zimbabwe, Zambia, and Malawi. It examines existing policies, frameworks, and practices related to DIDRR, highlighting strengths, weaknesses, and areas for improvement. By identifying gaps and challenges, the baseline study serves as a basis for formulating effective strategies and mechanisms that address the specific needs of persons with disabilities during disasters in these countries.

The mapping exercise complements the baseline study by visually representing the geographical distribution of persons with disabilities within Zimbabwe, Zambia, and Malawi. It helps in identifying areas with high concentrations of disability populations, as well as regions where accessibility and inclusion may be limited. This spatial analysis facilitates targeted interventions and resource allocation, ensuring that the needs of persons with disabilities are addressed in a localized and context-specific manner. The baseline study and mapping exercise contribute to the development and implementation of Disability Inclusive Disaster Risk Reduction strategies and mechanisms in Zimbabwe, Zambia, and Malawi. These exercises enable evidence-based decision-making, policy formulation, and resource allocation, ensuring that the unique needs and perspectives of persons with disabilities are integrated into disaster preparedness, response, and recovery efforts.

Furthermore, the baseline study and mapping exercise promote awareness and understanding of the rights and needs of persons with disabilities in disaster management and risk reduction in Zimbabwe, Zambia, and Malawi. They facilitate the inclusion of persons with disabilities in decision-making processes, fostering resilience and community engagement. By empowering persons with disabilities and involving them in the design and implementation of DIDRR strategies, these exercises contribute to more effective and sustainable outcomes.

In conclusion, the baseline study and mapping exercise for the national situations of persons with disabilities concerning Disability Inclusive Disaster Risk Reduction strategies and mechanisms in Zimbabwe, Zambia, and Malawi serve as vital tools for promoting inclusivity and resilience. Through comprehensive assessments, spatial analysis, and targeted interventions, these exercises pave the way for policies and practices that prioritize the needs and rights of persons with disabilities, ensuring their active participation and protection in the face of disasters.

Recommendations



1. Adopt a multidimensional approach to address underlying risk factors and key drivers of vulnerability among persons with disabilities. Consider the intersection of diverse identity factors, including gender, age, disability, socioeconomic status, ethnicity, displacement and more when promoting comprehensive strategies to mitigate disaster risk.
2. DRR programming by the relevant stakeholders should ride on national delimitation structures, such as wards, constituencies, districts and provinces as they are key to meaningful inclusion of persons with disabilities in DRR programming. Councillors and Members of Parliament can easily and more effectively ensure inclusive DRR support. They can easily develop data-banks of citizens in their catchment areas who have disabilities and their specific needs, including: assistive devices, education (including bursaries), skills training, healthcare, loan and grant facilities (CDF), social protection, etc, mechanisms that could greatly help build resilience and adaption of persons with disabilities.
3. Consider the complex sociocultural and humanitarian contexts when mainstreaming disability inclusion in DRR.
4. Establish mechanisms for formalizing commitments to DiDRR through close collaboration between governments, OPDs, national and international NGOs, United Nations agencies, donors and other key DRR stakeholders.
5. SADC to develop clear guidelines for countries to adopt disability inclusive DRR at the national level.
6. Ensure systematic resource allocation to build capacities, institutions, and mechanisms for mainstreaming disability inclusion in DRR, while addressing barriers hindering effective inclusion.
7. Ensure the meaningful participation of persons with disabilities in DRR by establishing accessible communication channels, consultation platforms and tailored support to enable their active engagement throughout all phases of disaster risk management.
8. Disaster preparedness plans need to ensure that the discussions and materials are accessible to people with hearing or vision disabilities, as well as to people with cognitive disabilities. Early warning systems should not solely rely on audio and video, or televised messages without including sign language interpretation, captions for the hard of hearing, or audio descriptions for persons with low vision or blindness.
9. When a disaster occurs, persons with disabilities need to be included in damage and needs assessments to ensure access to assistive devices, rehabilitation services, accessible shelter and housing, and life-sustaining supplies such as food and water.
10. In the reconstruction stage, persons with disabilities should be consulted in assessments to identify which infrastructure and accessibility challenges are critical for the disability community.



11. Address issues related to disability data collection and utilization in DRR, focusing on reducing cultural stigma, securing adequate resources, building capacity, fostering the active involvement of OPDs and improving coordination among key stakeholders for reliable data collection and exchange.

12. Make meaningful investments in OPDs at all levels to enhance their capacities. This may involve initiating with small grants or exploring pooled funding in collaboration with international OPDs, with funds directly accessible to national and local OPDs.

13. Mainstream disability inclusion in all pillars of the Early Warnings For All initiative while working closely with persons with disabilities and their OPDs at the national, regional and global levels. Promote local solutions and community-driven initiatives for accessible early warnings and early action for all.

14. Align responsibility for co-ordination with responsibility for implementation of climate change adaptation, disaster risk reduction policies and disability issues. For example

- Ensure the Ministry of Gender, Community Development and Social Welfare and agencies at the national level have information and incentives to integrate CCA and DRR across their portfolios, and report back on progress centrally.
- Make use of ministries and agencies with a presence at the local level and responsible for implementation to ensure that national directives on CCA and DRR are integrated with local development plans.
- Reinforce the mandate of relevant ministries and agencies to enforce existing regulatory measures and provide incentives in support of CCA and DRR, such as persons with disabilities protection.
- Build on international momentum on CCA policies to also bring domestic attention and resources to the reduction of climate-related disaster risks, and specifically risk prevention measures on persons with disabilities.

15. Make tailored climate information readily available to support evidence-based policy and persons with disability by;

- Providing support or incentive mechanisms to encourage owners of data to make climate information easily accessible for users at all levels, including persons with disabilities.
- Where appropriate, converge risk assessment methods across sectors to support coherent decision-making on CCA and DRR on the ground.
- Putting further emphasis on generating comprehensive information related to current vulnerability and exposure of persons with disability, and layering this with information on future hazards, which is inherently uncertain and requires careful interpretation.
- Ensuring that there are channels for locally collected data on vulnerability to contribute to the wider understanding of the vulnerabilities of persons with disabilities.



16. There is a need to move towards practical disability inclusion rather than only policy formulation and awareness raising.

17. There is also improper use of terminology and defining the category of disabilities. It is crucial for all health officers, community facilitators and anyone helping in disaster response to know disability terminologies.

18. Efforts should be made to ensure inclusive evacuation plans that include accessible transportation options and consider the requirements of individuals with disabilities.

19. Accessibility features such as ramps, widened doorways, accessible toilets, and appropriate medical facilities should be available to accommodate individuals with disabilities and ensure their safety and well-being.

20. It is crucial to have contingency plans in place to ensure the continuity of support services for individuals with disabilities.

21. Providing accessible communication methods, such as sign language interpreters, captioning, or alternative formats, is essential to ensure that individuals with disabilities can access important information and make informed decisions.

22. Rebuilding efforts should prioritize accessibility and consider the needs of individuals with disabilities.

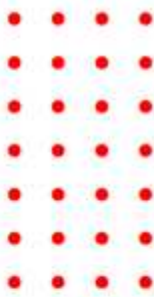
23. Efforts should be made to restore healthcare and rehabilitation services promptly, ensuring that individuals with disabilities can access the care they require.

24. It is important to provide mental health support and counselling services to individuals with disabilities to address their specific needs.

25. National Governments and Partners must also invest more in buying assistive devices, as they are very expensive to buy



Annexes



Annex 1: Key informant Interview Guide (Country level Stakeholders)

Introductory note about the project and the mapping process, consent, and ethics statement (confidentiality of responses etc.)

1. What are the current disaster risk reduction (DRR) strategies and mechanisms in place for persons with disabilities in your country?
2. How do these DRR strategies and mechanisms address the specific needs and vulnerabilities of persons with disabilities?
3. Are there any gaps or challenges in implementing DRR strategies and mechanisms for persons with disabilities in your country?
4. How do responsibilities for DRR and climate change adaptation intersect in relation to persons with disabilities?
5. How are persons with disabilities included in decision-making processes related to DRR and climate change adaptation at the national level?
6. What are the barriers to effective inclusion of persons with disabilities in DRR and climate change adaptation processes in your country?
7. How can stakeholders at national and regional levels collaborate to ensure that DRR and climate change adaptation strategies and mechanisms are inclusive of persons with disabilities?
8. How can DRR and climate change adaptation efforts be scaled up and sustained to further benefit persons with disabilities?
9. How are policies developed and implemented to ensure the inclusion and participation of vulnerable groups in DIDRR activities?
10. What best practices exist in other countries that could inform DRR and climate change adaptation strategies and mechanisms for persons with disabilities in your country?
11. Any comment



Annexes



Annex 2: Key informant Interview Guide (Regional/SADC Level Stakeholders)

1. What are the current disaster risk reduction (DRR) strategies and mechanisms in place for persons with disabilities in the SADC region?
2. How do these DRR strategies and mechanisms address the specific needs and vulnerabilities of persons with disabilities?
3. Are there any gaps or challenges in implementing DRR strategies and mechanisms for persons with disabilities in the region?
4. How do responsibilities for DRR and climate change adaptation intersect in relation to persons with disabilities?
5. Are there any differences in how DRR and climate change adaptation policies and practices are implemented across the Southern Africa Development Community (SADC)?
6. How are persons with disabilities included in decision-making processes related to DRR and climate change adaptation at the regional level?
7. What are the barriers to effective inclusion of persons with disabilities in DRR and climate change adaptation processes in these countries and the SADC region?
8. What are the barriers to effective inclusion of persons with disabilities in DRR and climate change adaptation processes in the region?
9. How can stakeholders at the regional level collaborate to ensure that DRR and climate change adaptation strategies and mechanisms are inclusive of persons with disabilities?
10. How can DRR and climate change adaptation efforts be scaled up and sustained to further benefit persons with disabilities?
11. How are policies developed and implemented to ensure the inclusion and participation of vulnerable groups in DIDRR activities?
12. What best practices exist in other countries that could inform DRR and climate change adaptation strategies and mechanisms for persons with disabilities in the region?
13. Any comment



Annexes

Annex 3: List of some of the Key Informants

#	Organization	Contact Person	Contact #	Email
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4	ZAFOD	Misheck Mutamba	0974635690	kmutambanshiku@gmail.com
5	Disaster Management and Mitigation Unit (DMMU))	Mr. Ngandu	0979810504	titus.mukoni@gmail.com
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14	Zimbabwe Association for the Visually Handicapped (ZAVH)	Timothy Mudarikwa (the Director)	0778329888	timmudarikwa@gmail.com zavh.zim@gmail.com
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Annexes

Annex 3: List of some of the Key Informants

#	Organization	Contact Person	Contact #	Email
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18	REPSSI	Johnson Matenga (Programmes Manager)	078390562	johnson.matenga@repssi.org
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