

CBID Initiative –COVID-19 Response Support for Country Offices and Partners

Latest Update: 27 March 2020

1. The CBID Initiative offers the following practical hands-on support:

- Do get in touch with our advisors (your respective regional CBID advisor or our global technical advisors in DiDRR, Ear and Hearing Care, Inclusive Education, Livelihoods, Physical Rehabilitation) through the usual channels to discuss / get input on any COVID-19 response project ideas and plans. We will prioritise your requests and respond swiftly.
- Do let us know if you wish for advisors to directly engage with specific partners to give guidance/provide hands-on support. We are happy to do so.
- Feel free to involve us in your assessment processes in various ways. For instance, we are happy to support the analysis of any partner feedback you receive. Feel free to forward this in any format to us and we will provide input.
- We have agreed on re-designation of Regional CBID funds for immediate planning and actions appropriate. Contact your regional CBID advisor if this is relevant for you.

2. List of practical ideas focussing on the HOW (implementing response activities):

Based on the CBID Covid-19 matrix, the CBID Initiative has compiled a list of practical ideas focussing on the HOW, i.e. implementing concrete response activities to address topics mentioned in the matrix. The list is a non-exhaustive 'bucket list' to seek inspiration from and to be complemented when designing a response programme. All below mentioned activities need to be contextualised as the situation on the ground varies from country to country and from community to community.

Practical ideas for COVID-19 response in the areas of 1. Awareness raising, 2. Access to necessities, 3. Financial support, 4. Psychosocial support, 5. Accessible communication and 6. Ensuring that our front-line staff stay safe:

1. Awareness raising

- Community awareness with accessible information for people with disabilities and families: working with mobile vans (if possible) and/or apps (CBID advisors can link you up with Partners and Community Based Organisations on what is working in many countries)
- Advice for appropriate care / protection of persons with disabilities and care givers

- Support governments on how to include persons with disabilities in their response (share practical documents on how to address specific needs: psychosocial, persons with visual and/or hearing impairment, ensuring accessible communication etc.)
- Use infographics to be posted in local communities ([Example here](#))
- Support partners to share information via announcement letters with villages chiefs and heads of village units. Work with national and local government through their different channels such as radio programmes, TV, public loudspeakers, social media etc. and follow government requirements
- Translate and share the disability inclusive community action Covid-19 matrix in local language for partners and relevant stakeholders (National, INGOs network, private/ business sector)
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2. Access to necessities

- Ensure persons with disabilities are on the lists for government distribution: Share lists of people with disabilities and families with local government authorities. Encourage DPO members to be active in distribution while observing self-protection protocols.
- Distribution of food rations, hygiene kits (can also be simply soap, masks) and maintenance medication support for elderly, people with disabilities and other marginalized groups (because of the closures or breakdown of household income, many people are not able to get necessities). Deliver rations to people's doors or have a central distribution point which observes social distancing and mask protocols
- Establish accessible hand washing points in slums, villages etc. Seek support from local government to ensure water supplies are not interrupted or are improved
- Sanitisation/disinfection support, including practical ways to sanitise assistive devices (wheelchairs, canes, hearing devices, keyboards, screens, etc.).
- Volunteers to assist families/persons with disabilities in getting to store/supermarket (accessing quarantine card, if need be) as usual caregivers may not be able to do so.
- Identification of appropriate health care to turn to in case of contraction with Covid-19.
- Utilize existing DRR and preparedness methods of local government. If not in existence, build basic measures to ensure evacuation paths, evacuation centres and medical units are accessible and easy to enter and stay.
- Mentoring and re-training of persons who have lost their jobs, are unable to get to work or operate their businesses or Income Generating Activities

- Provision of reasonable accommodation (e.g. to ensure continuity of education (e.g. online access))
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3. Financial Support

- Fast track unconditional cash transfer (Use available quick assessment tools to identify number of persons with disabilities who need cash transfer for survival). Discuss with partners how to manage cash transfers in a lockdown situation.
- Use of mobile apps for cash transfers. Negotiate with banks and cash transfer organisations for more accessible methods.
- Other livelihood support, e.g. for rent if persons with disabilities have lost their source of income.
- Establish clear guidelines on how partners can use existing funds to provide financial support – for what, how to do it, grants or loans etc.
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4. Psychosocial Support

- Establish simple guidance on Mental Health and Psychosocial support (MHPSS): taking care of yourself, staying in touch while observing social distancing, self-protection, quarantine and self-isolation etc.
- Organise psychosocial support for persons with disabilities preferably online or via mobile phone. But may require frontline workers to visit homes in communities (follow advice to communities who are volunteering, e.g. on self-protection, training on how to listen and support etc.)
- Employ psychologists and recruit volunteers, set up psychosocial support lines where people with disabilities can share concerns, difficulties and needs.
- Work with MH alliances to share information, to ensure correct messaging from reliable sources, through social media and in lobbying local government to meet vulnerable populations
- Ensure children and children with disabilities and vulnerable adults are protected against abuse.
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5. Accessible communication (including to counter fake news):

- Think about appropriate communication means to stay in touch / get in touch with self-help groups to gather data on situation of person with disabilities in situations where face-to-face data gathering is not possible

- Importance of surveys being done NOW to elicit what concerns and practical needs persons with disabilities and their families have in their particular situation ([Example here](#))
- Network with other organisations in the development of information materials
- Share information, e.g. surveys, graphics, Disability inclusive activities with National NGO networks, with (mental) health networks, with health networks and DPO networks
- Advocate with authorities to use data and accessible communication that was produced
- Support Organisations of Persons with Disabilities and other partners in producing information in accessible formats (e.g. easy to read, braille etc.) to provide accurate information. Translate WHO & UNICEF posters, leaflets and videos in sign language and other accessible formats.
- Share videos, posters and updated information in local language on social media with DPOs, other national partners, INGOs network, private/ business sector partners etc.
- Identify, develop and finance the procurement of different alternative means of information communication to reach out to people who live in remote areas, people with limited means of communication, and people who cannot access and understand information from the mainstream platforms
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6. Activities to ensure our front-line staff (CBM and partners) remain safe and are not exposed themselves

- Provide guidance, masks, protective clothing. Provide budgets for the same or secure gifts in kind from international donations
- Design any activities for a situation where staff cannot move (using apps to communicate with persons with disabilities, distribute cash, organise delivery of necessities at homes etc.)
- Comply with the government COVID-19 plans, strategies, regulations
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Please note that this is a living document which will be updated as the situation evolves