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# Review, Adapt and Action Learning Laboratories: RAAL Labs - A practical guide



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### Cover photo

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**Description:** Illustration of a group of 8 men and women of different nationalities, and ethnicities conversing about methodologies to make workspaces more inclusive. They are sitting at a table, amongst them is a man with visual impairment, a woman using a wheelchair. Each person is contributing ideas to the conversation based on their experiences. Above them on the wall is an infographic showing exclusion and inclusion, as well as different pictograms representing inclusion, specific requirements, barrier removal.



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The **From Guidelines to Action** project is implemented by Humanity & Inclusion (HI) and aims at supporting the operationalization of the Inter-Agency Standing Committee Guidelines on inclusion of persons with disabilities in humanitarian action. HI piloted activities through Adapt, Action, Learn and Review Laboratories for disability inclusive coordination, data collection and programming in protection and food security sectors. The project is co-funded by ECHO and the Center for Disaster Philanthropy.

The **Phase 3 – Leave no one behind!** project mainstreams disability in global and local humanitarian action, in line with the Inter-Agency Standing Committee Guidelines on Inclusion of Persons with Disabilities in Humanitarian Action. It is led by Handicap International e.V. and jointly implemented with CBM Christoffel-Blindenmission Christian Blind Mission e.V. and Ruhr University Bochum’s Institute for International Law of Peace and Armed Conflict. The project is funded by the German Federal Foreign Office.





# 1. Introduction to RAAL Laboratory

## 1.1 Background

In 2019, the Inter-Agency Standing Committee (IASC) Guidelines Inclusion of Persons with Disabilities in Humanitarian Action were released. The guidelines were developed in consultation with a broad range of humanitarian actors, including organizations of persons with disabilities. It contains practical steps and recommendations humanitarian actors can take to ensure meaningful participation of and equal access by persons with disabilities to humanitarian programs and general protection. The guidelines describe four must do actions (MDAs) that can be applied across sectors, humanitarian programme cycle phases, roles and responsibilities. These are (1) to promote meaningful participation of persons with disabilities, (2) to identify and remove barriers, (3) to empower persons with disabilities, and support them and other humanitarian actors to develop their capacities, (4) to disaggregate data for monitoring inclusion<sup>1</sup>.

This practical guide provides information on how to complement and combine training sessions on disability-inclusive programming with interactive laboratory style learning sessions, the Review, Adapt, and Action Learning Laboratories (RAAL Labs). RAAL Labs have proven to further boost humanitarian actors' confidence and skills to adapt their own programming tools and processes, aligning them with the IASC Guidelines.

<sup>1</sup> See chapter 3 of the IASC Guidelines, page 17, that introduces the must do actions as inclusive programming approaches.

This guidance was developed by people with experience facilitating training sessions and the RAAL Labs. The intended target group are technical and/or program staff who facilitate engaging learning opportunities for and with their teams with the objective to enhance skills, understanding and confidence around disability-inclusion in their humanitarian programming.

Examples of tried and tested methods can be found throughout the guide coupled with essential information that is required to plan and implement a RAAL Lab. In the annexes, you will find links and further practical resources, such as more in-depth details on topics covered and templates that can be used and adapted according to your needs and context.

Please contact [inclusion@hi.org](mailto:inclusion@hi.org) for any questions.

## 1.2 Rationale

The RAAL Lab method was developed to complement the **modular learning package 'Introduction to disability inclusive humanitarian action'**, a product of the global **Reference Group on Inclusion of Persons with the Disabilities in Humanitarian Action**, in short, the Disability Reference Group (DRG). This DRG package includes a set of seven modules<sup>2</sup> about how to promote and adapt humanitarian programming to be more inclusive of persons with disabilities. It can be facilitated as an in-person or online learning session and is accompanied by a **facilitator guide and supporting documents**. The training is modular, which allows the facilitator or learner to select a few modules or follow the complete package, depending on the learners' needs and interests. An **e-learning** aligned with six of the seven modules was developed by HI in collaboration with the DRG Working Group 1.

The RAAL Lab origins are based on experiences of Humanity & Inclusion (HI) and other disability-inclusion specialised actors. Too often, after completing a training for humanitarian actors on disability-inclusive programming, HI was contacted by these same trainees from mainstream humanitarian organisations, with requests to review their needs assessment, consultation or monitoring tools, e.g. needs assessment questionnaires, Standard Operating Procedures (SOPs) and/or assessment processes and related guidance. This indicated that while existing training enhanced the awareness and knowledge of trainees to recognise that their programming, processes and tools were not inclusive of persons with disabilities, a gap remained. HI identified there was a need for further training that could provide a creative and safe space enabling participants to develop their confidence and ownership over disability inclusion and start reviewing their tools.

It is in response to this gap that the RAAL Labs were developed to facilitate uptake of knowledge and enhance skills and confidence among humanitarian program teams to adapt their tools, policies

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**2** (1) Introduction to Disability, (2) Introduction to IASC Guidelines, (3) Disability inclusion within the wider humanitarian landscape, (4) Accessibility, Universal Design and Reasonable Accommodation, (5) Introducing the Must Do Actions (MDAs) and the twin-track approach, (6) Inclusive Project Cycle Management, (7) Inclusive Accountability to Affected Population (AAP)



and processes. The RAAL Lab method provides experimental spaces to learn from action - that is trainees themselves are reviewing and adapting their tools and programming processes. Such spaces for learning-by-doing ultimately boost confidence on disability inclusion among newcomers to this cross-cutting topic. In parallel, the methodology promotes the meaningful participation and engagement of persons with disabilities or their representative groups. For example, whenever possible, persons with disabilities, as staff members and/or as representatives from the affected populations and/or Organizations of Persons with Disabilities (OPDs) should be included as facilitators or co-facilitators of RAAL Labs. The learning process challenges the perception that it is difficult, cumbersome, costly and requires specialised knowledge to change programming to be more disability inclusive. The 'labs' create a space in which humanitarian organizations can gain confidence by applying their new learning, such as using the four MDAs, and experimenting with the review of their own tools and processes. The labs utilize the power, creativity and effectiveness of peer learning processes.

This guidance responds to requests from partners and colleagues to share the learning of HI and partners based on experience facilitating RAAL Labs in the Syrian response, Somalia & Somaliland, South Sudan and Uganda. HI hopes this guidance will equip colleagues and partners to use this method in other regions or contexts.

### 1.3 RAAL Labs in a nutshell

RAAL Labs are collaborative laboratory sessions that last between three to five hours and support participants to reflect on their and others' tools and practices, in a secure space.

The RAAL Lab facilitators utilize an interactive approach, encouraging participants to peer review their own or other organizations' tools, i.e. beneficiary data collection or assessment tools, practices or processes, through applying knowledge and skills gained from the DRG learning modules. The learning around understanding disability, reasonable accommodation, must do actions or accessibility can be easily applied during the review of programming tools or processes.

The 'lab' approach encourages 'learning by doing', including from examples. Depending on the sectors, the facilitators can use for the review of procedures, assessment tools and processes existing tools such as the:

- **Guidance to review protection tools to become more disability inclusive** and its **How to Note** or the
- **Guidance on making food security more disability inclusive** and its **How to Note**.

The guidance consists of an Excel review grid and a guidance note that explains step-by-step how to use the review grid. Meaningful participation of persons with disabilities or OPDs in the facilitation of RAAL Labs is strongly encouraged to engage lived expertise of persons with disabilities. The method builds on innovative adult learning methodologies that provide tailored learning and upskilling around pre-assessed learning interests and gaps. Some of the RAAL Labs have fostered the start of a community of practice amongst the participants that focus on sharing resources and experiences that promote meaningful participation in and access to humanitarian services.



## 2. Methodology of the RAAL Lab session

### 2.1 Participant target group

It is important to consider the background, experiences and expertise of participants, as well as to invite an adequate number of participants for effective knowledge uptake and learning exchange in the RAAL Labs.

The participants can be local, regional, and global humanitarian actors. To meaningfully impact programming and tools, it has proven useful to encourage applications from those organizations that have made a strategic decision to become more disability inclusive. It is recommended to invite those team members that are experienced and engaged in programming and/or technical advisory positions with a focus on protection mainstreaming, gender, Accountability to Affected Populations (AAP), inclusion and/or Monitoring, Evaluation, Accountability and Learning (MEAL). Participants should typically have at least two to three years of experience in the humanitarian context and hold any of the following responsibilities:

- Leading or engaged in programming,
- MEAL processes,
- Project managers and senior officers, coordinators, or
- Technical advisors (sectorial, cross-cutting themes).

It is recommended to engage at minimum two, better three or four staff members, as they can create a pair or task force dynamic within their organisations to see the change through after the RAAL Lab is finalized. To have only one person attend per organization has proven less effective and efficient, especially when considering the high turnover in the sector.

## 2.2 Facilitation modalities

It is essential to build a safe atmosphere in the training that takes place before the RAAL Lab. Participants should feel at ease to openly share issues and challenges with colleagues from within and other humanitarian agencies. This needs to be encouraged as often different humanitarian actors perceive each other as competitors for grants. It is key to emphasise that technical exchanges benefit all humanitarian agencies, and ultimately the affected population. That safe space can be created through tailored and extensive get-to-know each other sessions at the beginning of the learning, other warmups as well as group work, or ice-breaker exercises.

The RAAL Labs can be conducted either online or face-to-face. They ideally require two facilitators, including or additionally representatives from OPDs.

All facilitators should have sound knowledge on adult learning methods and be familiar with the rights-based approach to disability in humanitarian action, the IASC Guidelines, particularly the must do actions, and content of the DRG modules.

In an online format, the following accessible and interactive tools and software that allow for teamwork and integration of visualizations through sharing screens are recommended: Zoom, Padlet, Mural, and Microsoft Teams.

For more **recommendations on how to facilitate the DRG learning modules** in an interactive way, with approximately 60-70% of the time allocated for group work, check out the facilitator guide of the DRG Modules.

## 2.3 Recommended timeline for facilitating DRG Learning modules in combination with a RAAL Lab

It is important that preparations for the RAAL Labs (and DRG learning sessions) begin sufficiently in advance before the actual session to ensure:

- Selection of participants based on responsibility and experience,
- Those mid-management, MEAL and advisory positions can block their schedules and ensure their availability; and
- Quality preparation for quality delivery.

While planning is useful, the actual time needed to prepare a RAAL Lab session, depends on the experience of your team. When doing your first RAAL Lab session, at least 6 hours preparation



might be needed. This includes time to send out emails to ask for tools and policies, follow-up with invitees, review the tools and guidance and prepare review questions. As facilitators build experience, it is likely less time will be required.

The table below presents a timeframe to organise a RAAL Lab together with learning sessions using the DRG Modules. It has guided HI's teams when organizing RAAL Labs in connection with learning sessions using the DRG Modules, which lasted between 2- 3.5 days. A half day was used for RAAL Labs, and the remaining for the DRG Modules. You can adapt the timeframe below, as necessary.

Timeframe:	Activities:
2-3 months ahead	<ul style="list-style-type: none"> <li>• Send save the date (with concise information regarding the training opportunity to be shared) shared via donor &amp; cluster working groups to key stakeholders, actors, partners identified through mapping</li> <li>• Share information on RAAL Lab and Learning modules with key potential participants</li> <li>• Send final invites 1- 2 months in advance</li> <li>• Request background information through an <u>application form</u> from applicants</li> <li>• Collect and analyse responses to identify interested applicants</li> <li>• Ensure gender balance, disability diversity, sectoral/ position similarity</li> </ul>
4-6 weeks ahead	<ul style="list-style-type: none"> <li>• Selection of participants and identification of reasonable accommodation requirements</li> <li>• Send <u>pre-test forms</u> to participants</li> <li>• Select DRG modules (results of the application form)</li> <li>• Prepare a DRG module overview and agree on action plan between co-facilitators</li> <li>• Decide which module goes to which facilitator depending on background and experience</li> </ul>

<b>4-1 weeks ahead</b>	<ul style="list-style-type: none"> <li>• Identify and contact input speakers</li> <li>• Analyse interests and learning needs (results of pre-test form)</li> <li>• Adapt learning sessions' content based on participants learning needs and interests (results of the application and pre-test form)</li> <li>• Ask applicants to share assessment tools and/or guidance documents to be adapted in laboratory sessions</li> <li>• Make logistical arrangements for reasonable accommodations – e.g. hiring a sign language interpreter</li> <li>• Share content outline with participants</li> <li>• Share the IASC Guidelines as a pre-reading</li> </ul>
<b>2 weeks ahead</b>	<ul style="list-style-type: none"> <li>• Follow-up on assessment/ programming tools and process guidance to be used for the RAAL Lab</li> <li>• Prepare the RAAL Lab session, by selecting and reviewing the assessment/ programming tools and/or process documents for disability related gaps</li> <li>• Prepare review questions based on the gaps or utilize review grids such as the ones contained in the Guidance to review protection tools and/or food security tools (see page 5)</li> <li>• Decide which tools or part of the tools are feasible to be reviewed in a 2- 3 hours session</li> </ul>
<b>During the DRG/ other learning Modules</b>	<ul style="list-style-type: none"> <li>• Include sufficient time at beginning for participants to get to know each other</li> <li>• Use ice breakers which are prepared ahead of time</li> </ul>

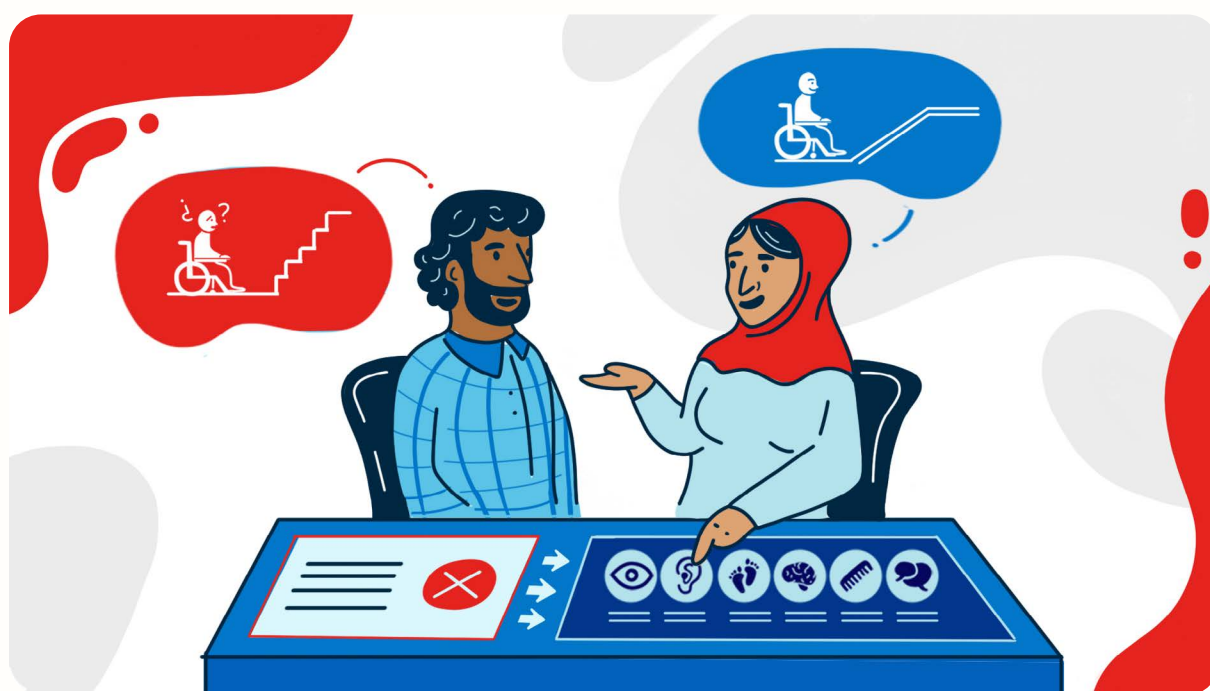
<p><b>During the DRG/ other learning Modules</b></p>	<ul style="list-style-type: none"> <li>• Have an opening speaker</li> <li>• Ensure the <b><u>agenda</u></b> remains flexible to accommodate any necessary changes</li> <li>• Conduct a round of feedback from participants at the end of each main session to readjust the facilitation and planning for the sessions</li> <li>• Include in the schedule a last session for participants to fill the <b><u>post test form</u></b> and the <b><u>participant feedback form</u></b></li> <li>• Ensure facilitators fill the <b><u>facilitator feedback form</u></b></li> </ul>
<p><b>RAAL Lab</b></p>	<ul style="list-style-type: none"> <li>• Prepare recap on must do actions and/or reasonable accommodation and/or diversity of persons with disabilities</li> <li>• Use icebreaker to warm up participant's creativity</li> </ul>
<p><b>3-6 months after the RAAL Lab</b></p>	<ul style="list-style-type: none"> <li>• Send a <b><u>follow-up survey</u></b> to participants to measure uptake and use of adapted tools or process guidance</li> <li>• Conduct consultations with a sample of participants</li> <li>• Document the changes and good practices, lessons learned through case studies or success stories</li> <li>• Share the lessons learned and good practices internally in the organisation, with interested actors through cluster or sector working groups, and/or RAAL Lab participants themselves</li> </ul>

## 2.4 How to prepare the RAAL Lab session

The overall objective of the RAAL Lab is that participants apply information from the DRG modules learning **sessions** to their own operational tools. In humanitarian action, needs assessments, monitoring, and related guidance tools are key to quality programming and response planning. fast-paced environment with fellow humanitarian actors within and outside their organizations is never an easy action, as most agencies compete for funding and the work takes place in a fast-paced environment.

It is important to create a learning environment by discussing advantages of peer learning and reviews to create mutual trust between participants. This is likely to create an environment where they can openly share gaps and learning interests to ensure content is tailored and relevant scenarios can be presented as part of the learning methodology. Following the recommendations for preparing the DRG learning and RAAL Lab sessions, select those participants that share similar motivation for change and interest in enhancing access to and meaningful participation of persons with disabilities in their programming.

## 2.5 Detailed steps



To monitor inclusion, data on barriers and specific requirements of persons with different types of disabilities is required. Humanitarian data should include disability disaggregated data to ensure inclusive programming is accessible for and inclusive of persons with disabilities. Additionally, qualitative data collected should help to understand risks and barriers, and their impact on persons with disabilities and/or their care givers/ households. To prepare the RAAL Lab session the following steps can be considered and adapted, as needed.

1. Contact participants (after they have been selected) to invite them to share tools. As humanitarian actors are hesitant to share tools over quality or competition, inform them about the purpose of sharing. It is important to receive them in time to allow the facilitators to prepare the RAAL Lab sessions.
2. Plan a working session with facilitators to develop their own understanding of the purpose of the shared tool, its scope and intended use. They prepare for the RAAL Lab session by familiarising themselves with the tool and understanding:
  - a. What information is being gathered with the tool?
  - b. In what part of the process is the tool used in the project cycle?
3. Use the must do actions in relation to data collection and analysis to undertake the review (Chapter 3 of the IASC Guidelines on the must do actions, and Chapter 4 on data and information management). The facilitator should also analyse how 'visible' disability is throughout the tool. Taking a rights-based approach in language and understanding of disability. The pre-existing knowledge on disability and/or the knowledge acquired in the learning sessions prior to the RAAL Lab should prepare the participants for this process.
4. Below, are some guiding review questions, that can help frame the review to guide the identification of gaps and good practices:
  - a. Do the data collection tools include questions that allow for disaggregation by gender, age, disability, and other relevant factors (displacement status, household size), using the recommended tools tested for humanitarian contexts, such as the Washington Group Set on Disability Questions?
  - b. Do the data collection tools include questions that identify barriers and enablers, capacities of as well as risks, their origin and how they affect persons with different disabilities, considering different levels of functioning, age and/or gender?
  - c. Were the tools reviewed and/or developed with meaningful participation of persons with disabilities and/or OPDs from the affected population/ region?
  - d. Are persons with disabilities included in the process and enumerator team to collect the data, analyse and prioritize it for programming?
  - e. If so, are empowerment options/ training for enumerators planned for and made accessible to persons with disabilities?
  - f. Is the data to be collected and analysed with the tools sufficient to monitor indicators on equal access and meaningful participation of persons with disabilities in the given sector?
  - g. Are reasonable accommodations budgeted and available during data collection so that all persons with disabilities can respond equally?



5. Based on the gaps and good practices you have identified, prepare the RAAL Lab session framing. Do this using a good judgement on how much time participants will require to review parts or the entire tool/ tool sets/ process guidance/ SOP (minimum 1 hour and maximum 2 hours)
6. According to the gaps and good practices you have observed, prepare instructions for the participants for scenario-based group work to first identify the gaps. The instructions should be framed around the application of the Must-Do Actions and understanding of disability inclusive programming, so that participants internalize them further. This will help the participants to adapt the tools themselves.
7. Frame another set of instructions that guide participants to identify the solutions to the gaps and help them to make concrete recommendations on how to address the gaps in the assessment tools and/or processes they have identified in the first part of the RAAL Lab. Provide sufficient time for that. Depending on the level of participants, share some sample tools or resources in link with **Washington Group Set of Questions** on Disability, or Barrier & Enabler/ Risk/ Capacity related questions such as the **Decision Making Tree for data collection**, **the Displacement Tracing Matrix (DTM) Field Companion for disability inclusion**, Guidance on **adapting protection** or **food security** tools. (minimum 1 hour and maximum 2 hours)
8. In your instructions, ensure to mention that feedback on gaps should be formulated in a reassuring and constructive manner, so that the suggested improvements are not understood as a critique of the person or the organization. Emphasize to identify the good practices around disability inclusion in the tool and/or processes to motivate and learn from existing good practices.
9. Depending on the length of the tools and the time available, groups can be split according to their interest & positions (MEAL, programming, advisory), the sections of the tool sets, organization, their sector of expertise, Must-Do Action, or other ways that address their interests, capacities and allow for a structured review of the tools.
  - a. Criteria to setup groups in the past that have worked well, include:
    - I. Mixed teams from different organizations: 1 person with lived experience of disability/ OPD, 1 MEAL, 1 Technical Advisor, 1 Operations
    - II. By organization: each organization reviews their own tools, plus a person with lived experience of disability
    - III. By Sector: all that work in a sector
  - b. Size of group: Depending on participants' capacity and number/ type of tools received, the groups should be formed. What has worked well, was to have relatively small groups of minimum two to maximum five participants. Tool reviews require time for reading, thinking and exchange to agree on gap and/or suggestion.

10. Make sure that the participants have a medium to work on this - could be flip chart paper or a laptop to directly insert suggestions etc.
11. At the end of the session, participants are invited to present their findings back to the group. It is important for mutual learning to provide sufficient space on the findings of the review.
12. After this step continue with asking participants to provide feedback around their level of confidence, simplicity of the task, and future replication potential in their work around disability inclusion. Ask also whether those that have received feedback on their tool appreciated the peer group feedback and whether that will be helpful for their organization's future work. Equally check in with the ones providing the feedback whether that was helpful to them.
13. Finalize the RAAL Lab session by providing space for participants to plan next steps for uptake in each organization. This can include having participants from the same organizations speaking amongst themselves and sharing with the wider group after. Participants may make action plans (see [Annex 3](#) for a simple format) on concrete steps for addressing the gaps identified and implement suggested adaptations.

## 2.6 Example of RAAL Lab instructions for participants



You have been called upon as Disability Inclusion Focal Persons to advise [name of the organisation] on what can be improved to ensure [name of the tool] identifies persons with different disabilities and their barriers, enablers, risks, needs and capacities. Please answer the following questions, using the knowledge you gained from the DRG modules and the IASC

Guidelines (chapter 3 on key approaches to programming page 19 to 21; chapter 4 on data and information management page 23 to 32, including the Washington Group Question Sets, chapter [number] on sector [name]) as a reference material. Please formulate your gaps and recommendations in a constructive manner, so that they are not understood as a critique of the person or the organization, that shared the tool.

- What gaps have you identified in the [name of the tool] in terms of disaggregation by gender, age, disability, and other relevant factors?
- What gaps have you identified in the [name of the tool] in terms of data on barriers and enablers, capacities and risks, their origin and how they affect persons with different disabilities, considering different levels of functioning, age and/or gender?
- What recommendations do you have to better capture disability data? Which parts of the [name of the tool] would you change and how? Please focus specifically on the following pages/sections [page number or section name].
- What good practices have you identified where disability data is already captured?

**Please discuss any recommendations to [name of the organisation] with regards to:**

- Who do you engage as part of the enumerator team and as key informants and participants in focus group discussions (FGDs) to ensure that no one is left behind?
- What do you recommend doing ahead of the data collection process to ensure the data collection and analysis team is well versed with disability-inclusion and is confident in exchanging with persons with disabilities?

## 2.7 Examples of a tool review



### Example 1 - Protection assessment tool

In the below example is a portion of a tool used by an international organisation to assess protection risks faced by beneficiaries. This section collects data on the level of access that the beneficiaries have.

In the example below this was a part of a tool that was adapted during one RAAL session. It is important to note that in many cases there is not one answer to make the tool more inclusive but that this suggestion demonstrates one of the ways in which it can become more sensitive to the needs of people with disabilities. The aim of this adaptation process is not only to adapt a tool but also to learn and gain the skills needed to identify where a tool can be improved to be more inclusive and make suggestions on how it can be adapted. The question in **yellow** is the original wording and the **green** highlighted words are the suggested adaptation. Please note that the original language of these question is in Arabic and so the sentence structure might not be accurate.

## Access

Question	Answer	Adaptation to the question to be disability inclusive
<p>What services are being provided by humanitarian organizations in your community?</p> <p><b>Facilitator Notes:</b> If everybody has answered but the facilitator knows there are more services available to them, consider probing by asking whether they know about those services (e.g., Health, education, food, livelihood, shelter, wash, protection, legal, GBV")</p>		<p>What services do you know about that are being provided by humanitarian organizations?</p>
<p>Do you feel you are able to reach and use the services provided by humanitarian workers whenever you like/choose/need it? If yes, please elaborate. If no, proceed to next question</p>		<p>Could be rephrased here to that the services are available and accessible to you that are provided by..?</p>
<p>What problems have you experienced in accessing the services provided?</p> <p><b>Facilitator Notes:</b> If multiple services/sectors are available, consider asking the question multiple times for each service. Services include anything that is meant to benefit individuals. This can include but is not limited to Health Facilities, Food Distributions, WASH Services, Shelter, Sensitization Sessions, and Participation Activities. Feedback, Complaints, and Response Mechanisms are also considered a service. When recording the answers, see if they correspond to any identified barriers to access (e.g., physical access, economic barriers, social or cultural barriers, discrimination, lack of information, unavailable services).</p>		<p>What prevents you from accessing these services?</p> <p>Examples of barriers can be provided. A person with a disability might not consider their lack of access as a barrier or a problem. This question can start with a statement regarding their rights to accessing these services. Similarly to before, if the person has been identified as having difficulties through the WGQ, then a specific question can be asked of them as they would be a person who potentially has difficulties in accessing services.</p>

Do you feel the services are being provided equally and fairly to all people? If no, please specify which groups are excluded from accessing the services and why		Possible suggestion: can everyone use/access/enjoy these services equally? – but here there can also be a point to use barriers to make the process easier to understand as not all people can understand and identify what accessible means.
What could be done to improve access to services? By whom?		“Access” can be broken down to suggest what they mean. physical access, communication access, institutional access, attitudinal access?



## Example 2 - Child friendly spaces assessment tool

The below example has been modified to be easily understood.

The following tool assesses child friendly spaces. The tool does include questions in relation to children with disabilities however the adaptations here demonstrate how this can be improved and why.

Child_disability_type	If yes, what type of disability?	<ul style="list-style-type: none"> <li>Physical</li> <li>Visual</li> <li>Hearing</li> <li>Speech or Language</li> <li>Aggressive behavior</li> <li>Anxious Behavior</li> <li>Uncontrollable bowl or bladder movement</li> <li>Mental retardation and Mental illness</li> <li>Other</li> </ul>	Child_disability==0
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<b>Other_disability</b>	Please specify if other		Child_disability_type ==8
<b>Physical_disability</b>	Do you have difficulty walking up stairs?	0.Yes 1.No	Child_disability_type ==0
<b>Visual_disability</b>	Do you have difficulty seeing even with glasses?	0.Yes 1.No	Child_disability_type ==1
<b>Hearing_disability</b>	If hearing , Do you have difficulty hearing even with hearing aids?	0.Yes 1.No	Child_disability_type ==2
<b>Speech or Language_disability</b>	Using your usual language, do you have difficulty communicating with others?	0.Yes 1.No	Child_disability_type ==3
<b>Cognitive development and Mental illness_disability</b>	Do you have trouble remembering or concentrating?	0.Yes 1.No	Child_disability_type ==7
<b>Personal care</b>	Do you have difficulty taking care of yourself, such as when you shower or when getting dressed?	0.Yes 1.No	
<b>Ability to Attend Friendly space</b>	Is child able to attend (Child friendly spaces) ?	Yes No	Child disability==0

## Adaptations:

1. The assessment tool includes the short set of the Washington group questions however in row 1 they have added their own types of disabilities – other than what is used in the WGQ's. This is not recommended as they have created types of disabilities or impairments which hold negative connotations and use language that creates negative perceptions about people with disabilities, highlighted in **yellow**. The recommendation is to use the categories as mentioned in the **WGQ** themselves.
2. In the possible answers that can be used when responding to the WGQ's, they do not follow the WGQ guidelines only allowing yes/no responses which is not the recommended possible answers. For the possible answers please refer to the WGQ set **here**.
3. In the query highlighted in **green** the question focuses on the child's ability. A suggestion could be to ask about the accessibility of the space. "Is there anything in the child friendly space that prevents the child from participating?" – examples or types of barriers can be suggested.

## 3. Good practices



From previous iterations of the RAAL Labs, a series of lessons learned and good practices have been identified:

1. It is essential to create trust and explain the objective of the RAAL Lab sessions so that participating agencies feel at ease to share their materials.

2. It is important to create an open and inspirational learning atmosphere for participants by using icebreakers, group work etc.
3. RAAL Lab materials, e.g. application, pre- and post-test forms, session plans, group work, presentation slides, should always be adapted to the context in which they are delivered.
4. Continually provide recap sessions throughout the workshop to keep participants oriented through formats such as quizzes, polls, and open-ended questions.
5. Encourage peer learning and networking, create time and space within the workshop for this.
6. Provide space at the end of the session to plan next steps for uptake in each organization. This can include having participants from the same organizations speaking amongst themselves as well as sharing with the wider group after.

### 3.1 Beyond the RAAL Labs: Motivation for further change

After the RAAL Lab, it could be helpful to follow up with the participants through a monitoring process detailed in [Annex 4](#). One of the actions that can be taken to encourage further work towards disability inclusion is to end the RAAL Lab and DRG Learning session with a 'Chasing the change' forward looking action, where each participant shares their intended next steps. This will help to identify like-minded actors to plan for future exchanges and/or peer support. Such a session can be started by one participating organization sharing lessons learned/ examples of previous action and result on making humanitarian programming tools and/or steps more disability inclusive, and the results of it. To group participants by organization and give them 20 minutes to discuss before sharing back in the group can help create the right dynamic. For some agencies an action plan, can help [Annex 3](#).

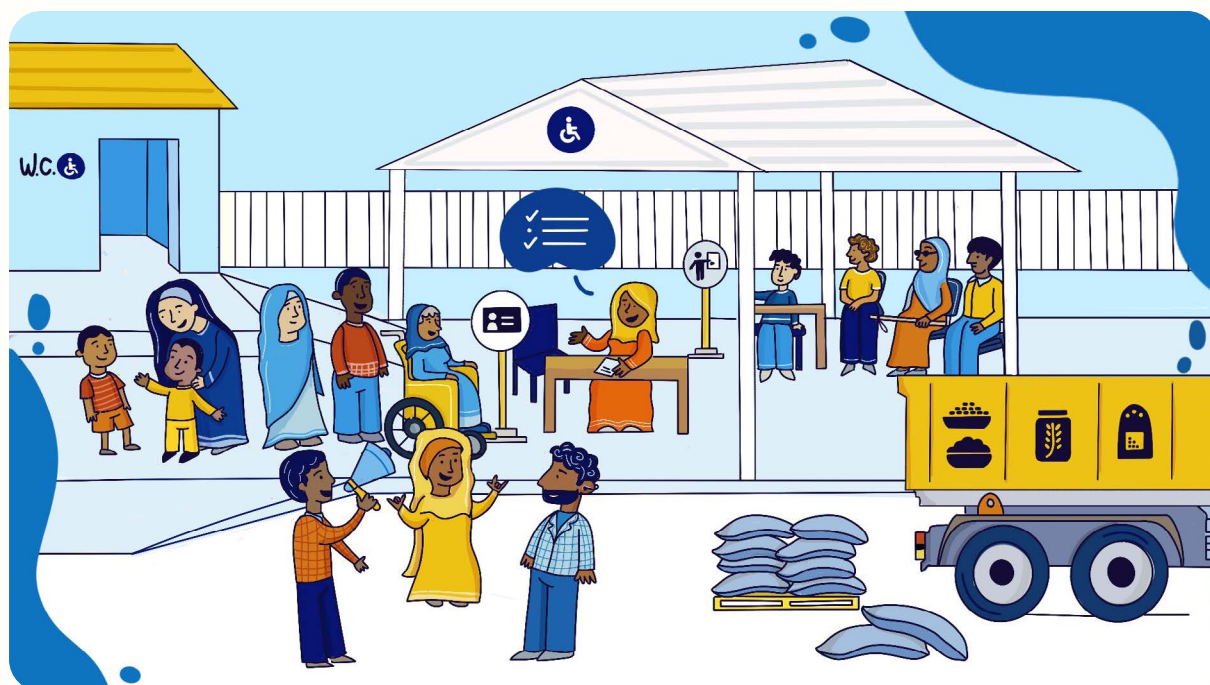
### 3.2 Beyond the RAAL Labs: Changes achieved

Some of the organisations who attended both DRG Learning modules and RAAL Labs have achieved the following outcomes, illustrated in case studies:

1. One organisation created a working group in their organisation with the aim of collaborating and sustaining the process of disability inclusion in their work. This group meets once a month to identify gaps and priorities and to share capacities on disability inclusion.
2. A second organisation adapted all their protection tools following the training. This organisation reviewed all seven protection tools that they use to ensure that they are adapted to be inclusive of people with disabilities. They collaborated with the monitoring and evaluation teams and shared these tools after adaptation with all their partners.

If you would like to know more, please read the case studies in more details [here](#).

## 4. Annexes



### 4.1 Annex 1: DRG Modules of the 'Introduction to disability-inclusive humanitarian action' training package

The learning sessions in the RAAL Labs build on the **Disability Reference Group (DRG) modules**, from the 'Introduction to disability-inclusive humanitarian action' training package which are chosen according to participant interests (assessed in the **application form**) and are then adapted based on context and participant learning interests and needs. As the duration is modular, this allows facilitators to take into consideration participants' availability. There are seven modules that can be selected from, outlined below:

Name	Topic Breakdown	Mandatory Module?
<b>Module 1:</b> Introduction to Disability	<ul style="list-style-type: none"> <li>• Introduction to the concept of disability and the models surrounding it</li> <li>• Intersectionality and Risk</li> <li>• Barriers that heighten risk and exclusion</li> </ul>	Yes

<b>Module 2:</b> Introduction to IASC (Inter Agency Standing Committee) Guidelines	<ul style="list-style-type: none"> <li>• Policy Context and background of the IASC guidelines</li> <li>• IASC Guidelines unpacked</li> <li>• Applying what we have learned in practice</li> </ul>	Yes
<b>Module 3:</b> Introduction to Inclusive Humanitarian Action	<ul style="list-style-type: none"> <li>• Understanding disability inclusion in Humanitarian Action</li> <li>• Identifying the gaps</li> <li>• Applying what we have learned</li> </ul>	No
<b>Module 4:</b> Accessibility, Universal Design and Reasonable Accommodation	<ul style="list-style-type: none"> <li>• Understanding universal design and its benefit to all</li> <li>• Accessibility in service, infrastructure, communication and approach</li> <li>• Understanding reasonable accommodation and its value in practice</li> <li>• Critical success factors</li> </ul>	Yes
<b>Module 5:</b> Introducing the Must Do Actions (MDAs) and the Twin Track for Inclusive Programming approach	<ul style="list-style-type: none"> <li>• The Twin Track approach</li> <li>• Must Do Actions (MDAs)</li> </ul>	No
<b>Module 6:</b> Inclusive Project Cycle:	<ul style="list-style-type: none"> <li>• Recap of the principles of inclusive Humanitarian action</li> <li>• Components of a disability inclusive Project Cycle Plan</li> <li>• Case study exercises</li> </ul>	No
<b>Module 7:</b> Inclusive Accountability to affected populations	<ul style="list-style-type: none"> <li>• Understanding AAP and its relevance</li> <li>• Why inclusive AAP is important</li> <li>• Case study exercises – AAP in action</li> </ul>	No



Further guidelines and resources (including the **Facilitator Guidelines**, the **application** form, the **pre** and **post** assessments, the **facilitator evaluation** and **participant evaluation** forms) on using the DRG modules can be accessed.

## 4.2 Annex 2: Example of an agenda

Below is an example of an agenda consisting of the content and length of sessions. It should be adjusted according to your needs and context. The training can be on consecutive days or non-consecutive, one day a week for three weeks. The training can be longer than three days.

Title of project - RAAL Lab workshop, month and year – Country or region

Date: \_\_\_\_\_ Venue or location: \_\_\_\_\_

Time	Day One	Responsible
9:00 to 9:30 AM	Arrival Welcome and Introduction	
9:30 to 10:30 AM	Introductions	
10:30 to 10:45 AM	Short tea break	
10:45 to 12:30 PM	<b>Module 1</b> - Introduction to the concept of disability, intersectionality, barriers and heightened risk in humanitarian action.	
12:30 to 01:30 PM	Lunch	
1:30 to 2:45 PM	<b>Module 1</b> - Continued	
2:45 to 4:00PM	<b>Module 2</b> - Introduction to IASC Guidelines on Inclusion of Persons with Disabilities in Humanitarian Action IASC Guidelines unpacked and applied in practice	
Day two		
9:00 to 9:30 AM	Welcome and Recap Day 1	
9:00 to 10:20 AM	<b>Module 2</b> - continued	
10:30 to 11 AM	Tea break	
11:00 to 12:20 PM	<b>Module 5</b> - Introducing the Must Do Actions (MDAs) and the twin-track approach	
12:20 to 1:20 PM	Lunch	

1:20 to 3:00 PM	Module 5 - Continued	
3:00 to 4:00PM	Module 4 - (shortened)	
Day three		
09:00 to 9:30 AM	Welcome and Recap Day 2	
9:30 to 10:30 AM	Module 6 - (shortened)	
10:30 to 11 AM	Tea break	
11:00 to 12:20 PM	RAAL Lab (Review Adapt and Action Learning) Lab	
12:20 to 1:20 PM	Lunch	
1:20 to 3:00PM	RAAL Lab continued	
3:00 to 4:00 PM	Wrap Up Post Assessment Way forward	

Notes: \_\_\_\_\_

### 4.3 Annex 3: Post RAAL Lab Action Plan template

What steps will you take in your organisation to facilitate the operationalisation of the IASC guidelines and implement what was learned in the RAAL Lab?

Actions/Tasks	Resources	Timeframe

**Tip:** you can add more rows for the participants to suggest more actions. It is suggested to put at least three rows.

## 4.4 Annex 4: Post RAAL Lab Monitoring Process

This annex details the process for project teams to implement their 3-6 months post RAAL Laboratory follow-up.

### 4.4.1 Step 1: Implementing follow up-survey to all participants 3-6 months after the RAAL Laboratory

The **survey** should be completed by all participants, and not only to one person per organization for several reasons:

- To maximize the number of responses collected
- Experience has shown that even if they are part of the same organizations, several individuals that participated to the RAAL Laboratory together might have different answers when it comes to the changes in their organizations, and this is interesting to capture.
- Sending the survey to all individuals that participated in the RAAL Laboratory will enable the team to better identify who to follow up with, through Key Informant Interview or Focus Group Discussion. Based on the survey answers, the team can make sure individuals are willing and available to participate in such sessions.

This survey is a **flexible tool**. The survey can and should be adapted by country teams (in collaboration between MEAL, Technical and Operational teams) to their local context. The Project Manager, MEAL and Technical referent can decide to add additional questions to the survey, that could serve the technical follow-up process for instance.

### 4.4.2 Step 2: Selection of a sample for semi structured interview.

Based on the survey results, the team can identify a sample of organizations (and individuals) to follow up more in depth with through semi-structured interviews.

The choice of methodology will be left to the discretion of the team. It could be Key Informant Interviews (KIIs) or Focus Group Discussions (FGDs) enabling the participation of multiple persons from the same organization for instance.

If a FGD is preferred, it could be the opportunity to gather individuals from an organization that participated in the RAAL Laboratories, and one or more additional colleagues that didn't attend the RAAL, to understand the changes in the organization.

### 4.4.3 Step 3: Implementation of semi structured interview

Based on the selected methodology (KII or FGD), the team will conduct the interviews, with the support of MEAL.

At this stage the process is still very flexible. A set of core standard questions has been defined. The team is free to add any question that may seem important and can support them in the continuous follow-up process.

The interviews can be done remotely (phone, Teams etc.) or on site/ in person, depending on each country's context, and available resources.

#### Core questions for KII and FGD

1. If they mentioned a change in the survey: Following your participation in the RAAL Lab Laboratory, and your answers to the survey, could you better detail the changes (in programming, practices, tools etc.) that your organization achieved?
2. Following your participation (or the participation of your organization) in the RAAL, what are the main success factors that led to operational or programmatic changes towards disability inclusion in your organization?
3. Following your participation in the RAAL Lab, what are the main challenges you faced within your organization regarding programmatic changes towards disability inclusion in your organization? (at individual level + organizational challenges).

Concrete examples can be listed if needed. Non-exhaustive list: lack of time, lack of buy-in, lack of human resources, lack of financial resources, lack of technical expertise, lack of institutional support; lack of opportunities to apply knowledge

4. What about the RAAL methodology prompted you to change your tools or programming practices?
5. In the event of KII or FGD involving people that attended the RAAL Laboratory with a colleague: After your participation in the RAAL Lab, how do you and your colleague work together (or not) on the topic in your organization?

### 4.4.4 Step 4: Analysis, report drafting and sharing

Following the interview, the team will have to conduct the analysis and draft a report.

It is recommended to teams to identify all the relevant opportunities, in their context, to share that information (to cluster members, through technical support mechanisms, internally with other projects etc.).

When a good practice is identified, it can be further documented by the team to be the subject of an in-depth case study. This is to support addressing the lack of evidence in the disability inclusive humanitarian action field. The following template can be used to collect a case study:

### Good practice collection form

[Title of the good practice]

[Organisation name, Name of programme, Name of project, Year]

- Name, location and duration of the project
- General objective of the project and expected results
- Specific objective and expected results in relation to the good practice
- What particular aspect of the project does this good practice address?
- Name of the person in charge of the sheet
- Name of the contributors to the sheet

#### 1. What is the context?

- Specify the context of the practice (situation, stakeholders involved...), and describe the project component concerned.
- NB: In the case of a collection of several practices in particular, it is not necessary to put in more details, as usually an introduction presents the project in a global way (country context, name of the project, location, duration, stakeholders involved, overall objective of the project and main expected results, etc).

#### 2. What happened?

- Describe the practice, what it consisted of (key steps), how the good practice was developed.

#### 3. What did the practice change?

- Describe the most significant changes that have occurred as a result of the practice.

#### 4. What were key influencing factors or drivers for change?

- Explain the factors that facilitated the practice and the occurrence of these changes, the causal links, and which ultimately make it possible to say that it is a good practice. Explain which challenges if any were overcome.



### 5. Recommendations

- What would you recommend to facilitate the replication of this good practice? (Recommend to colleagues, other organisations, OPDs etc.)
- Are there any points to be particularly mindful of?

### 6. The point of view of...

- Testimonies of stakeholders (beneficiaries, partners, project team) to be disseminated throughout the good practice

### 7. Picture

- High quality picture (with photo credits, alternative text, and consent forms if persons are appearing on the picture).

## 4.5 Annex 5: List of survey templates

- Application form
- Pre and post assessments forms
- Participant evaluation form
- Facilitator and co-facilitator Feedback form
- 3-6 months post RAAL Lab follow-up survey

This practical guide provides information on how to complement and combine training sessions on disability-inclusive programming with interactive laboratory style learning sessions, the Review, Adapt, and Action Learning Laboratories (RAAL Labs). RAAL Labs have proven to further boost humanitarian actors' confidence and skills to adapt their own programming tools and processes, aligning them with the IASC Guidelines.

This guidance was developed by people with experience facilitating training sessions and the RAAL Labs. It was tested and refined in South Sudan, Somalia & Somaliland, Uganda and the Syrian response contexts by HI technical teams and local OPD co-facilitators. The intended target group are technical and/or program staff who facilitate engaging learning opportunities for and with their teams with the objective to enhance skills, understanding and confidence around disability-inclusion in their humanitarian programming.

Examples of tried and tested methods can be found throughout the guide coupled with essential information that is required to plan and implement a RAAL Lab. In the annexes, you will find links and further practical resources, such as more in-depth details on topics covered and templates that can be used and adapted according to your needs and context.

**Contact us at [inclusion@hi.org](mailto:inclusion@hi.org).**