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A Gradual Process of Transformation

What we can learn, replicate and scale from the World Food Programme and Humanity & Inclusion's pilot project on including persons with disabilities in food security and livelihood programming in Western Equatoria, South Sudan

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Cover photo

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Description: In 2017, Lina came to the refugee camp in Juba with her children, where she received a wheelchair from HI. She receives support from her neighbours and is selling food to earn money.

Key words

Disability; disability inclusion; inclusive humanitarian action; must do actions;

IASC Guidelines; food (in-)security; livelihood; partnership; capacity

development; technical support; training; South Sudan; Yambio;

Western Equatoria

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Abbreviations

B&E	Barriers and enablers
CP	Cooperating partner
FFA	Food Assistance for Assets
HI	Handicap International – Humanity & Inclusion
IASC	Inter-Agency Standing Committee
WFP	World Food Programme
WGQ	Washington Group Set of Questions



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Description: Focus group discussion with community leaders in Yambio.

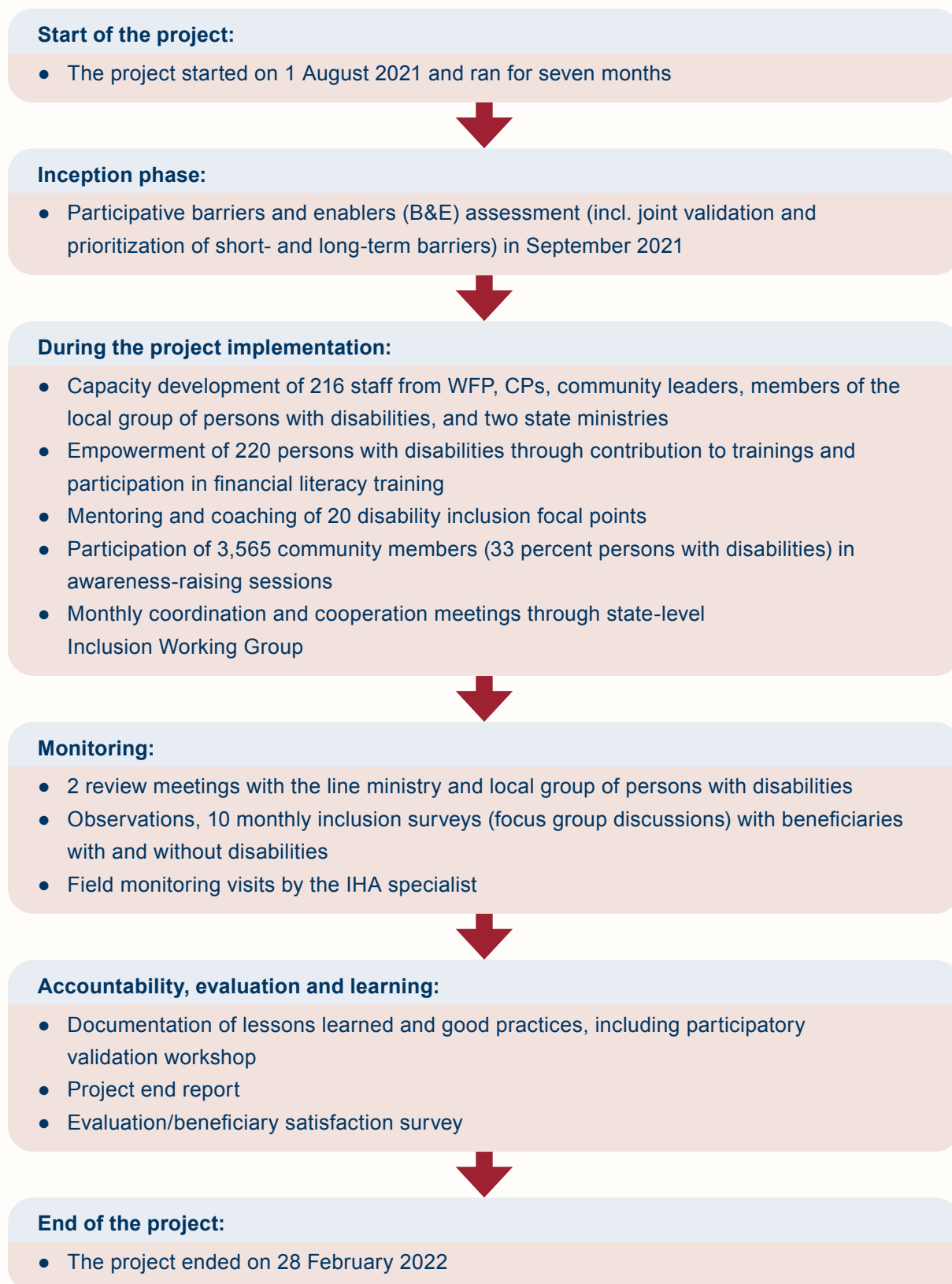
1. Introduction

In recent years, including persons with disabilities in humanitarian action has become a more widely acknowledged commitment among humanitarian actors with the development and launch of the Inter-Agency Standing Committee (IASC) Guidelines: Inclusion of Persons with Disabilities in Humanitarian Action (also referred to below as the IASC Guidelines). Partnerships between mainstream humanitarian actors who want to become more inclusive, and disability-focused organizations that have recognized expertise to share, became more common.

In Western Equatoria, South Sudan, Humanity & Inclusion (HI) and the World Food Programme (WFP) have collaborated to implement a seven-month pilot project to strengthen inclusion and meaningful participation of persons with disabilities in WFP, and the food security and livelihood programmes of cooperating partners (CPs).

At the beginning of the project, a participatory assessment was conducted to identify barriers, enablers, opportunities and entry points to inform subsequent project activities. The project provided capacity development opportunities to WFP, CPs, individuals with disabilities and members of the Union of Persons with Disabilities Yambio, i.e. the local group of persons with disabilities, two state ministries, i.e. the State Ministry of Agriculture and the State Ministry of Gender, Child and Social Welfare, and the community and community leaders in Yambio, Western Equatoria. At the end of the seven-month project, promising practices and lessons learned were documented, in order to continue with those activities and promising actions.

The following graphic shows the timeline of the project with key activities at the beginning, during and end of the project.

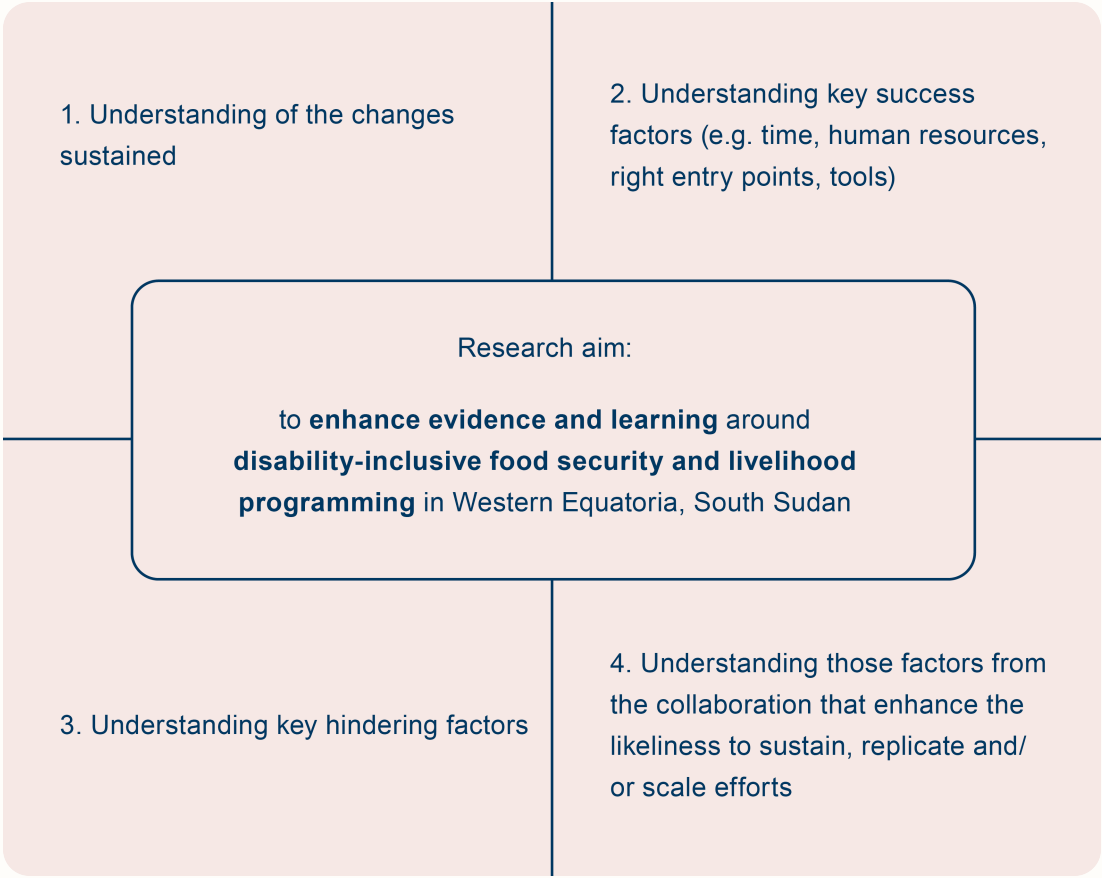


Further research was needed to better understand success and hindering factors that ensured the sustainability of changes, and can foster replication in another context or scaling in the same context.

2. Research aim and objectives

The aim of the case study was to enhance evidence and learning around disability-inclusive food security and livelihood programming in Yambio, Western Equatoria, South Sudan. The research had four objectives, highlighted in Figure 1.

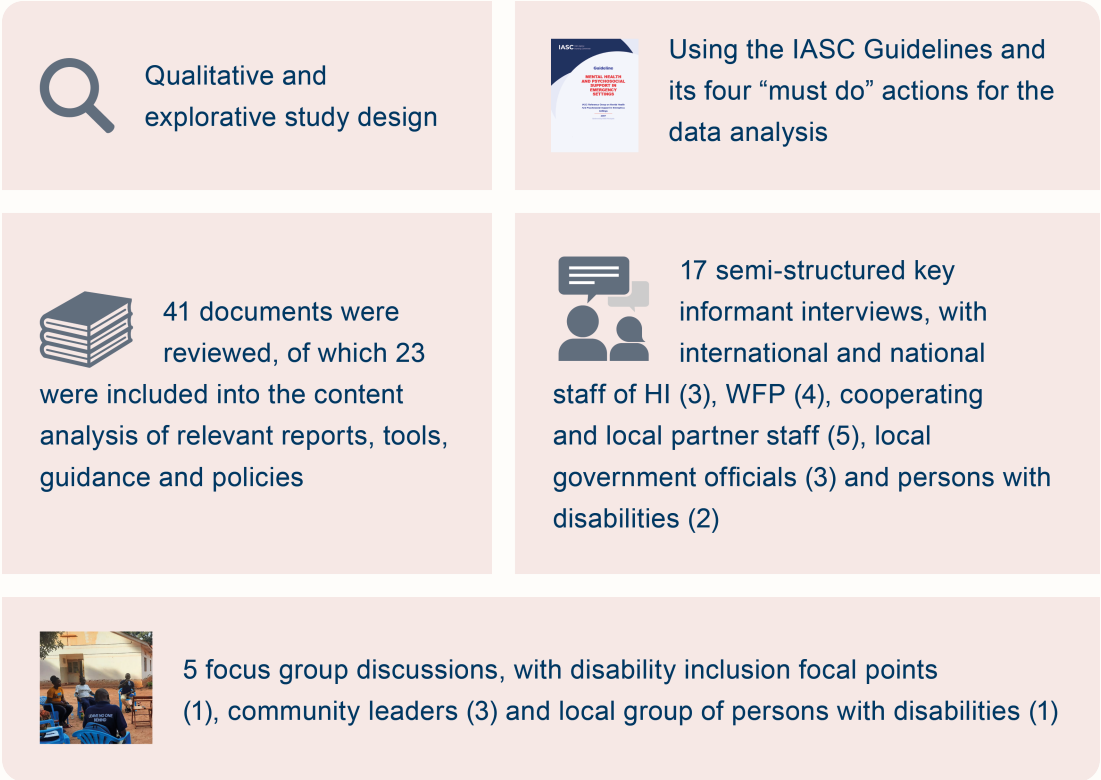
Figure 1. Research aim and objectives



3. Overview of methodology

The study is based on primary and secondary data. The researcher started with a review of secondary data to obtain background information and prepare for the collection of primary data. Selected documents were included in the content analysis. The content analysis helped to better understand how the inclusion of persons with disabilities is reflected in key organizational and/or context-specific policies, strategies and guidance documents in line with the IASC Guidelines. Information from the content analysis was also used to triangulate information from the key informant interviews and focus group discussions. The primary data were mainly analysed deductively based on the four “must do” actions and the success and hindering factors, which were divided into collaborative, institutional and contextual factors.

Figure 2. Research methodology



4. Key findings

The seven-month pilot project laid the foundation for the gradual inclusion of persons with disabilities in food security and livelihood programmes in Yambio, Western Equatoria.

Project followed the four “must do” actions

The project itself followed the four actions recommended in the IASC *Guidelines: Inclusion of Persons with Disabilities in Humanitarian Action*. According to the IASC Guidelines, there are four key approaches to programming that should be considered by all humanitarian actors, regardless of context and sector (IASC, 2019):

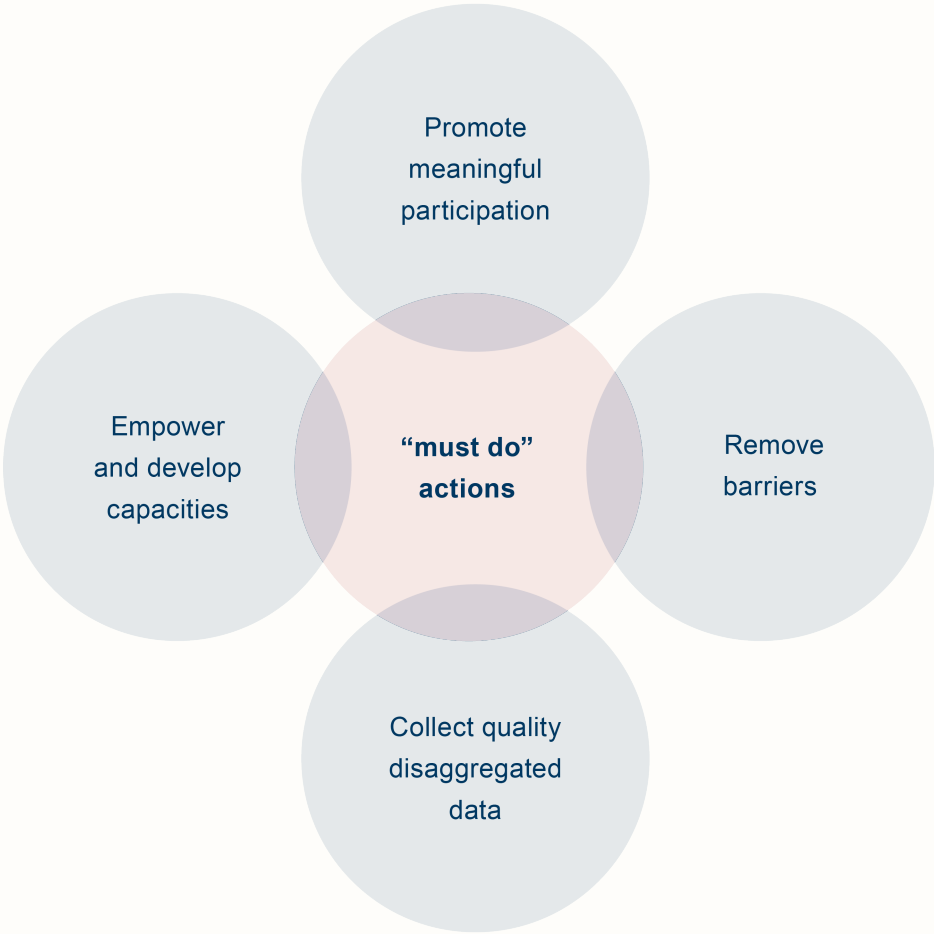
- **Promoting meaningful participation**, i.e. participation of persons with disabilities in humanitarian decision making that affects them, as a right and in their capacity to contribute as a key actor.
- **Remove barriers**, i.e. address risks by removing attitudinal, environmental (communication and physical) and institutional barriers.
- **Empower persons with disabilities** and support them and other humanitarian actors to **develop their capacities** on the rights and capacities of persons with disabilities, for example through trainings, sensitization sessions or technical advice.
- **Disaggregate data on disability for monitoring inclusion**, i.e. collect information on risks, barriers, disability-specific requirements, enablers and capacities, to plan, implement and monitor humanitarian projects accordingly.



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Description: Angelina is living in the refugee camp in Juba, where she attends the counselling sessions run by HI. She makes traditional jewellery and sells it in the camp to earn some money.

Figure 3. “Must do” actions from the IASC Guidelines



The participatory B&E assessment was a key success factor

The B&E assessment at the beginning of the project was a key success factor to jointly design, implement, monitor, evaluate and learn from the project activities. Barriers, enablers, capacities and entry points and opportunities were identified in a participatory way together with key project stakeholders.

A number of promising practices were sustained

Many of the actions and promising practices initiated during the project were continued, or had an impact on the activities carried out after the end of the project, some of which are presented below.

4.1 Meaningful participation

The B&E assessment found that persons with disabilities were not involved, or not sufficiently involved, in decision making. However, some of the partners had included persons with disabilities already in their mainstream programmes. For example, the participation of two persons with visual impairment was ensured in the Food Assistance for Assets (FFA) programme.

Under the project, persons with disabilities actively contributed to activities, for example as co-facilitators for awareness-raising sessions, enumerators for the B&E assessment, and project staff.

After the project, persons with disabilities or households with members with disabilities continued to participate in the FFA programmes. In addition, persons with disabilities actively participated in meetings with humanitarian food security and livelihood actors, or took an active role in the project management committee, where two out of ten seats are now reserved for persons with disabilities. Persons with disabilities in the community also participated in community consultations or dispute resolution.

Barrier example	Enabler example	Within the project	After the project
57 percent of respondents with disabilities said they are “never/not at all consulted” about any type of decision making process regarding services, while 23 percent indicated they are “sometimes involved” (HI, 2021, p. 17)	Some of the partners have integrated programmes for persons with disabilities into their mainstream programmes (HI, 2021, p. 21)	Meaningful participation as co-facilitators, enumerators and project staff	In meetings, consultations with the community, trainings, project management committees, FFA programmes

4.2 Removal of barriers

As described above, there are different types of barriers that hinder access to services for persons with disabilities. While the B&E assessment revealed that most persons with disabilities do not have access to these services, stakeholders were willing to work together to improve the inclusion of persons with disabilities in their programmes. The B&E assessment provided an opportunity to collectively understand and prioritize which barriers need to be addressed in the short term, i.e. during the project, and which need to be addressed in the longer term, i.e. after the project.

After the end of the project, key informants reported that attitudinal, environmental and institutional barriers continue to be dismantled by the different actors.

For example:

- **Stigmatization and discrimination continue to decrease** at community and (non-) state actor level.
- **Agricultural tools have been adapted** to the needs of persons with disabilities to ensure they can work with them.
- **Information continues to be shared through different communication and feedback channels**, e.g. by community leaders who are sensitized.
- The Ministry of Agriculture reviewed **their seed distribution guide** together with members of the State Food Security and Livelihoods Cluster, to make it more inclusive of persons with disabilities.

Barrier example	Enabler example	Within the project	After the project
64 percent of persons with disabilities reported that they were unable to access basic services, and attributed this mainly to lack of information and physical barriers (HI, 2021, p. 12)	“There is a willingness of stakeholders to work together to enhance inclusion” (HI, 2021, p. 22)	Removal of barriers through identification, understanding and prioritization of these at the start of the project	Decrease of stigmatization at community, (non-)state actor level; improved information-sharing and adaptation of agricultural tools; revision of guidance note

4.3 Empowerment and capacity development of humanitarian stakeholders, including persons with disabilities

In the B&E assessment, it was found that discrimination and stigmatization are addressed in some trainings. However, there are more opportunities to mainstream disability inclusion in other trainings, such as the quarterly trainings for cooperation partners conducted by WFP.

Due to the limited understanding of the rights of persons with disabilities by the (humanitarian) community, and persons with disabilities themselves, the project’s priority was to provide different types of capacity building activities, and empower persons with disabilities.

Among other activities, the project offered:

- **introductory trainings on disability-inclusive humanitarian action**, and basic sign language, for WFP, CPs, community leaders, members of the local group of persons with disabilities and state ministries;
- **training, mentoring and coaching for disability inclusion focal points**;
- **community awareness sessions for community members**, including persons with disabilities; and
- **financial literacy training** for persons with disabilities.

During and after the project, the disability inclusion focal points shared their knowledge within their organization. For example, they provided guidance on the employment of persons with disabilities in their organization, put the topic of the inclusion of persons with disabilities on the agenda of meetings, or acted as focal points during food distribution. Persons with disabilities increased their confidence to inform and further sensitize other persons with disabilities and the (humanitarian) community about the rights of persons with disabilities, although limited funding made it difficult to continue awareness-raising events on a wider scale.

Barrier example	Enabler example	Within the project	After the project
Limited understanding on the rights of persons with disabilities, either by family members, or by programme implementers and community leaders and focal persons (HI, 2021, p. 19)	“Discrimination and stigma is already covered in some trainings and capacity development activities” (HI, 2021, p. 21)	<p>Capacity development (training, technical support, awareness) of different actors</p> <p>Empowerment of persons with disabilities to know their own rights</p>	Sharing knowledge within own organization through disability inclusion focal points Confidence to inform other persons with disabilities about their rights, and continuation of community sessions

4.4 Quality disaggregated data

While some of the CPs noted that they ask their beneficiaries if they felt discriminated against or unsafe during post-distribution monitoring, the data is only disaggregated by gender, not by disability. The project was unable to go beyond an introduction to quality disaggregated data to ensure that CPs would consistently use the recommended Washington Group Set of Questions (WGQs).

Nevertheless, the project itself provided good practice by conducting a B&E assessment at the outset, using the WGQs to identify individuals with different types of functional difficulties. Those

identified were interviewed to obtain more qualitative information about the barriers they face, the facilitating factors that would enable their equal participation in activities and their capacities.

The project also monitored the inclusion of persons with disabilities in the project through monthly feedback sessions. Lastly, there was a strong focus on inter-agency learning, for instance by collecting lessons learned and good practices after the fact.

After the project, respondents reported better identification of persons with visual, physical and hearing disabilities, even if this was through observation of their appearance, and of persons with psychosocial disabilities through their behaviour. Increased representation of persons with disabilities on project management committees and awareness raising among community leaders has improved, and is likely to continue to improve, monitoring of food access for persons with disabilities.

Barrier example	Enabler example	Within the project	After the project
“Most data available is disaggregated by gender but not by disability and partners do not use Washington Group Sets of Questions in data collection” (HI, 2021, p. 20)	“It was noted amongst some of the partners that during Post Distribution Monitoring, partners ask if beneficiaries felt discriminated, safe, mistreated, etc.” (HI, 2021, p. 21)	Data collection to identify barriers, enablers, capacities throughout the project (B&E assessment, monthly feedback meetings, lessons learned/good practice report)	Improved identification (through observation) and registration Project management committees monitoring access to food

5. Conclusion

The seven-month pilot project contributed and continues to contribute to increasing the meaningful participation of persons with disabilities and their access to food security and livelihood opportunities in Yambio, Western Equatoria.

The project was in itself an example of good practice, following the four “must do” actions recommended in the IASC *Guidelines: Inclusion of Persons with Disabilities in Humanitarian Action*. This encouraged their further application by all actors involved in the project. The scope and duration of the project enabled the HI, WFP, CPs, two state ministries, community leaders and the local group of persons with disabilities to work together on the short-term barriers they had identified at the beginning of the project. However, more time, and financial and human resources, are needed to address longer-term barriers.

6. Key recommendations

The following are the key recommendations from the key informant respondents, focus group discussion participants and the researcher's reflections. The recommendations were divided into collaborative, institutional, contextual and the four "must do" actions.

6.1 Replicating the project in a different context

The following are recommendations that can be considered if the project or a similar project is to be implemented in another region of South Sudan, or even in another East African country.

6.1.1 Collaborative factors

- Build the **project on an existing partnership**, and use each other's expertise in a complementary way.
- Ensure **joint ownership** of the project through a joint proposal writing process.
- Use the **Disability Inclusion Working Group as a forum** to exchange ideas, encourage peer learning, plan joint events and generate advocacy messages.

6.1.2 Institutional factors

- Ensure **senior management buy-in** (at country, regional and/or headquarters level).

6.1.3 Contextual factors

- Consider **contextual factors** that may positively influence or prevent a positive project outcome, such as **social cohesion, trust and acceptance within the community**, and how frequent emergencies may affect reprioritization of activities.

6.1.4 Meaningful participation

- Ensure **meaningful participation** of persons with disabilities **as active contributors, throughout the project**.
- **Identify (in)formal groups** that are interested and have the capacity to be engaged.

6.1.5 Removal of barriers

- Ensure that the **project activities are inclusive and accessible** for project staff and those benefiting from the project.
- Provide **sensitization sessions to decrease stigmatization and discrimination**.

6.1.6 Empowerment and capacity development

- **Train persons with disabilities on their rights and any other necessary skills** to engage in the project activities actively and effectively.
- Train a **pool of disability inclusion focal points** to support and guide their own organizations.
- Ensure that **training and one-to-one technical support** follows a **participatory and tailored approach** to achieve maximum impact and ownership.
- **Enable inter-agency peer exchange and learning**, and share promising practices across the region for broader learning.

6.1.7 Disaggregate data for monitoring inclusion

- Conduct a **joint B&E assessment** at the beginning of the project, **regular feedback meetings** during the project and identify **promising practices and lessons learned** at the end of project.

6.2 Scaling and improving the project in the same context

The research report also includes several recommendations for the continuation and expansion of the project in a second project phase in Yambio, Western Equatoria, including recommendations that could further improve the project.

6.2.1 Collaborative factors

- Improve the **timing of the project**, aligning it to the project or funding cycle, and, if possible, **extending the time frame to two to three years to address more long-term barriers**.
- **Detail the next steps in an action plan** to ensure a continuity of activities after the project's completion, for example **ensuring a continuity of coordination mechanisms** by connecting it to existing mechanisms.

6.2.2 Institutional factors

- **Share results** of this project **with senior management** to secure more funding for disability inclusion, including for other locations.
- **Learn from and use the best practices** continuously.
- Consider **how to maintain knowledge management** through disability inclusion focal points, despite staff turnover.

6.2.3 Contextual factors

- Consider the **capacities and responsibilities of state ministries** on **data collection** and **policy implementation**.

6.2.4 Meaningful participation

- **Consider the representation of persons with different disabilities, and of different gender, age, and socioeconomic and displacement status**, when consulting the community.
- Increase the **representation of persons with psychosocial and intellectual disabilities**, and of different ages and gender.

6.2.5 Removal of barriers

- **Collaborate** with persons with different disabilities and representative organizations to **improve accessibility and reasonable accommodation**.
- **Further improve access to and availability of income-generating activities** for men and women with different disabilities.

6.2.6 Empowerment and capacity development

- Support the **local group of persons with disabilities** in **accessing resources to continue** some of the activities.
- **Expand (community) awareness sessions**, including to more rural areas.
- **Use examples from ongoing projects to run activities** for group work in **trainings**, and **link trainings with a process to review and adapt existing tools, guidance or policies** based on the four “must do” actions of the IASC Guidelines.
- **Conduct follow-up sessions** and **cover intersectionality** (gender, age and disability) in greater depth.

6.2.7 Disaggregated data for monitoring inclusion

- **Set up a working group or task force on data coordination**, to identify and use existing data sets, and learn from other data-collection efforts.
- **Strengthen data collection** using the WGQs and B&E assessments.

References

Humanity & Inclusion (2021). *Disability Inclusion Assessment: Yambio. A Report on Barriers and Facilitators in Accessing Food and Livelihood Opportunities for Persons with Disabilities Yambio*. Juba: Humanity & Inclusion and World Food Programme.

Inter-Agency Standing Committee (2019). *Guidelines: Inclusion of Persons with Disabilities in Humanitarian Action*. Geneva.



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Description: Focus group discussion with community leaders in Yambio.

