

## Transformational Investment Capacity (TIC) Concept Note / Application Form

Please submit the completed form to [TIC@msf.org](mailto:TIC@msf.org).  
For further information, visit: [msf-transformation.org](http://msf-transformation.org).

TIC Idea Title: Inclusion of Persons with Disabilities in MSF Date: 18<sup>th</sup> October 2017

Submitter Name and Group: Patrice Vastel & Kyrre Lind /OCB MSF Affiliation: MSF Norway

Budget requested Euro 244.529 Project Length (months/years): 18 Months

Idea Category:  HR/Learning  Operations/IT  **Medical R&D**  Other (describe category)

Idea Type:  Large-Scale Project (> €250,000)  **Incubator** (< €250,000)

*Incubator Idea:* Sponsoring Board (OC/partner section): **OCB & MSF Norway** Sponsor Name: Bertrand DRAGUEZ (OCB) & Karine NORDSTRAND (MSF-Norway)

*Large-Scale Project:* Sponsoring OC: \_\_\_\_\_ Sponsor Name: \_\_\_\_\_ Supporting OC: \_\_\_\_\_

### Problem Statement / Need (clearly articulate the challenge / issue to be addressed)

#### Overall ambition of the project proposal

The overall ambition and vision of the project proposed is **to contribute to ensure MSF becomes (is transformed into) an organization inclusive of persons with disabilities in its structure and its action**. The project intends to play an important role as an eye-opener on the risk of exclusion of persons with disabilities. As a natural consequence the project will contribute to more generally develop in the movement a spirit of inclusion and of acceptance of our diversity.

We see inclusion of persons with disabilities<sup>1</sup> (PWDs) as a very relevant point of entrance on the road to inclusion. Defining clearly a target group (persons with disabilities) helps to develop concrete practical actions and makes inclusion a reality which goes much further than a policy or a good will.

#### Inclusion of PWDs - General situation

Around 15% of the world's population, or estimated 1 billion people, live with disabilities (source 2011 WHO World report on disability). They are often among the most marginalized of the poor. However, disabled persons are rarely or seldom included in development or humanitarian projects.

The report 2014 from Handicap international and Helpage, "Hidden victims of the Syrian crisis"<sup>2</sup> showed that 22.4 % of the surveyed Syrian refugees in Jordan and Lebanon had an impairment. Moreover, about 30% of these refugees were identified as having specific needs (related to disabilities, chronic disease and injuries; 77% of older refugees being affected by these.)

If a few organizations have traditionally been focusing on persons with disabilities (CBM, Light for the world, Handicap international ...), the general concern for inclusion of persons with disabilities is relatively recent. As

<sup>1</sup> "persons with disabilities" is a large and diverse group. From the UN convention of the Rights of persons with disabilities, "persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others." We do not want to exclude a priori any specific group. Various groups will benefit of various measures. Universal design will particularly benefit to persons with physical disabilities, using systematic two ways of communicating (audio & visual) is benefiting persons with hearing and visual impairments, using "easy-to-read" documents benefits persons with intellectual disabilities, a group particularly victim of sexual violence and which should not be forgotten in our HIV/AIDS programs.

<sup>2</sup> <http://www.helpage.org/newsroom/latest-news/hidden-victims-new-research-on-older-disabled-and-injured-syrian-refugees>

a milestone, the UN convention on the rights of persons with disabilities (UNCRPD), result of the lobby of organizations of persons with disabilities, entered into force in May 2008.

The concern is even more recent in the humanitarian arena (compared with development aid). However, some efforts have already been made in the humanitarian field by other organizations that MSF should be aware of and get inspired by.

See on this point our *“Appendix 1 - Humanitarian NGOs and Inclusion PWDs”*

#### Inclusion in MSF

**People with disabilities are among the most vulnerable groups in many places where we work but, to our knowledge (from our contacts with the operations and feedbacks from expatriates in the field), they are hardly on the radar of our teams as a group of particular concern.** Persons with disabilities are at risk of being excluded from our projects for various reasons: they are often invisible, hidden or have difficulties to access our facilities and services. However little is done in our projects to ensure that persons with disabilities are NOT excluded from our beneficiaries, which ultimately hampers our humanitarian identity and impartiality.

As practical examples, there is no systematic mechanism to identify persons with disabilities in our evaluations, no systematic concern in our awareness campaigns to reach persons with disabilities, no discussion with organizations of persons with disabilities in our projects, no policy to promote recruitment of persons with disabilities where/when possible in our staff.

On the other hand, we have been made aware that Universal Design was used in the construction of our Prefab hospitals. In addition, a project in Swaziland includes sign language course for patients affected by the side effect of MDR-TB treatment. Taking the opportunity of the MSF OCB Field Opportunity Envelope 2017, the project in Haiti (Tabarre Hospital) distributed wheelchairs adapted to the environment. There may be other punctual initiatives in MSF which would benefit to be better known but nobody has the overview.

#### A step ahead: the motion 2016 on inclusion

A motion on inclusion of persons with disabilities was passed at the Nordic General Assembly 2016, the OCB gathering 2016 and the IGA 2016 and received the strong support of a large majority in these platforms, demonstrating that there is little doubt in the movement about the need for MSF to improve its work on inclusion. See on this point our *“Appendix 2 - MSF and the motion on Inclusion of PWDs”*

**However, since then not much has been done in MSF to implement the motion. It is our understanding that operations have difficulties to pick-up, prioritize and implement the issue of inclusion of persons with disabilities. This is partly due to lack of knowledge on how to do it and partly due to lack of prioritization of the issue.**

#### **Proposal Description: Idea or Solution** (idea, business case, prototype, other)

This proposal for TIC incubator is about implementing actions for better inclusion of persons (Children, adults and older people) with disabilities in MSF and particularly ensure that MSF personnel is aware of this risk of exclusion, is able to raise awareness on inclusion and develops knowledge on how to make inclusion a reality in MSF.

Inclusion is not difficult, nor highly resource demanding. Simple actions make a difference, typically:

- Raising awareness on the risk of exclusion of persons with disabilities among our staff,
- Develop dialogue with local organizations of persons with disabilities where/when possible. They can give us valuable feedback on accessibility and use of our services (which is also valuable for our accountability towards beneficiaries)

- Take in account accessibility to persons with disabilities through using universal design in the building of our facilities and using two ways of communicating (visual and oral) in our campaigns and communication materials.

In a field perspective, the motion is not meant for MSF to create vertical projects specifically targeting people with disabilities. It is about ensuring that persons with disabilities are not excluded from our existing and future projects.

Finally, to support the implementation at field level, it is advisable to have a good level of awareness at all levels of the management line of the operations and in a general manner at Headquarter level.

The transformational model we propose relies on the following elements:

### **1<sup>st</sup> Step (Incubator project – Step covered by the current proposal)**

#### **Preliminary comments:**

-Persons with disabilities will be included from the beginning of the project to ensure our web<sup>3</sup>, videos and materials are accessible to persons with disabilities and in a general manner accessibility is considered throughout the project.

-Materials will be primarily produced in English. They will be translated in various languages key for the organizations along the way and based on needs.

**Component 1:** Initial set-up of a HUB of resource persons on inclusion, centralised in Norway. This group takes initial responsibility and commits to boost inclusion in MSF movement. This implies the mapping of internal resource persons on inclusion.

**Component 2:** Early set-up of a portal which will be the cornerstone of the project. (Sharepoint will be considered). This web portal will be in continuous development and will present in an highly inclusive format:

- Short guideline on inclusion

- Resources available on inclusion & contacts

- Possibility for followers/supporters to register and subscribe to a newsletter to create quickly a base of followers/supporters to the issue of inclusion.

- Webinars to invite external experts to bring awareness & knowledge on inclusion

- Online trainings for field and Headquarters

- Videos on awareness-raising and good practices (external & internal MSF) – Specific and recognized expertise of the Norwegian office in video production will be used there – First video on awareness-raising available for website opening.

- Gathering and sharing of good practices

**Component 3:** The HUB will initiate and maintain a network of Disabled people organizations and NGOs to ensure exchange of information. Promising preliminary contacts have been established with IFRC, Light for the world and Norwegian disability actors. We already foresee also contacts with Handicap international, CBM, UNICEF and the International Disability Alliance (IDA) among others.

**Component 4:** The HUB will facilitate contact between our projects in the field and disabled people organizations (DPOs). We will use to this end our network described in component 3 which will facilitate the identification of the most relevant DPOs.

---

<sup>3</sup> Reference there is the Web Content Accessibility Guidelines (WCAG) 2.0 - <http://www.w3.org/TR/WCAG20/>

**Component 5:** Face-to-face trainings in Headquarters and field for national & international staff will reinforce interest, knowledge, motivation and awareness in specific sections/OCs and feed our online training.

**Component 6:** Evaluation & presentation of results. Development by the HUB of a set of recommendations for next steps. Development if relevant of a large-scale TIC project.

### **Monitoring and evaluation**

Beside keeping track and capitalizing the outputs (Number of persons trained, Number of trainings & webinars...), we foresee the following indicators when it comes to outcomes:

- Number of Visitors and use of the portal/Website
- Number of followers (of our newsletter)
- Number of viewers (videos)
- Number of projects having integrated concerns for inclusion and sharing experience (and content of the experience-sharing)

### **2<sup>nd</sup> Step (Large-scale project –Eventual continuation of the present incubator)**

The large-scale project will mainly be defined on the basis of the results obtained through the incubator. If the above components 1-5 prove to be successful, they may be kept, adjusted or further developed in a large-scale project. Additionally, a large-scale project should also consider:

**Component 7:** Creation of a network of focal points on inclusion across the MSF movements. Preference given to Persons with disabilities. These focal points will be highly trained on inclusion (ToT)

**Component 8:** Integration of inclusion materials within the standard MSF Information (Guidelines, Webpages, intranet, Mobile APPs...) and training structures.

We will have also to investigate along the project how disaggregated data per gender, age group and disability are and can be collected and exploited and define a strategy.

### **Description of Benefits (impact of project success; what would success look like if the idea is scaled across MSF)**

In general the project will have, for our international & national staff, played a role of mind-opener on the diversity of our staff and beneficiaries. It will have contributed to develop a spirit of inclusion as a humanitarian evidence.

#### **At field level:**

- More staff will be aware of the risk of exclusion of persons with disabilities and will actively support their inclusion while having developed inclusion in general as a value
- More projects will be inclusive of persons with disabilities, i.e.:
  - People with disabilities as a specific vulnerable group is included in our needs assessment,
  - Contacts have been established with Disabled People Organizations,
  - Our premises are accessible to persons with disabilities
  - Where/When possible, we promote and consider recruitment of Persons with disabilities as national staff and expatriates to contribute to our knowledge through diversity.
  - Our communication (incl. health promotion activities) takes in account persons with disabilities.

#### **At Headquarter level:**

Raising awareness at HQ level will lead to:

- More staff aware of the risk of exclusion of persons with disabilities and therefore actively supporting inclusion and having more generally developed inclusion as a value
- Our offices more accessible for persons with disabilities.
- Our recruitment procedures open to persons with disabilities in our Headquarter like in our field work (Where beneficial & wished, the project can also support the development of policies)

**Alignment with Strategic Objectives** (link to MSF, OC and/or partner section objectives)

The project is the direct continuation of the motion on inclusion of Persons with Disabilities (PWDs) supported by the Nordic GA, the OCB gathering and the IGA in 2016.

Diversity and inclusion were also very high on the agenda at IGA 2017 with the two following related issues:

- 1) Following a series of motions from different GAs (USA, Norway, Sweden ..), behavioral issues are getting high on the agenda and OCG is working on a plan of action to be brought to IDRH.
- 2) Following the “2017 IGA statement on diversity and inclusion”, the IB took the initiative of creating a sub-committee to steer an executive taskforce on the issue of diversity and inclusion.

To mention that this sub-committee has been formally informed of the current TIC proposal and received copy of our work to be included in their overview. (Contact with Yvan Legris on 13.09.2017)

The working group on behavioral issues has also been made aware of this proposal (F2F Discussion & e-mails with Francoise Duroch on 08.09.2017)

The OCB is supportive to the present proposal as a logical development of the support by the OCB gathering of the motion on inclusion of PWDs in MSF. Its president, Bertrand Draguez took a clear stand on this.

Inclusion of persons with disabilities is also part of the mapping of support activities MSF-Norway can provide and is offering to the movement on the basis of its Norwegian network of expertise in the domain. On this point, we have to keep in mind the important added-value in having this support activity driven by a partner section in collaboration with OCs. Partner sections have traditionally a more movement-wide concern and are less influenced by a single OC perspective. Partner sections, having some distance with the daily priorities of the operations are also more able to keep focus and continuity in this type of support activities.

**Finally to remind that concerns for persons with disabilities bring automatically in practice concerns for elderly<sup>4</sup>, that there is a strong gender perspective within the issue of inclusion of persons with disabilities (Women/Girls with disabilities are often victim of a double segregation of being a woman/girl and having impairment.) and that our concerns here influence ultimately inclusion in a broad sense (gender, disability, sexual identity and orientation, socio-economic background, ethnic origins ...)**

**Project Team Overview** (who will develop the idea; if large-scale project, who is the team/Steering Committee)

Project Supervision: The project will fall under the overall supervision of the Head of Program Support Department in MSF Norway and work in close collaboration with OCB and operational centers.

Project Team: One project coordinator with expertise of the issue of inclusion in the humanitarian field, coordinating a group of technical support resource persons identified in MSF.

**Additional Resources Required** (types of people/skills/expertise required (internal MSF, external))

Internal MSF:

The Norwegian office of MSF will be hosting the project coordinator and provide the needed environment: IT& logistic, administration, finance and HR. The communication department of MSF Norway will be supporting the project (Website, production of videos & materials). Particularly the Norwegian office of MSF

<sup>4</sup> Regarding concerns for older people in humanitarian settings, see the article: Karunakara U, Stevenson F (2012) Ending Neglect of Older People in the Response to Humanitarian Emergencies. PLoS Med 9(12): e1001357. doi:10.1371/journal.pmed.1001357

has developed a strong and recognized expertise on production of videos. (See for instance <https://www.youtube.com/watch?v=-8S6Vg0STxc> - This example is in Norwegian with text in English or French – we will of course produce our materials in English as a start with possibilities of text in a diversity of languages)

**External MSF:**

We will use external support from specialised organizations:

- In Norway, the Organizations of the Atlas Alliance specialized on inclusion of persons with disabilities
- Internationally, Light for the World is an interesting source of expertise when it comes to high level trainings. Other organizations will be contacted in order to know their interest and willingness to contribute.
- We have particularly good opportunities for collaboration with the Red Cross as our field of intervention are similar and the Red Cross & Red Crescent movement passed a resolution on inclusion in November 2013.

Preliminary contacts have been established both with IFRC and Light for the world.

- UNICEF, CBM and Handicap International are also organizations of potential interest and the OCB has developed punctual collaborations with handicap International.
- International external experts and researchers will also be contacted and some have already been identified (See for instance for webinars: Ivan Kelman, <http://www.palgrave.com/us/book/9781137485991>)
- In project countries, we will link Disabled People Organizations (DPOs) with our projects. These DPOs are particularly valuable when it comes to getting feedbacks, assessment of our services and eventually trainings. Some DPOs proved their reliability and have partnerships with international and Norwegian NGOs we are in contact with. These NGOs will therefore be able to facilitate the connection between their partner DPOs and our projects.

**Key Stakeholders** (individuals, groups or organizations that may be impacted or may impact the project)

The OCB Board and MSF Norway board are the sponsors for the project. Through a portal approach, the project targets the movement as a whole, field and headquarters.  
MSF-Norway program support department and office are ready to play their role in supporting the project as described above.  
We foresee that IFRC will be a valuable partner along the project for experience sharing.

**Considerations in Scaling** (partnerships, intellectual property, contracts, other)

The overall incubator project will be evaluated in its last phase to conclude on its impact and provide recommendations regarding the way forward. The results of evaluation will be part of a potential full-scale project proposal.

**Cost Breakdown** (what will the investment funds be used for, budget, expected expenses)

	Total in NOK	Total in Euro
TOTAL Personal Cost	1 725 000	184 230
TOTAL Training costs in HQ	210 800	22 513
TOTAL Training cost in the field	250 800	26 785
TOTAL documents, Printing & seminar	103 000	11 000
<b>TOTAL</b>	<b>2 289 600</b>	<b>244 529</b>

**High Level Timing / Major Milestones** (at least every 6 months, e.g. months 1 to 4; months 5 to 9 )

Months	
<b>1-3</b>	-Map key resource persons on inclusion in MSF & HUB kick-off -Map external resources of interest for MSF, establish contacts -Collect materials for guideline, video and portal's resources

	-Produce 1st version short guideline on inclusion -Kick-off production three short videos on inclusion (Video 1/3 for Portal opening) -Develop a <u>technically highly inclusive website/Portal</u> -Kick-off series of webinars on inclusion (1/6)		
	<b>General</b>	<b>General Training</b>	<b>Training w/ field specifics</b>
<b>Months 4-6</b>	- Produce short videos on inclusion (2/3) -Follow-up series of webinars on inclusion (2/6)	-Produce test F2F general training on inclusion of PWDs -Test general training in HQs -Finalize general training on inclusion of PWDs	- <u>Start to develop an extension of the general training on inclusion with specifics for field workers</u>
<b>Months 7-9</b>	- Produce short videos on inclusion (3/3) -Follow-up series of webinars on inclusion (3/6)	- Explore online solutions for training - F2F general Trainings in HQs (Continue)	- <u>Start test F2F Training with specifics for field workers</u>
<b>Months 10-12</b>	-Follow-up series of webinars on inclusion (4/6)	-F2F general Training in HQs -Develop test online general training -Evaluate & finalize online general training -Implement and disseminate online general training	- F2F Training with specifics for field workers (Continue)
<b>Months 13-15</b>	-Follow-up series of webinars on inclusion (5/6)		-Evaluate and Finalize F2F training for field workers
<b>Months 16-18</b>	- Evaluate -> recommendations -Present results in MSF platforms & webinar 6/6 - Develop full-scale TIC proposal		-Develop and disseminate online training for field workers

**Key Risks**

What would hinder this project's success?

**Risk Mitigation**

How would these risks be addressed?

<b>Lack of will &amp; interest within MSF executive</b>	The proposal being the continuity of the motion, we will use the associative to ensure pressure is put on the executive.
---	--

**Dependencies / Linkages** (note if there is a link to other projects or dependencies)

-None-

**Additional Information** (if required)

-none-