



Disability-inclusive Disaster Risk Reduction in Asia and the Pacific

Note by the secretariat prepared for the

**Asia-Pacific Meeting on
Disability-inclusive Disaster Risk Reduction:
Changing Mindsets through Knowledge**

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I. Overview

This note provides background information on disability and disaster risk reduction and the respective normative frameworks. It considers key elements of disability-inclusive disaster risk reduction and provides a brief overview of disability-inclusive disaster risk reduction (DiDRR) in the Asian and Pacific region. It also outlines the next steps towards the development of the post-2015 DRR framework. Terms that are commonly used in the fields of disaster risk reduction and disability are listed with definitions in Annex 1.

II. Introduction: disability and disaster risk reduction

A. Asia-Pacific disaster trends

Asia and the Pacific is the most disaster prone region in the world. It is most seriously affected by all types of disasters, including those caused by climate change. It is estimated that over the past decade, 2.5 million people in the region have been affected by disasters and almost 800,000 have been killed (ESCAP and UNISDR, 2010). A person living in Asia and the Pacific is almost twice more likely to be affected by a disaster than a person living in Africa. This greater likelihood rises to almost six times when compared with a person living in Latin America and the Caribbean, and 30 times in the case of comparison with a person living in North America or Europe.

This trend is also reflected in the region's disaster-related economic losses. In 2011, losses caused by disasters in Asia and the Pacific represented 80 per cent of the global losses due to disasters, even though the region only generated a quarter of the world's GDP. Furthermore, according to the Asia-Pacific Disaster Report 2012 (ESCAP and UNISDR, 2012), the vulnerability and exposure of people and assets to disasters is rising in countries of Asia and the Pacific. With rapid economic growth, cities, key infrastructure and businesses are growing very rapidly in areas prone to natural hazards. For example, cities on or near coast lines are exposed to disasters such as typhoons, storm surges and tsunamis. Losses have grown more than 16 times in value since 1970, while GDP increased only 13 times (ESCAP and UNISDR, 2012).

Disaster losses severely affect small-scale business owners and those employed in the informal sector, marginal farmers and poor households as they tend to lack buffers against sudden, external shocks. For example, Typhoon Ketsana caused USD 4.3 billion in damage in the Philippines, with 90 percent of the losses sustained by poor urban households (ESCAP and UNISDR, 2012).

B. Persons with disabilities and disasters

Asia and the Pacific is also home to around 650 million persons with disabilities, who constitute an estimated 15 per cent of the overall population in the region. This represents nearly two thirds of the world's population of persons with disabilities.

The number of persons with disabilities is expected to rise over the next decades due to the unprecedented pace of population ageing and the close linkage between ageing and disability. The number of older persons in the region is projected to increase from 490 million in 2013 to 1.3 billion by 2050. In East and North-East Asia, one in four persons will be aged 60 and over by 2030, and one in three persons will be aged 60 and over by 2050. It is estimated that in some fast-ageing countries, such as China and the Republic of Korea, 80 per cent of persons with disabilities will be aged over 60 years by 2050 (ESCAP, 2012).

Persons with disabilities are disproportionately affected by disasters. Estimates from the Great East Japan Earthquake in March 2011 indicate a mortality rate of 0.8% for the general population, as compared with 3.5 per cent for persons with disabilities (Japan Disability Forum, 2013).

Persons with disabilities are at higher risk due to a combination of factors. The physical and information environments are usually not designed to address accessibility needs. Such inaccessible environments exert overwhelmingly disabling effects on mobility, access to knowledge and comprehension. Thus, persons with disabilities are more likely to have poorer access to services, knowledge, community networks and other resources. With regard to disasters, the implications are life-threatening: inaccessibility renders difficult or impossible the making of informed decisions and the taking of timely and swift action in preparing for, and responding appropriately in the face of, disasters. This is a clear instance of simple “omission” that has disastrous consequences.

Many persons with disabilities live in relative invisibility and isolation and may not be recorded in any official register. Unless community members proactively seek them out and address access issues, they might not be included in risk and needs assessments, and community preparedness drills, even where such drills exist.

Furthermore, disasters create new numbers of persons with disabilities. For example, following the Haiti earthquake in 2010, it was estimated that 200,000 people acquired various types of impairment, out of 3 million who were affected, while 100,000 to 150,000 people died (ESCAP and UNISDR, 2012).

The first-ever United Nations global survey of how persons with disabilities cope with disasters (UNISDR, 2013) revealed that only 20 per cent could evacuate immediately without difficulty in the event of an immediate disaster. However, with sufficient time, that percentage almost doubles. The survey found that early warning public service announcements are often issued in formats and language that are not accessible. In most cases, evacuation routes, emergency exits/entrances, shelters and relief facilities cannot easily be used by persons with disabilities, even if they could immediately leave the place of danger. Hazards quickly become disasters when vulnerability is higher and there are no mechanisms in place to strengthen resilience.

The concept of, and approach to, disaster management have evolved; these are now more integrated and holistic, reflecting a deeper understanding of the impact that disasters have on people and their heterogeneous communities. The results of the

UNISDR 2013 global survey, as indicated by Ms. Margareta Wahlström, Special Representative of the United Nations Secretary-General for Disaster Risk Reduction on International Day for Disaster Reduction, 13 October 2013, “are shocking” in providing the timely revelation “that the key reason why a disproportionate number of disabled persons suffer and die in disasters is because their needs are ignored and neglected by the official planning process in the majority of situations ... this survey ... provides us with a new insight into how to build a world more resilient to disasters for both disabled and able-bodied people.” (UNISDR, 2013).

The survey also reveals that the majority of respondents either faced difficulties in moving away from danger or had communication difficulties. Most respondents had neither a personal disaster preparedness plan nor were they aware of a disaster management plan in their city/town/ community. Interestingly, half the respondents expressed a wish to participate in community disaster management. For Asia-Pacific, it is noteworthy that over half (55 per cent) of the 5,450 respondents to the survey were from this region.

The survey underscores that the current approaches to DRR continue to exclude one of the most at-risk communities (UNISDR, 2013).

C. Disability-inclusive disaster reduction, safety for all

Disaster risk reduction that reflects a disability perspective and is inclusive of persons with diverse disabilities will not only save persons with disabilities, but also have wide-ranging benefits for all other social groups. This challenges all actors who have responsibility for any aspect of disaster risk reduction to look at what they do from the perspective of a user who is blind, who is deaf, who has learning disabilities, is a wheelchair user or who has multiple disabilities, as could be the case of increasing numbers of older persons. The design and planning of systems, protocols, signage and other means of public communication, standard operating procedures, and infrastructure that are disability inclusive have to be much clearer, as well as be considerably easier and safer for a wider range of users than is the case today in much of Asia-Pacific. Design, planning and preparation that address the access rights and needs of persons with disabilities, in accordance with universal design principles and available technical specifications, would pave the way to a gold standard for resilience building.

Communities would be better prepared for survival when systems, infrastructure and services are structured to fulfil accessibility requirements. For example, ensuring access to early warning announcements by blind or sight-impaired persons would benefit all other print-disabled persons, as well persons who have low or no literacy skills. Furthermore, designing evacuation protocols that persons with cognitive impairments can follow in an emergency requires a far higher degree of clarity that would facilitate use by most other community members in a panic situation, especially children and people who are not familiar with the locality. Designing disaster preparedness for persons with diverse disabilities would yield benefits in terms of the higher standards of clarity, usability and safety adhered to.

Disaster risk reduction would thus benefit from “universal design”. This concept refers to the design of products, environments, programmes and services so that they may be usable by all people, to the greatest extent possible, without the need for adaptation or specialized design for particular groups or in specific conditions. Furthermore, evidence indicates that applying a universal design approach is not as costly as is often presumed, especially if it is considered at the planning stage rather than via retrofitting. For example, some studies conclude that costs for accommodating accessibility regulations are small in relation to a country’s gross domestic product (as low as 0.01%) and providing fully accessible facilities increases building costs by as little as 0.5% to 2%, if planned, designed and implemented from the outset (Wiman and Sandhu, 2004; Metts, 2000; Plantier-Royon, 2009).

D. Post-disaster --- investing in the social sector

A window of opportunity is available through post-disaster recovery and reconstruction measures for investing in disability-inclusive disaster risk reduction by allocating more resources under the overall umbrella of the social sector, such as for education, health and social protection.

Post-disaster recovery and reconstruction investments have in many instances been quite substantial because of contributions by donors, financial institutions and government contingency funds. In most countries, such post-disaster recovery and reconstruction investments have tended to be quite uneven between the economic and social sectors and miss the opportunity to address disability-inclusive disaster risk reduction. In Bangladesh, for example, while the social sector suffered 55 per cent of the damage and loss from Cyclone Sidr in 2007, it was only accorded 22.6 per cent of the funds in the needs assessments (Government of Bangladesh, 2008). This discrepancy in funding for economic recovery, as compared with that for social recovery, reflects and worsens widening levels of inequity. It also underlines the importance of dedicating more resources to the social sector not only in the post-disaster recovery process, but more importantly as an essential component of a country’s long-term inclusive and sustainable development strategy.

The 2008 Cyclone Nargis in Myanmar presents an interesting contrast. Women accounted for 61 per cent of deaths. Women were also affected differently during the recovery: as caretakers, women had most of the responsibility for sick and injured family members, while having less access to formal recovery assistance. Furthermore, the death or disability of a spouse resulted in women becoming their families’ sole sources of income. While the social sector suffered 24.1 per cent of the damage and losses from Cyclone Nargis, it was accorded 85.7 per cent of funds in the needs assessments (Tripartite Core Group, 2008). Giving higher priority to investing in the social sector was used for achieving a balanced, long-term social and economic recovery.

III. Global and regional policy frameworks and disability-inclusive disaster risk reduction

A. Disaster risk reduction and the Hyogo Framework for Action (HFA)

UNISDR defines disaster risk reduction as “the concept and practice of reducing disaster risks through systematic efforts to analyse and manage the causal factors of disasters, including through reduced exposure to hazards, lessened vulnerability of people and property, wise management of land and the environment, and improved preparedness for adverse events.”

Strong commitment to promoting disaster risk reduction has been expressed by national leaders at the Second World Conference on Disaster Reduction (WCDR) in Kobe, Japan (2005) and re-affirmed at the Asian Ministerial Conferences on Disaster Reduction (five held since 2005), as well as in regional and sub-regional workshops.

The Hyogo Framework for Action (HFA), adopted in 2005, as an outcome of the Second WCDR provides a comprehensive approach to reducing disaster risks. The expected outcome is “The substantial reduction of disaster losses, in lives and the social, economic and environmental assets of communities and countries”. The International Strategy for Disaster Reduction (ISDR) system provides a vehicle for cooperation among governments, organizations and civil society actors to assist in the implementation of the HFA. As part of this, HFA Progress Reports are prepared and submitted by member states and inter-governmental organizations on a biennial basis. The objective of the review process is to serve as a mechanism for collecting and receiving continuous feedback from countries. It also serves to assist in assessing progress, gaps and challenges in the efforts to implement the HFA.

Although the HFA refers to vulnerability and highlights the increased vulnerability of certain groups, including women and children, no reference is made to persons with disabilities. This omission exists despite the fact that: (a) all social groups --- be they women, children, slum dwellers, migrants, ethnic minorities or others, and regardless of economic and social status --- have members who live with disabilities; (b) globally, it is estimated that one in six person lives with some form of disability, and with population ageing, combined with other factors, the numbers of persons with disabilities are increasing.

B. Convention on the Rights of Persons with Disabilities

The participation of persons with disabilities in all development endeavours, including disaster risk reduction, is highlighted in the Convention on the Rights of Persons with Disabilities (CRPD). Article 11 of the CRPD states that:

“States Parties shall take, in accordance with their obligations under international law, including international humanitarian law and international human rights law, all necessary measures to ensure the protection and safety of persons with

disabilities in situations of risk, including situations of armed conflict, humanitarian emergencies and the occurrence of natural disasters.”

Also pertinent is article 9 of the CRPD which refers to the accessibility, for persons with disabilities, of the physical environment, transportation, information and communications, including technologies and systems, and to other facilities and services open or provided to the public.

In addition, article 32 of the CRPD highlights the need to ensure that “international cooperation, including international development programmes, is inclusive of and accessible to persons with disabilities”.

States Parties are mandated to report periodically on the implementation of the Convention. A review of reports from 11 member States in the region¹ reveals limited progress on implementing Article 11. Some parties report that efforts were made to meet the special needs of persons with disabilities after disasters occurred, for example the Government of China, after the 2008 Wenchuan earthquake in Sichuan Province, provided priority resettlement to persons with disabilities affected by the disaster. It also provided medical care and rehabilitation services to those who became disabled in the course of the disaster. Government efforts included the establishment of a rehabilitation centre and five assistive device service centres for persons with disabilities in the area. In Mongolia, in cases of natural hazards, such as “dzud” or particularly severe winter, disability benefits are prolonged by at least one year, and households with persons with disabilities are provided with family medical kits.

However with few exceptions such as putting in place procedures for evacuation of persons with disabilities² little work has been reported on involving persons with disabilities in planning and preparedness activities, and implementing disability-focused preparedness or risk reduction activities.

C. Incheon Strategy to “Make the Right Real” for Persons with Disabilities in Asia and the Pacific³

At the regional level, to build more disability-inclusive societies for 650 million persons with disabilities, the Incheon Strategy to “Make the Right Real” for Persons with Disabilities in Asia and the Pacific (hereinafter referred to as the Incheon Strategy) was adopted by Governments at the High Level Intergovernmental Meeting on the Final

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