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# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acronyms</td>
<td>4</td>
</tr>
<tr>
<td>Executive Summary</td>
<td>5</td>
</tr>
<tr>
<td>Background</td>
<td>6</td>
</tr>
<tr>
<td>Legislation and Frameworks</td>
<td>8</td>
</tr>
<tr>
<td>Donor Interest and Requirements</td>
<td>9</td>
</tr>
<tr>
<td>Disability in Iraq</td>
<td>10</td>
</tr>
<tr>
<td>Strategy Development</td>
<td>12</td>
</tr>
<tr>
<td>Objective</td>
<td>12</td>
</tr>
<tr>
<td>Development Process</td>
<td>13</td>
</tr>
<tr>
<td>Accountability Framework</td>
<td>15</td>
</tr>
<tr>
<td>Disability-Specific Policy / Strategy</td>
<td>16</td>
</tr>
<tr>
<td>Leadership</td>
<td>18</td>
</tr>
<tr>
<td>Programmes and Projects</td>
<td>20</td>
</tr>
<tr>
<td>Consultation with Persons with Disabilities</td>
<td>22</td>
</tr>
<tr>
<td>Capacity Development for Staff</td>
<td>24</td>
</tr>
<tr>
<td>Sustainable Progress</td>
<td>26</td>
</tr>
</tbody>
</table>
### ACRONYMS

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Full Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>DPO</td>
<td>Disabled Persons Organization</td>
</tr>
<tr>
<td>DTM</td>
<td>Displacement Tracking Matrix</td>
</tr>
<tr>
<td>DFAT</td>
<td>Department of Foreign Affairs and Trade (Australia)</td>
</tr>
<tr>
<td>DFID</td>
<td>Department for International Development (United Kingdom)</td>
</tr>
<tr>
<td>GoI</td>
<td>Government of Iraq</td>
</tr>
<tr>
<td>HR</td>
<td>Human Resources</td>
</tr>
<tr>
<td>IOM</td>
<td>International Organization for Migration</td>
</tr>
<tr>
<td>IADO</td>
<td>Iraqi Association for Disability Organizations</td>
</tr>
<tr>
<td>IASC</td>
<td>Inter-Agency Standing Committee</td>
</tr>
<tr>
<td>INGO</td>
<td>International Nongovernmental Organization</td>
</tr>
<tr>
<td>PwD</td>
<td>Persons with Disabilities</td>
</tr>
<tr>
<td>SDG</td>
<td>Sustainable Development Goal</td>
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<tr>
<td>UN</td>
<td>United Nations</td>
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<tr>
<td>UNDIS</td>
<td>United Nations Disability Inclusion Strategy</td>
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<tr>
<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
</tr>
</tbody>
</table>
EXECUTIVE SUMMARY

In early 2018, the United Nations (UN) Secretary-General highlighted the need for the UN system to improve its performance on disability inclusion; in June 2019, the UN Disability Inclusion Strategy (UNDIS) was launched. This initiative follows on from Transforming our world: the 2030 Agenda for Sustainable Development, with its pledge leave no one behind, the 2016 Charter on Inclusion of Persons with Disabilities in Humanitarian Action, and multiple donor-led and donor-supported initiatives.

The UNDIS is a five-year policy, an action plan and an accountability framework designed to support sustainable and transformative change and increase accessibility and mainstreaming across the UN. The International Organization for Migration (IOM) Iraq, with the launch of this two-year strategic plan, is at the forefront of working to build capacity and secure resources to ensure that migrants with disabilities have their needs identified and met with dignity, and that persons with disabilities can partake in social, economic and political life in Iraq, as well as benefit from and contribute to durable solutions.

The IOM Iraq Disability Inclusion Strategy highlights five initial areas for prioritization, drawn from the accountability framework of the system-wide UNDIS and prioritized with input from IOM Iraq staff and Iraqi persons with disabilities (PwD). These areas include the development and implementation of a dedicated strategy, leadership, inclusive programmes and projects, consultation with persons with disabilities and capacity building for staff. These five domains constitute indicators from each of the four pillars of UNDIS, thus allowing a country-specific strategy that is in line with the global IOM and UN approach. This contextualized prioritization of the fifteen indicators of the UNDIS remains comprehensive and relevant, as it addresses diverse aspects of IOM operations and requires the input and participation of the Iraqi disabled community to be implemented.

Spanning over two years, the strategy looks at how IOM Iraq can build towards meeting the UNDIS accountability framework requirements – a complementary internal annex document includes concrete programming suggestions. IOM Iraq will need leadership, resources and the understanding that integrating a new area of technical capacity will require some level of trial and error and iterative learning, particularly as Iraq transitions from an emergency-focused response to longer-term development planning. IOM Iraq must show leadership in prioritizing disability inclusion across its areas of work.

Looking forward, this strategy will support IOM Iraq in developing capacity as an actor that effectively addresses the needs of migrants with disabilities, and that can support the Government of Iraq (GoI) in collecting data and designing policy which is inclusive of persons with disabilities.
In 2019, IOM Iraq identified the need to better understand the current status of disability inclusion across its full suite of programming and organizational set-up.

In June 2019, IOM Iraq contracted a disability-inclusion specialist to review the mission’s set-up and programming modalities; to identify areas of good practice and areas where improvement is needed; to run a number of workshops to increase staff capacity in disability inclusion; and to develop a two-year strategic plan for mainstreaming disability inclusion.

This mission-wide strategy work builds on a similar product by the same consultant in early 2019 that focused on IOM Iraq’s Community Stabilization Unit. The ultimate aim of this strategic plan is to ensure that persons with disabilities are equitably included in, and consulted on IOM Iraq activities, and that their needs are identified and met in ways that ensure their dignity.

IOM Iraq programming is structured around four programmatic units, each with distinct mandates. The units run programming around their sector and collaborate on multi-sector projects where possible, to capitalize on expertise and address needs according to a theory of change.

**IOM's Units and their Respective Mandates**

**MIGRATION AND MANAGEMENT UNIT**

Supporting the government to manage safe, orderly and regular migration, including in pursuit of the 2030 Agenda for Sustainable Development.

**COMMUNITY STABILIZATION UNIT**

Supporting the government and civil society actors to create conditions for the revitalization, stabilization and reform of social, economic and political life.

**RETURNS AND RECOVERY UNIT**

Supporting reintegration and durable solutions of displaced populations in identified areas of high return, tailored to local needs and priorities.

**PREPAREDNESS AND RESPONSE UNIT**

Contributing to addressing humanitarian needs and reducing vulnerability, where needed, linked to longer-term interventions.

*A note on language:* Throughout this document the term ‘persons with disabilities’ (PwD) will be used, although it is acknowledged that some persons with disabilities prefer different terminology, from ‘disabled’ to being identified in line with their specific diagnosis or status, such as autistic or deaf. In consultation with staff across IOM Iraq, including native English, Arabic and Kurdish speakers, and persons with disabilities themselves and family members with disabilities, it was agreed that ‘persons with disabilities’ is the most positive, clear and least stigmatizing terminology across all three languages.
**LEGISLATION AND FRAMEWORKS**

Humanitarian, stabilization and development work increasingly focus on the inclusion and rights of PwD. The Convention on the Rights of Persons with Disabilities – ratified by Iraq in 2013 – came into force in 2008 and on its opening day had the highest number of ratifications of any human rights treaty. The 2030 Agenda for Sustainable Development, adopted in 2015 under the pledge ‘no one will be left behind’, includes several references to PwD, with a focus on improving the availability of disability-disaggregated data to inform decision makers, while five of the sustainable development goals (SDGs) make explicit reference to disability.1 Momentum regarding disability inclusion in humanitarian, stabilization and post conflict work has continued to grow, and the Secretary-General has highlighted this population as a critical group for inclusion under Core Responsibility 3 of the Agenda for Humanity. The UN Secretary-General launched the UN Disability Inclusion Strategy2 in June 2019, soon after the UN Security Council’s unanimous adoption of Resolution 2475 on the protection of persons with disabilities in situations of conflict. These developments follow the publication in 2018 of the UN Flagship Report on Disability and Development3 and taken together these developments demonstrate disability to be a key, crosscutting issue.

During the 2016 World Humanitarian Summit in Istanbul, the Charter on Inclusion of Persons with Disabilities in Humanitarian Action was launched, and IOM, among many other UN agencies, international nongovernmental organizations (INGOs) and donors, became a signatory. In line with the summit’s commitment, the Inter-Agency Standing Committee (IASC) endorsed the establishment of a time-bound task team (January 2017 – December 2018) led by the co-chairs United Nations Children’s Fund (UNICEF), the International Disability Alliance and Handicap International. The IASC Operational Policy and Advocacy Groups in August endorsed the disability inclusion guidelines of the International Disability Alliance in August; the guidelines are due to be launched in 2019.

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1 No. 4 Quality Education, no. 8 Decent Work and Economic Growth, no. 10 Reduced Inequalities, no. 11 Sustainable Cities and Communities and no. 17 Partnerships for the Goals


DONOR INTEREST AND REQUIREMENTS

The international humanitarian and development donor community also contributed to the momentum and progress around disability inclusion; the Government of the United Kingdom’s Department for International Development (DFID) and Government of Australia’s Department of Foreign Affairs and Trade (DFAT) are two early champions of mainstreaming.

In July 2018, DFID hosted the Global Disability Summit in London, which gave rise to the Charter for Change, requiring commitments regarding disability inclusion for organizations (including IOM) that receive DFID support. DFID has also launched a five-year disability inclusion strategy, for 2018 – 2023. In 2015, DFAT launched ‘Development for All 2015 – 2020’, Australia’s strategy to strengthen disability-inclusive development across their aid programme, and has published lessons learned from supported projects, particularly within the development sector. The 2018 Charter for Change, supported by DFID’s Inclusive Data Charter Action Plan, outlines commitments to increased inclusion of PwD, with a focus on data as a pathway to accountable, evidence-based action.

While DFID and DFAT are the two leading donors that focus on disability inclusion, they are not the only donors with a tangible interest in this topic. The German Agency for International Cooperation (GIZ), Japan International Cooperation Agency, the Directorate-General for European Civil Protection and Humanitarian Aid Operations and others are giving the issue increased attention and financing. Given the broad-scale developments such as the UNDIS and the Secretary-General’s increased attention to persons with disabilities, IOM Iraq should expect increased questions from donors regarding disability inclusion in the coming months and years, and increased receptivity from donors to the topic. In Iraq’s post-conflict context, which has produced more PwD and worsened their situation, this shift provides an opportunity for IOM Iraq.

4 Government of Australia, DFAT, 2018, Development for all: Evaluation of progress made in strengthening disability inclusion in Australian aid
DISABILITY IN IRAQ

Persons with disabilities have been disproportionately affected by conflict, violence and economic hardship in Iraq. The GoI, UN, INGOs and civil society are making efforts towards addressing the multiple and intersecting barriers faced by persons with disabilities. Unfortunately, at a national level these efforts have been largely hampered by a lack of resources, insufficient institutional will and the prevalent use by many actors of the charity approach, rather than a rights-based model of disability inclusion and mainstreaming. 5

The Convention on the Rights of Persons with Disabilities adopts a human-rights approach to disability, referencing persons with disabilities as including “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.” This convention also addresses those with temporary disabilities who have difficulties ensuring their rights. This conceptualization of disability does not rely only on the impairment or diagnosis of the individual, for instance limb amputation or blindness, but rather looks at how the impairment interacts with barriers, for example environmental barriers, such as a lack of affordable prosthetics, or attitudinal barriers such as an employer’s refusal to hire a person with a visible disability, and how this interaction limits participation. Thus, disability is an evolving concept that is influenced by context.

A widely noted challenge regarding disability in Iraq is the lack of comprehensive and reliable data on the prevalence or types of disability in Iraq. The global average prevalence of disability is estimated at 15 per cent (WHO, 2011), with 80 per cent of people with a disability living in low- and middle-income countries. Since the rate of disability is expected to rise during and after conflict, we can assume 15 per cent is a conservative estimate for Iraq. According to the Ministry of Planning, in 2012 PwD accounted for 8.4 per cent of the population, although Iraqi disability advocates and INGOs providing services for PwD in Iraq had reservations about this number. Further complicating challenges to data collection, it is unclear whether Iraq is using a standardized definition for disability across the country, with the national legislation pertaining to disability, Law no.

38, differentiating between persons with a disability, and those with ‘special needs’. For internally displaced persons (IDPs) there is limited data, mostly related to the availability of services if they are in formal IDP sites/camps, or informal settlements where international actors may be providing services and supporting the GoI to collect and analyse data relating to vulnerabilities. For migrating populations, including those emigrating, travelling and returning to Iraq after time abroad, systems are not adequately set up to capture data. The migration profile data used by IOM Iraq’s Migration Management Unit draws from existing data sets and data that are usually disaggregated by sex and age only.

This rights-based understanding of disability, which underpins increasing awareness of the need for disability inclusion across humanitarian, transition and post conflict programming, and alongside formalized UN and donor requirements regarding inclusion, presents both responsibilities and opportunities for IOM Iraq. The mission will need to better incorporate and demonstrate systematic and meaningful inclusion of PwD across projects and programming. However, IOM can also leverage attention and funding to support quality disability inclusion across its work. Doing so is also vital to promote and protect the interests and needs of migrating populations in Iraq and support the GoI to do the same. Throughout this process, it is necessary to understand that while good practices and guidelines exist for emergency and development contexts, such as the emergency shelter guidelines, 6 systematized disability inclusion outside organizations with a focused mandate, such as Humanity & Inclusion, is still emerging. As such, IOM Iraq will need to secure resources and the buy-in of staff and donors, to build capacity and institutional knowledge and flexibly adapt existing recommendations to IOM’s operating context in Iraq.

5 Mainstreaming is part of a twin track approach to disability inclusion, whereby activities, services, locations etc. are made as accessible as possible to the broadest range of possible users, thus enabling most people to use it most of the time, and avoiding a ‘same but segregated’ solution. This may need to be supplemented by targeting, which refers to specialized activities and services that cater specifically to persons with particular impairments or needs that make accessing mainstream activities difficult or impossible.

6 ICRC, HI, CBM 2015. All Under One Roof: Disability Inclusive Shelter and Settlements in Emergencies
STRATEGY DEVELOPMENT

OBJECTIVE

The overall objective of this strategy is to contribute to eliminating barriers and supporting the capacities of PwD to meet their needs and uphold their rights across IOM Iraq’s programming.

The strategy is designed to be implemented over a two-year period and will focus on four main domains of action: (i) leadership, (ii) inclusive projects and programmes, (iii) consultation with PwD and (iv) building IOM staff capacity in mainstreaming disability inclusion. These domains are drawn from the 15 domains of UNDIS and have been chosen as priority areas in consultation with IOM staff and representatives of Iraqi Disabled Persons Organizations (DPOs) and Iraqi providers of disability services. The strategy is designed to support the overarching strategic priorities of IOM Iraq, mainstreaming disability inclusion across the four pillars of IOM Iraq’s 2018–2020 Strategic Priorities and Plans:

- Addressing Humanitarian Needs
- Supporting Reintegration & Durable Solutions
- Revitalizing Communities
- Strengthening Migration Management

A two-year roll-out process from 2019 – 2021 allows sufficient time for consultation, planning and data collection to support change that will deliver meaningful results for the inclusion of PwD. Two years also aligns with the project-based nature of IOM’s implementation and funding, encouraging a focus on concrete mainstreaming actions and the initiation of institutional change. The upcoming two-year period also corresponds with the roll-out of UNDIS. By 2021 it can be expected that IOM Iraq will have additional, formal requirements – potentially in the form of country scorecards for UNDIS reporting, with guidance and lessons learnt shared from other country contexts or agencies. At the end of the two-year period it is anticipated that IOM Iraq will, in addition to mainstreaming disability inclusion across the mission’s next country strategy, re-evaluate the progress and utility of this initial disability inclusion strategy, and draw on the experience developed during the strategy’s roll-out to create a follow-up strategic plan, potentially with more concrete deliverables and targets.

The disability inclusion strategy is designed to support IOM’s mandate to deliver safe, orderly and humane migration by increasing the inclusion of one of the most potentially vulnerable group of migrants: PwD. IOM fulfils a key role in Iraq and globally in the collection of migration data through the Displacement Tracking Matrix (DTM). Migration data collection includes tracking and monitoring migration flow patterns, developing migration profiles alongside governments, and elaborating other methodologies including through lead roles on certain IASC clusters at the local and global levels. In line with the data-focused priorities of the DFID Charter for Change, this strategy needs to be underpinned by increased collection of disability-disaggregated data and by consultation with PwD to be measurable and actionable. This process will contribute to better understanding of PwD needs, sharing the data with governments and supporting their efforts to collect and analyse such data themselves. The collection of accurate data through large-scale mechanisms such as the DTM will enable IOM to help governments formulate more inclusive, evidence-based migration related policies that uphold the rights and dignity of all migrants, including vulnerable groups and PwD.
Expecting that IOM Iraq can absorb another new technical area without additional resources in terms of time, expertise and financing is unrealistic. This strategy is designed to enable IOM Iraq to learn through implementation and discuss resource needs with donors. No organization can address all aspects of disability inclusion simultaneously, and over the coming two years IOM must align with the newly launched IASC guidelines and minimum standards, while also looking critically at its operations to decide where investing in upscaling and building capacity in disability inclusion can be most impactful. The need for disability inclusion in the Iraqi context is undeniable, and well planned, sustainable and impactful solutions should not be sacrificed for expediency over quality. This strategy should act as a framework to support IOM Iraq’s conversations with internal staff and external stakeholders to jointly develop and integrate disability mainstreaming across activities.

Finally, in addition to drawing on the structure of the UNDIS accountability framework, the strategy is aligned with IOM’s global commitments, including the Charter for Change, the Charter on Inclusion of Persons with Disabilities in Humanitarian Action, the SDGs and the Agenda for Humanity.

**DEVELOPMENT PROCESS**

**Consultancy Timeframe**

This strategy was developed during a mission-wide consultancy from June to August 2019, which followed from the same consultant’s engagement with IOM Iraq’s Community Stabilization Unit between April and May 2019. During the three months dedicated to this mission, meetings, consultations and workshops were undertaken to sensitize staff to disability inclusion, build the knowledge of key staff members regarding disability data collection, and receive staff input on the priorities and implementation of IOM Iraq’s first disability inclusion strategy.

Two workshops were conducted in Erbil, focussing on disability data and the use of various tools (including the Washington Group Short Set of Questions)\(^7\) and analysis and applications of disability data. A third session was conducted with DTM staff members only and explored options for disability disaggregated data specifically within the framework of the DTM. Two further workshops, one in Baghdad and one in Erbil, included disability sensitization sessions and an activity to gather input from attendees regarding content and priorities for the disability inclusion strategy. In an effort to ensure that PwD were consulted and that IOM’s strategy reinforces and supports national policies, the Iraqi Association for Disability Organizations (IADO) and working-level representatives from relevant ministries were invited to attend and comment on the strategy.

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\(^7\) The Washington Group Short Set consists of six questions to assess difficulties in common daily domains of functioning. They are designed by the UN statistical commission, endorsed by donors including DFID and DFAT and have been tested in humanitarian settings.
The UNDIS Accountability Framework

In early 2018, the Executive Committee of the Secretary-General highlighted the need for the United Nations system to improve its performance on disability inclusion. An institutional review of the UN system approach to disability mainstreaming was undertaken. In June 2019, the UNDIS was launched, as a “policy, action plan and accountability framework to strengthen systemwide accessibility and mainstreaming” across the UN. The stated objectives of the UNDIS are to provide a “comprehensive strategy for ensuring that the UN system is fit for purpose in relation to disability inclusion... it provides a foundation for sustainable and transformative change on disability inclusion through all pillars of the UN’s work.” The UNDIS will be implemented for five years before review, and IOM will report against its indicators on a yearly basis. At the time of the development of IOM Iraq’s country-specific strategy, elements of the reporting mechanism for each agency, such as country-level accountability scorecards, were still being finalized.

The accountability framework (Fig. 1) is divided into four main pillars: (i) leadership, strategic management and planning, (ii) inclusiveness (iii) programming and (iv) organizational culture. These pillars are subdivided into 15 indicators, measured on a gradated scale. The UNDIS references the comparative advantages of each agency, and on the graded scale there is the option to decide that a particular indicator is not relevant to the implementer.

**UNDIS Accountability Framework Grading Scale:**
Not Applicable, Missing, Approaches Requirements, Meets Requirements and Exceeds Requirements.

![Fig. 1 : UNDIS Accountability Framework](image-url)
ACCOUNTABILITY FRAMEWORK

Fig. 2 represents a reorganized version of the UNDIS pillars where each of the 15 indicators was put through a sorting and prioritization exercise during three workshops conducted with IOM Iraq staff, Iraqi DPO’s and disability service providers from July to August 2019. No indicators were marked as ‘Not Applicable’ to the country mission. The first priority indicators represent a cross-section of the four pillars of the UNDIS, reflecting the status of disability inclusion as a cross-cutting issue within IOM.

In the following section, IOM Iraq’s two-year disability inclusion strategy is laid out, guided by the chosen priority indicators. As the indicator ‘Disability-specific policy / strategy’ was highlighted by all staff consulted, this indicator is first discussed alongside implications for meaningful implementation and possible risks to its successful application. Each subsequent indicator is addressed, in addition to what achieving this indicator might look like for IOM Iraq during years one and two of the strategy. This document can be read with the internal annex document, which offers more concrete activity suggestions, broken down by unit or specialist programmatic focus, for instance protection. Within the priority pillars, the indicators are not listed in order of any further priority.
DISABILITY INCLUSION STRATEGY 2019 – 2021

IOM Iraq staff members who noted that disability is not systematically considered as a cross-cutting issue in the current country strategy or their daily work raised the need for a specific policy or strategy document. This strategic plan seeks to fill this gap to allow IOM Iraq to intentionally position disability inclusion as a cross-cutting, programmatic issue rather than a topic to be confined to specialist sub-units of IOM Iraq, such as health. The launch of the IASC guidelines on disability inclusion will also provide a concrete set of actions for staff to refer to. However, the strategy and broader initiatives are likely to have limited impact without leadership and championing the importance of IOM Iraq’s disability inclusion strategy, or without identifying resources to support its roll-out. These elements must be considered precursors to successful implementation.

The strategy for 2019 – 2021 prioritizes five of the 15 UNDIS domains: (i) an internal strategy on disability inclusion; (ii) internal and public leadership regarding disability inclusion in Iraq; (iii) addressing disability inclusion across projects and programmes; (iv) consulting with PwD; and (v) building staff capacity. In response to the varied nature of IOM Iraq’s implementation contexts, from camps to urban settings and across emergency, transition and post conflict, in addition to the variety of activities implemented across four units, the strategy provides a frame to support progress and identify gaps. This strategic plan represents IOM Iraq’s first attempt to mainstream disability inclusion.

The change this strategic plan seeks to support can be evaluated through four main questions:

1. To what extent has leadership taken ownership of the topic of disability inclusion and made it a visible priority for staff throughout the organization?
2. To what extent are programmes and projects including PwD and meeting their needs on an equitable basis to persons without disabilities?
3. Does IOM Iraq have in place, and regularly use, a mechanism to meaningfully consult with PwD in the communities it serves?
4. To what extent do IOM Iraq staff have the necessary skills and knowledge to implement disability mainstreaming across programmes and projects, including knowledge of minimum standards, and skills for interacting with and including persons with different impairments?

At a basic level, these questions can be answered using the key of the UNDIS accountability framework, from ‘missing’ to ‘exceeds requirements’. However, operationally, IOM Iraq staff should look at the activities that have been added or adapted to be disability-inclusive to assess where the strategy is falling short, where progress has been achieved and whether a next level of priorities from the UNDIS 15 domains can be evaluated and planned for.

Risks to the successful implementation of the strategy must be reassessed and mitigated throughout the coming two years.

**RISKS**

- **Ownership:** The strategy will fail to support any meaningful change for IOM’s beneficiaries and communities or be sufficiently integrated into the mission’s philosophy: if staff across IOM Iraq do not take some ownership of the strategy, if it is rolled out without resources, or with over focus on donor or internal IOM/UN reporting rather than programmatic approach and impact.


**LEADERSHIP**

**CURRENTLY**

Missing

**INDICATOR GRADING**

Approaches requirements: Senior managers internally and publicly champion disability inclusion;

Meets requirements: AND review disability strategy on a yearly basis, with remedial action as needed;

Exceeds requirements: AND Senior-level mechanism in place to ensure accountability for disability inclusion implementation.

*IOM Iraq should be aiming to meet requirements within a two-year period.*

Demonstrating buy-in from leadership is key to this strategy, and was highlighted by several staff members as currently missing – but needed – for programmatic and field staff to act on disability inclusion in practical terms. Staff stated that without high-level endorsement and prioritization of disability inclusion, such inclusion will be seen as outside the scope of their mandate/activities.

Leadership must foster an environment where, similar to gender mainstreaming of Preventing Sexual Exploitation and Abuse, disability inclusion becomes a visible and resourced priority. Realistic progress on disability inclusion also requires leadership to recognize and communicate that it is an ambitious, necessary step that has internal support. Leadership should encourage senior management to consider, plan for and report on disability inclusion in their projects, and should communicate openly with donors regarding the need for dedicated resources to meaningfully mainstream disability inclusion over time. Leadership must understand and communicate internally and externally that including persons with disabilities is a prerequisite step to supporting stabilization, social cohesion, economic recovery and migration management in Iraq, and will require a process of learning and iteration while building internal capacity and securing adequate resources in the coming two years.

• **In Year One,** disability inclusion in IOM Iraq could include:
  – Chief of Mission shares official communication regarding strategy roll-out and prioritization of the topic, ideally with follow-on actions and dedicated human resources available and responsible for this.
  – Country mission requires all future project proposals to include disability as a cross-cutting issue.
  – Unit managers recommend or require team member attendance at external coordination events related to disability inclusion, such as the Rehabilitation Working Group and National Disability Working Group.

• **In Year Two,** disability inclusion in IOM Iraq could include:
  – Meeting date and members are identified to review the disability inclusion strategy on an annual basis, with disability-specific data required and available to inform, review and identify new targets/need for remedial action.
  – Disability inclusion is incorporated as a cross-cutting issue in future strategic plans at the mission level.
  – IOM becomes a public champion of disability inclusion and mainstreaming in broader-level planning, such as the United Nations Sustainable Development Cooperation Framework and government policy related to migration.
  – IOM has a leading role in making funding for disability inclusion a key aspect of projects across multiple donors.
  – For the next disability inclusion strategy, a plan for consultation with wider range of Iraqi organizations for PwD is developed.

**RISKS**

• **Visibility:** Despite the funding of a disability-inclusion consultancy and strategy development, which indicates high-level buy-in, staff communicated their doubt that senior leadership would consider the topic a priority.

• **Reporting mechanisms and measurement:** The lack of finalization of the mission-level or IOM-wide reporting requirements and mechanism for the UNDIS accountability framework might lead to a lack of clarity regarding practical implementation of the UNDIS at the country level.
While the UNDIS indicator only states the broad requirement of a guidance note, given the multitude of projects across IOM Iraq and variety of donors, units will need to plan strategically to operationalize and mainstream disability inclusion, specific to their area of work. Existing projects can look at systematically disaggregating data by disability as a first step, so that activities better target households or individuals. Understanding what activities will be most relevant to beneficiaries with disabilities, the barriers they currently face and the enablers that will be most impactful to them, will require more consultation. Such consultation could take place through focus group discussions that are specifically inclusive of PwD, and more consultations could take place with the PwD community, starting at needs assessment and continuing to disaggregating monitoring outcomes by disability status, to assess the reach, impact and relevance of IOM projects for persons with disabilities.

• In Year One, disability inclusion in IOM Iraq could include:
  – The Programme Support Unit and appropriate specialists take responsibility for creating a basic programming guidance document that supports disability inclusion across the project cycle, from needs assessment to evaluation, underpinned by the collection and analysis of valid data to measure progress over time.
  – Donors who are open to funding projects with specific funding allocated for disability inclusion or that focus on mainstreaming and inclusion of PwD are identified.
  – Existing project documents such as assessment templates, site and beneficiary selection criteria or standard operating procedures are reviewed to identify areas for ‘quick-wins’ with disability inclusion.
  – Project reviews include disability as a cross-cutting issue and evaluate their projects against this strategy.
  – Projects are supported in mainstreaming disability by training the protection focal point network to support disability inclusion.
  – Where feasible, individual and household data is disaggregated by disability status so factors/programmes that disproportionately impact PwD can be identified.

• In Year Two, disability inclusion in IOM Iraq could include:
  – A percentage of projects include and are resourced to achieve disability specific indicators.
  – Adherence to the programming guidance document supporting disability inclusion is an internal requirement.
  – Projects have disability-disaggregated indicators, and where relevant and feasible, specific disability project indicators.
  – In projects that disaggregate beneficiary/services users by disability in addition to sex and age, funds are allocated accordingly and where feasible are tracked.
  – A minimum of two identified donors agree to specific funding of disability inclusion as an aspect of project funding.
  – IOM identifies and pilots targeted interventions and activities for PwD who cannot access mainstreamed services.
RISKS

- **Resources**: While projects and programmes are the most likely modalities to result in the most tangible change and impact for service users/beneficiaries, they also require dedicated time, financing and knowledge to address.

- **Transferability and silos**: The high diversity of projects, timelines, funding sources and staff means that time and resources invested into mainstreaming one unit or activity may have limited impact at overall mission level.

- **Project cycle**: Programmes that are already underway do not have existing budget or targets related to disability inclusion, making the addition of mainstreaming a challenge.

- **Financing**: Donors may have differing priorities and willingness to fund/support mainstreaming. For some projects that already include disability requirements, IOM Iraq may have targets that require resources beyond the existing capacity. Early, open and evidence-based conversations are needed with donors to ensure credibility and understanding as mainstreaming is rolled out for the first time.

- **Credible, quality interventions**: Some activities, such as DTM and Camp Coordination and Camp Management, already track disability data using a binary yes/no question. This approach is well documented to result in under-reporting and may well do harm if other agencies or government bodies use IOM data to plan interventions or policy. These questions should be removed now, and replaced, as is feasible, with the Washington Group Short Set of questions.
CONSULTATION WITH PERSONS WITH DISABILITIES

CURRENTLY
Missing

UNDIS INDICATOR GRADING

Approaches requirements: Systematic close consultation with DPOs and guidelines for consultation in place;
Meets requirements: AND consultation on disability specific AND broader issues;
Exceeds requirements: AND entity has a partnership with DPOs at headquarters and guidance on engagement with a diversity of DPOs at regional and/or country levels.
IOM Iraq should be aiming to meet requirements within a two-year period.

The motto of the disability-rights movement and DPOs worldwide is ‘Nothing about us without us’ and consultation with persons with disabilities must be the cornerstone of any credible disability inclusion work.

Within Iraq the DPO network is relatively well established, although with certain geographic areas better represented than others, for IOM to systematize consultations with PwD over the coming two years. In Iraq, a subtle hierarchy of disability exists, with those who have suffered conflict-related physical impairments such as amputations at the top, and persons with psychosocial disabilities and cognitive and intellectual impairments, such as autism or developmental delays, at the bottom. Given that disability spans persons with a wide range and severity of impairments and social settings, consultation with PwD is not a box that can be ticked by speaking only to one group, such as wheelchair users, and IOM must ensure that representatives across the disabled community can participate in the decisions affecting them.

• In Year One, disability inclusion in IOM Iraq could include:
  – DPOs are mapped, or relationships with focal DPOs are identified and built in areas where community programmes are in place.
  – A guideline is developed, which may include staff capacity building for consultation and communication with DPOs and PwD, taking into account that particular DPOs may serve only one subgroup of PwD and multiple DPOs will likely need to be consulted.
  – A Memorandum of Understanding with local DPO’s are in place, particularly with regard to advocacy with GoI.
  – DPO consultation is built into the programmes’ guidance note, through the project cycle.
  – Human resources (HR) review hiring process to facilitate and encourage the hiring, training, retention and promotion of staff members with disabilities. Note that staff with disabilities should not be considered de facto disability reference points, although they bring a highly valuable diversity of experience and thinking to the organization.
  – DPOs are included or prioritized in activities that partner or interact with civil society organizations.
• Year Two, disability inclusion in IOM Iraq could include:
  – A Memorandum of Understanding or working relationship is established with at least one additional DPO, ideally diversified to ensure DPO partnerships cross both Kurdistan Region of Iraq and Federal Iraq.
  – Where feasible, programmes build on initial data collection and disaggregation to include/weight disability in activity criteria or vulnerability assessments.
  – Data collection moves beyond only disaggregation to assessment of barriers, to understand programmatic planning implications; IOM then disseminates recommendations for partners, GoI and IOM programmes globally.
  – Community consultations, for example focus group discussions and communication with communities routinely target and include PwD and staff have basic competency in communicating with persons with different impairments.

RISKS

• Commitment: Time and resource intensive – requires face-to-face meetings and translators, and avoidance of over-reliance on only one DPO or one type of DPO.

• Do no harm / Accountability to Affected Populations: Creating expectations within communities regarding what IOM can deliver for disability inclusion that cannot be met, or cannot be met in line with their timeframe of expectations.

• Context: Existing systems and frameworks are fragmented, lack of funding/continuity/clear mandate for some DPOs, government and other organizations involved in disability services may act as gatekeepers, controlling consultations and access.

• Guidance and capacity: While multiple existing disability-inclusion guidelines for humanitarian action reference the need to consult with PwD, these guidelines do not offer concrete guidance on how to do so, for instance with sample questionnaires, or provision of training on how to include persons with hearing or communication impairments in consultations.
CAPACITY DEVELOPMENT FOR STAFF

CURRENTLY
Missing

UNDIS INDICATOR GRADING
Approaches requirements: Entity-wide learning and/or training opportunities are available to increase capacity of staff at all levels in disability inclusion;
Meets requirements: AND successful completion of learning activities and use of available learning resources on disability inclusion is mandatory; completion and use are tracked;
Exceeds requirements: AND tailored learning activities and learning resources on disability inclusion, in particular for senior managers and staff union.
IOM Iraq should be aiming to meet or exceed requirements within a two-year period.

Within the UNDIS, capacity development for staff sits within the organizational culture pillar. Building staff awareness and competence regarding disability inclusion is not only a prerequisite to the organization’s ability to credibly implement quality mainstreaming initiatives, but also has a broader impact in changing the organization’s attitudes to and interactions with disability.

During workshops and consultations, several staff reiterated the relevance of disability inclusion to their work and their desire to better address the issue, but stated that lack of technical knowledge and practical guidance remained as hindrances. Building staff knowledge, awareness and practices regarding disability inclusion can also contribute to a transfer of knowledge to the broader Iraqi community, humanitarian actors and the GoI through IOM leadership and advocacy regarding inclusion across programming and migration and displacement-specific strategies.

- In Year One, disability inclusion in IOM Iraq could include:
  - Thanks to leadership communication and increased visibility of disability inclusion as a priority, all staff are aware that a disability inclusion strategy has been developed at country level, and are familiar with internal and external resources to support disability inclusion, for instance IASC guidelines and online training.
  - Priority staff are identified for training and capacity building, for example protection focal persons. Mandate is widened to include disability inclusion; Community Resource Centre staff are skilled to communicate with PwD; Community Police Forum members receive training on mental health and psychosocial disabilities.
  - Relevant staff (Monitoring & Evaluation, DTM and Camp Coordination and Camp Management among others) receive training on disability-disaggregated data collection and analysis, and at least three areas of work are disaggregated by disability.
  - HR include at least existing online training (available in Arabic and English) in onboarding for all staff, and track uptake and completion.
  - IOM Iraq explores potential for partnerships with organizations who can support capacity building, such as REACH and Humanity & Inclusion.
  - IOM ensures staff representation at relevant coordination efforts such as the Rehabilitation Working Group and the National Disability Working Group (Tetratech – USAID).
• In Year Two, disability inclusion in IOM Iraq could include:
  – IOM Iraq has at least one MoU or partnership agreement in place to support capacity building for identified key staff in disability inclusion. PwD are included as trainers or participants.
  – HR explores the feasibility of supporting some staff roles to be accessible to qualified PwD.
  – IOM Iraq has secured or has a dedicated training budget or capacity for disability inclusion and moves toward capturing lessons learned and a training of trainers model to support sustainability.

RISKS

• **HR:** HR have highlighted limited budget and capacity.
• **Internal expertise:** Lack of internal human resources in terms of highly experienced or skilled staff members to support roll-out or act as a resource to colleagues, in addition to the risk of turnover among staff with or developing relevant skills and knowledge.
• **Commitment:** Establishing a ‘tick-box’ approach to mainstreaming if training is mandatory but little follow-up in terms of project/programme applicability is made.
SUSTAINABLE PROGRESS

There was consensus among IOM staff consulted on the importance of the four UNDIS indicators of (i) strategic planning (ii) evaluation (iii) accessibility and (iv) employment. However, these were less frequently rated as urgent needs than the five domains discussed above, so could be considered as areas for consideration and a roadmap toward progress beyond the scope of this document.

Each of these level-two priorities and the actions needed to meet the requirements of each indicator - as per the UNDIS - are listed below. These areas should not be overlooked as in many instances they have natural linkages with the five priority indicators, and in some instances represent opportunities for joint outcomes from similar resources. For example, linking leadership with strategic planning, by having leadership pledge to including a “commitment to disability inclusion in the overview/preamble of the main strategic plan,” is a clear cross-cutting outcome, while the further requirement for disaggregated data under the indicator ‘Strategic Planning’ requires linking with ‘Programmes and Projects’ and ‘Evaluation’, fitting with the need for greater competency in data collection already identified.

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As IOM Iraq rolls out the first disability-inclusion strategy for the mission – which is also the first country-level disability inclusion strategy for IOM globally – the process will require leadership and resources to be successful. This strategy also needs vision and ambition to develop the experience and expertise in mainstreaming disability inclusion across IOM’s mandate to support safe, orderly and humane migration.