



## COVID-19 Response in Humanitarian Settings: Examples of Good Practices for Including Persons with Disabilities

This document was produced by Workstream 4 on Humanitarian Response and Recovery, comprising 11 United Nations entities and led by the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) and the United Nations Children’s Fund (UNICEF).

The examples given here, while not being exhaustive of ongoing initiatives nor of the United Nations humanitarian response at large, illustrate some existing good practices being implemented by parts of the United Nations system to promote a disability-inclusive response to the COVID-19 pandemic and support implementation of the [‘United Nations Disability Inclusion Strategy’](#).

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The policy brief, [‘A Disability-Inclusive Response to COVID-19’](#), released in May 2020 by the United Nations Secretary-General emphasizes that it is essential to mainstream disability inclusion in all COVID-19 response and recovery actions, together with actions targeted specifically to persons with disabilities. To effectively identify and respond to the needs and rights of persons with disabilities national and local authorities, as well as humanitarian actors, are encouraged to:

- Consult persons with disabilities and their representative organizations when assessing impacts and developing response plans.
- Ensure that all information is provided in accessible formats.
- Ensure that all preventative measures are inclusive and accessible.
- Deliver specific measures to enable persons with disabilities to exercise preventative measures (e.g., additional or specific hygiene items and supplies).
- Implement activities to ensure persons with disabilities are protected against harm, including gender-based violence.
- Ensure that any adaptations to usual delivery mechanisms of humanitarian

assistance consider persons with disabilities (e.g., alternative arrangements for food distribution).

- Disaggregate surveillance data by disability, sex and age, when possible.

These points and other required actions are described in more detail in the [‘Covid-19 Response: Applying the IASC Guidelines on Inclusion of Persons with Disabilities in Humanitarian Action’](#) key messages.

### Key lessons learned from the examples

The importance of **partnership with organizations of persons with disabilities** was highlighted throughout many of the good practice examples. The examples highlighted the value of these partnerships, including for:

- supporting inclusive needs assessment that identifies the risks faced by and the needs and priorities of persons with disabilities
- supporting the delivery of community awareness and risk communication
- advocating with local or national authorities on the rights of persons with disabilities in the context of COVID-19 restrictions
- engaging with those who are hard to reach, including displaced persons.

**Inclusive needs assessment** processes are essential to understanding the impacts of the COVID-19 pandemic on persons with disabilities in order to inform **adaptation of programming**. For example:

- home delivery of food assistance, medicines and non-food items
- adjusting delivery of social protection and cash transfer programmes
- appropriate targeting of assistance.

The pandemic offers an opportunity to strengthen **communication with communities** in order to make engagement more inclusive. For example:

- engaging communities, including persons with disabilities, in communicating key messages
- diversifying channels of communication (e.g., radio, social media)
- enhancing accessibility of multiple channels used (e.g., use of written, audio and easy-to-read formats).

In the context of reliance on **remote forms of service delivery**, especially digital platforms, it is important to ensure that these are accessible to persons with disabilities.

The pandemic **exacerbates the exclusion of groups facing multiple forms of discrimination**, such as refugees with disabilities and persons with psychosocial and intellectual impairments. There is a need to ensure that the COVID-19 response reaches out proactively to the most marginalized groups.

In the examples below, you will find references to numbers that correspond to the following indicators from the United Nations Disability Inclusion Strategy. While the examples do not comprehensively cover all the indicators, this gives an indication of some of the ways that the United Nations system is applying the United Nations Disability Inclusion Strategy in the COVID-19 response in humanitarian settings.

## United Nations Disability Inclusion Strategy indicators

- 1 Leadership
- 2 Strategic planning
- 3 Disability-specific policy/strategy
- 4 Institutional set-up
- 5 Consultation with persons with disabilities
- 6 Accessibility
- 6.1 Conferences and events
- 7 Reasonable accommodation
- 8 Procurement
- 9 Programmes and projects
- 10 Evaluation
- 11 Country programme documents
- 12 Joint initiatives
- 13 Employment
- 14 Capacity development for staff
- 15 Communication

## Engaging with Organizations of Persons with Disabilities (OPDs)

### International Organization for Migration (IOM) in South Sudan: Collaborating with OPDs to understand the needs and priorities of persons with disabilities

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IOM implements an integrated, multisectoral approach to reach displaced and conflict-affected populations across South Sudan and is a key actor in COVID-19 preparedness and response programming in the country. At the outset of the crisis, IOM consulted persons with disabilities located in internally displaced and host community settings to design a more disability-inclusive approach to its response. The overall purpose of the consultations was to understand and respond to:

- the risk of contracting COVID-19 faced by persons with disabilities
- the immediate economic impact on persons with disabilities
- the long-term impacts of the crisis on the loss of resilience and coping mechanisms of persons with disabilities
- the potential disproportionate effect of the crisis on women, children and older persons with disabilities.

To reach persons with disabilities, IOM contacted local OPDs, which then connected the organization with individuals, asking them to take part in focus group discussions. The IOM team took steps to ensure equal participation of women with

disabilities within the consultation; however, this was challenging due to the low representation of women in OPD structures. Another hurdle was presented by the need to reach persons with psychosocial and intellectual disabilities, as they are not currently represented by OPDs at national or state level, leaving these groups hard to reach and highly stigmatized. Feedback from the consultations was used to inform a document summarizing the key findings and recommendations for IOM's COVID-19 response.

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### **United Nations Refugee Agency (UNHCR) in Latin America and the Caribbean: Working in partnership with OPDs in a forced displacement context**

In Central America and Mexico, more than 1 million persons have been forcibly displaced<sup>1</sup> and over five million Venezuelans have left their country.<sup>2</sup> Further, the Latin America and the Caribbean region is severely affected by the COVID-19 pandemic. The socioeconomic impact of the pandemic is exacerbating poverty levels among forcibly displaced communities, and increased transmission of the disease is being reported along national borders, challenging the access of displaced populations to essential services and protection.<sup>3</sup>

Accurate and reliable information regarding the situation of displaced persons with disabilities in the region is scarce. There are no official government data on displaced persons with disabilities, and displaced communities are scattered in urban areas, which makes it difficult to reach them. To generate data on the situation of refugees and migrants with disabilities in the region, the UNHCR approached The Latin American Network of Non-Governmental Organizations of Persons With Disabilities and their Families (RIADIS) to collaborate in two main areas:

- Conducting a regional assessment of the situation of refugees, migrants and displaced persons with disabilities as a means to understand their needs, priorities and capacities, and to better adjust UNHCR and partners' responses. The assessment includes analysis of the impact of COVID-19 on their lives. It also comprises virtual focus group discussions and interviews with persons with disabilities and service providers.
- Production of information and sensitization materials to raise awareness on the situations of persons with disabilities and ensure they have access to information during the COVID-19 pandemic.

1 At least 100 million people have been forced to flee their homes during the last 10 years, seeking refuge either within or outside the borders of their country. In 2019, 79.5 million people were forcibly displaced worldwide, including refugees, asylum seekers and internally displaced persons. Source: Operational data portal, December 2019, <<https://data2.unhcr.org/en/situations/cam>> accessed 20 August 2020.

2 Total of 5,202,270 Venezuelans living in host countries according to government official data. Source: Plataforma de Coordinación para Refugiados y Migrantes de Venezuela, 2020, <<https://r4v.info/es/situations/platform>>, accessed 20 August 2020.

3 UNHCR Americas COVID-19 Response Update, July 2020, <[https://reporting.unhcr.org/sites/default/files/UNHCR%20Americas%20Update%20COVID%20%2313\\_3%20July.pdf](https://reporting.unhcr.org/sites/default/files/UNHCR%20Americas%20Update%20COVID%20%2313_3%20July.pdf)> accessed 20 August 2020.

## Meeting basic needs

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### **OCHA at global level: Covering disability inclusion in the Global Humanitarian Response Plan**

The UN's Global Humanitarian Response Plan (GHRP) is targeting COVID-19 assistance funding requirements of US\$ 10.26 billion for nearly 250 million people in 63 countries. The spread of the pandemic necessitates more intensive health prevention and treatment measures and an increase in investments to maintain other essential health services. The effects of the pandemic are impacting all spheres of life and support needs to be scaled up substantially to help the most vulnerable during the period April–December 2020. Across its three updates, the GHRP identifies persons with disabilities as one of the most affected and at-risk groups and stresses the need for action across its three strategic priorities. It highlights the risks facing persons with disabilities, and their specific needs, vulnerabilities and resilience, and focuses on the response required to mitigate the impact of the pandemic on their lives and livelihoods. In parallel, OCHA issued several advocacy pieces to draw donor attention to the basic needs of persons with disabilities in the COVID-19 response.

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### **The United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA) in the Occupied Palestinian Territory: Addressing poverty among persons with disabilities and their families**

During March and April 2020, UNRWA community development social workers

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undertook a needs assessment among families who have members with disabilities. The aim was to gain a better understanding of the effects of the COVID-19 pandemic on Palestine refugees with disabilities and their families living in refugee camps on the West Bank, and how to mitigate these effects.

In the context of the COVID-19 pandemic, these families reported challenges associated with getting basic supplies of food, diapers, medicine, assistive devices and hygiene products. Additionally, most of the families had lost their jobs due to the crisis. The poor economic situation was exacerbated by an increased consumption of food and greater use of hygiene products due to additional family members being at home.

To address the identified needs, UNRWA provided home delivery of the important items identified by the families. In order to mitigate the increased economic hardship, the regular cash assistance provided by the Social Safety Net Programme, targeting the poorest families in the West Bank, was brought forward to help them buy basic items and pay bills. The Microfinance Department also allowed deferral of monthly loan repayments. These activities allowed persons with disabilities and their families to meet their basic needs and comply with the COVID-19 prevention guidance and restrictions imposed by the authorities.

### **Advocacy on access to basic needs**

In Ukraine, the Office of the United Nations High Commissioner for Human Rights (OHCHR) identified human rights

concerns relating to response measures, including access to food for persons with disabilities. These concerns were outlined in the OHCHR contribution to the Joint United Nations–Ukraine COVID-19 socioeconomic impact assessment document.

### **Access to rehabilitation and assistive technology**

In a needs assessment conducted by UNRWA in the West Bank, persons with disabilities reported difficulties in accessing rehabilitation services such as occupational therapy and speech therapy. In response, UNRWA collaborated with community-based rehabilitation centres and donors to provide persons with disabilities with assistive devices (such as wheelchairs, crutches and hearing aids), as well ensuring they could access maintenance services for their existing assistive devices.

### **Improving access to education**

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#### **UNICEF in Jordan: Ensuring learning continuity for children with disabilities**

The COVID-19 pandemic is negatively impacting education around the world, with children in emerging and developing economies among those worst affected. On 15 March 2020, the Government of Jordan closed all schools, kindergartens and universities, affecting 2.37 million learners.<sup>4</sup> School closures increase the risk of learning inequality and drop-outs,

particularly among the poorest children, those living in informal settlements and refugee camps, and those with disabilities.

Since the onset of the crisis, UNICEF has supported Jordan's Ministry of Education to ensure educational continuity by providing distance learning during school closure due to the COVID-19 pandemic, and in-school support once the schools re-opened. This support included televised lessons broadcast nationally, and digital platforms established to facilitate access to educational content and a learning management system. A web-landing page was created for teachers to provide professional development courses focused on new technologies. To strengthen inclusion among children with disabilities in remote and distance-learning situations, UNICEF provided disability-inclusive workbooks covering Arabic, mathematics, and sensory and perceptual skills. These were distributed to the families affected before the schools closed, and complemented with videos to help parents continue speech and occupational therapy sessions with their child at home. UNICEF also conducted home visits in the camps, and later worked in schools with shadow teachers to provide therapy and learning support to children with disabilities.

#### **Using digital platforms to strengthen inclusion**

In Jordan, UNRWA utilizes different forms of digital platforms to ensure that learning is delivered to all children, including those with disabilities. Techniques for coping during lockdown have been shared

<sup>4</sup> Source: *Global Monitoring of School Closures Caused by Covid-19*, UNESCO, 2019, <<https://en.unesco.org/covid19/educationresponse>> accessed 20 August 2020.

with parents of children with disabilities through these platforms. UNRWA students also have access to platforms delivered by Government, which include remote-learning materials tailored for students with disabilities (e.g., video learning for the deaf).

### Supporting national actors

OHCHR is supporting the Ministry of Education of Guatemala, which published and launched an inclusion guide for people with disabilities in its 'I Learn at Home' Strategy. OHCHR also worked with the United Nations Population Fund and several civil society organizations to host an event focused on the right to education, including access to remote education for persons with disabilities.

### Providing inclusive mental health and psychosocial support

#### Support for coping with the psychological impacts of the crisis

In the West Bank, persons with disabilities and their families have reported several psychological impacts of the pandemic, including fear of contracting the virus, stress over the economic situation and lack of access to support services.<sup>5</sup> UNRWA provides psychosocial support through phone calls to Palestine refugees with disabilities. It also established WhatsApp groups to support mental health needs, including families of persons with disabilities.

### Ensuring inclusive risk communication and community engagement

#### Using a community-based approach

UNHCR approaches the communities with which it works through creative and flexible mechanisms, aiming to achieve open and sustainable two-way communication through existing structures such as community groups, support spaces, outreach volunteers, community leaders and networks/associations of refugees and migrants, among others.

Missions managed by the Department of Peace Operations (DPO) have been encouraged to map and engage with existing community groups to ensure they are fully involved in the response to the COVID-19 pandemic, identify specific platforms to reach marginalized groups, and establish targeted forums to communicate with specific groups, including persons with disabilities. For example, the United Nations Multidimensional Integrated Stabilization Mission in Mali and Radio Mikado FM has launched a COVID-19 sensitization campaign. It is led by the well-known Malian artists Amadou and Mariam, both of whom have visual impairment, and hosts daily awareness-raising sessions. Similarly, the Multidimensional Integrated Stabilization Mission in the Central African Republic supports and trains the National

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<sup>5</sup> The UN response to mental health and psychosocial support (MHPSS) needs is guided by the Inter-Agency Standing Committee (IASC) IASC Interim Briefing Note on Addressing Mental Health and Psychosocial Aspects of Covid-19 and Guidance on operational considerations for multisectoral MHPSS programmes during the COVID-19 Pandemic.

Youth Council, including youth members with speaking and hearing impairment, to undertake door-to-door awareness-raising on COVID-19.

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### Accessibility of messaging

UNHCR offices have adapted their COVID-19 messaging by embracing different formats and languages to make the information more accessible to community groups, including persons with disabilities. A twin-track approach is applied. This uses multiple and accessible communication channels to disseminate messages through short message service, WhatsApp, Facebook, Twitter, YouTube and Instagram. Media include posters, social cards, videos with closed captioning, audio clips and other targeted information developed specifically for persons with disabilities.

OHCHR Palestine issued three videos on the rights of persons with disabilities in the COVID-19 response; these included use of sign language. In Ethiopia, OHCHR disseminated audio information, and education and communication materials, to media professionals, and is currently developing Braille versions of the educational messages. In Guatemala, OHCHR disseminated information to persons with disabilities through social media and local radio.

In Lebanon, UNICEF worked with the International Labour Organization and other partners to produce sign-language videos on COVID-19. These have been disseminated through social media channels.

### Engaging persons with disabilities in dialogue

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OHCHR Palestine organized a virtual round-table discussion on disability rights during the COVID-19 pandemic with civil society organizations from both the West Bank and Gaza.

To address the lack of general awareness about the risks faced by persons with disabilities during the COVID-19 crisis, IOM in South Sudan teamed up with the Ministry of Gender, Child and Social Welfare to create a radio show. This was presented by an OPD delegate and a member of the Ministry. The show focused on risks, shared messages on the need to include persons with disabilities in local responses, and ways to address barriers during the health crisis. For example, the programme suggested ideas on how to guide a person with visual impairment in the street using voice rather than touch. It also helped caregivers to continue care with the use of masks and frequent hand washing.

### Innovation for inclusion

#### App catalogue

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UNICEF is developing an online catalogue of apps in partnership with Google Play and Apple Store. This will provide solutions to challenges caused or increased by the COVID-19 pandemic. Specific apps will support children with disabilities, caregivers of children with disabilities, and/or caregivers/parents with disabilities.

### 5 Online support for children and youth with disabilities

In Malaysia, UNICEF, OPDs and civil society disability services providers conducted an online survey via Facebook Messenger and WhatsApp to understand how COVID-19 was impacting children with disabilities and their families. The results of the survey were used to inform the design of the 'teletherapy programme', which supported early intervention centre practitioners to extend their therapeutic and rehabilitative services to online platforms that are accessible to children with disabilities.

### Protection of rights

### 9 Department of Political and Peacebuilding Affairs (DPPA)-DPO and OHCHR in DR Congo: Support to national authorities

The United Nations Organization Stabilization Mission in the Democratic Republic of the Congo (MONUSCO) worked to overcome concerns raised by associations of persons with disabilities during the first weeks of the COVID-19 restriction measures implemented in Kinshasa. The United Nations Joint Human Rights Office (UNJHRO) translated OHCHR guidance on human rights and Covid-19, and disseminated this information to authorities and other stakeholders. Following UNJHRO advocacy, the Minister in charge of people with disabilities and vulnerable people undertook a number of measures, including:

- visits to services targeting people with disabilities, indigenous people and older persons to monitor the implementation of COVID-19 protective measures

- implementation of a project supporting indigenous people and people with disabilities who are at heightened risk due to COVID-19 restrictions
- sensitization and a media campaign for people with disabilities and indigenous people, conducted in local languages
- translation of sensitization messages for deaf people and adaptation of hand-washing kits for persons with disabilities.

### Strengthening accountability

As part of its 'Strategy of Action on Human rights and COVID-19 in Iraq', the United Nations Assistance Mission for Iraq (UNAMI) monitors the situation of persons with disabilities in the context of human rights for everyone and encourages greater support from the authorities for those currently at risk, including persons with disabilities. UNAMI's Human Rights Office profiled 10 organizations working on the rights of persons with disabilities in the southern region of Iraq and their response to COVID-19. The Office is also working with the non-governmental organization (NGO) al-Meezan to raise awareness among persons with disabilities on the implementation of COVID-19 prevention measures. UNAMI will raise issues outlined in al-Meezan's reporting and policy recommendations with the relevant authorities.

Also, and in line with UNAMI's 'Action Plan on Hate Speech', the Human Rights Office is following up on reports of ill-treatment and social stigmatization of persons infected by COVID-19, particularly vulnerable members of Iraqi society including people with disabilities, to promote tolerance and non-discrimination.

## Protecting children

In Ukraine, UNICEF disseminated new guidance notes focusing on child protection and mainstreaming disability into the COVID-19 response; these included communicating with children with disabilities. The latest is particularly important in a context where, as a result of COVID-19 measures, 42,000 children, including children with disabilities, returned home from boarding schools and are at risk of abuse and neglect, face difficult economic conditions and have limited access to education and social services.

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## Providing guidance to humanitarian actors

With CBM-Global and International Disability Alliance, UNICEF is co-chairing the [Reference Group on Inclusion of Persons with Disabilities](#) and its working group on the COVID-19 response. Several United Nations entities, including OCHA as the custodian of the Inter-Agency Standing Committee (IASC), are joining forces within the Reference Group, which includes OPDs and international NGOs and networks, to advance disability inclusion in humanitarian action. As a first action, and in cooperation with IASC, the Group has produced a guidance note: [‘COVID-19 Response: Applying the IASC Guidelines on Inclusion of Persons with Disabilities in Humanitarian Action’](#).

UNHCR has developed a series of guidance notes for its COVID-19 operational response, with recommendations to integrate an age, gender and diversity lens (including disability). The document

[‘Age, Gender and Diversity Considerations – COVID-19’](#) includes a dedicated section on mitigating risks faced by persons with disabilities.

UNRWA has developed guidance notes on disability inclusion in the COVID-19 response, as well as suggestions on how beneficiaries and staff with disabilities can protect themselves against the virus.

UNICEF has produced guidance notes that are available in multiple languages and accessible formats (including Braille-ready and ‘easy-to-read’). [‘COVID-19: Considerations for Children and Adults with Disabilities’](#) includes an accompanying infographic and addresses such issues as access to information; water, sanitation and hygiene; health care; education; child protection; and mental health and psychosocial support, as well as considerations for an inclusive workplace.

IOM has issued specific camp management [operational guidance](#) on how country operations should respond during the COVID-19 pandemic. The guidance recommends that adjustments to operational modalities (in terms of distribution and other camp activities) do not limit access to services for persons with existing vulnerabilities, including those with disabilities. The guidance also states that alternative care arrangements need to be made for persons with disabilities when a main caregiver is placed in isolation.

MONUSCO, working through UNJHRO, has translated and disseminated guidance on human rights and COVID-19 to authorities and other stakeholders in DR Congo.

### 15 **Communication and community engagement**

UNICEF has produced a guidance note on '[COVID-19: Engaging Children and Adults with Disabilities](#)', which focuses on access to information and participation by persons with disabilities as actors in the response; as well as a 'how-to' note on making life-saving information on COVID-19 accessible for all, including adults and children with disabilities. This includes practical tips for accessibility of documents in electronic formats, audio and alternative formats for people with learning disabilities.

The Food and Agriculture Organization of the United Nations (FAO) has recently developed a few guidance documents on Accountability Affected Populations (AAP) to support more inclusive programme design and implementation - an [AAP Toolkit](#) and a [Risk Communication and Community Engagement guidance note](#) specifically in the context of the COVID-19 pandemic.

The important dimensions of disability inclusion have been mainstreamed throughout these documents to ensure that programmes and initiatives reach out to all facets of the community with relevant support and with dignity.

### 9 **Human rights**

OHCHR has released guidance on '[COVID-19 and the Rights of Persons with Disabilities](#)'. This aims to increase awareness of the impact of the pandemic on persons with disabilities and their rights, draw attention to some promising practices already being undertaken around the world, identify key actions

for States and other stakeholders, and provide resources for further learning about ensuring COVID-19 responses are rights-based and inclusive of persons with disabilities.

### **Education**

UNICEF has produced a guidance note: '[All Means All – How to support learning for the most vulnerable children in areas of school closures](#)'. This includes guidance on making learning accessible for children with disabilities.

UNRWA has developed a guide: '[Supporting Students during the COVID-19 Crisis: A Guide to Learning, Health, Safety and Psychosocial Resources](#)'. This covers three main areas: a) supporting efforts to protect children in the COVID-19 lockdown; b) providing mental health and psychosocial support; and c) supporting children to stay healthy. Virtual communication platforms have been established to enable UNRWA to respond in real time to field-specific queries, address challenges as they emerge, and ensure actions are taken and followed up. Through these platforms, participants discuss how to continue a strong focus on children with disabilities and the specific coordination mechanisms needed for teachers and parents when providing this support.

### **Monitoring an inclusive response**

In close consultation with a number of United Nations entities, OHCHR led the development of indicators to guide the United Nations system in assessing and

monitoring the human rights impacts of COVID-19, (see 'A UN Framework for the Immediate Socio-Economic Response to COVID-19'). While all 10 indicators are applicable to persons with disabilities, these groups are mentioned explicitly in the indicators for planning, access to information, social protection and persons living in institutions. Older persons with disabilities and chronic conditions are also explicitly referenced in the UN 'Policy Brief: The Impact of Covid-19 on older persons'.

UNICEF is developing frameworks and adapting existing systems to monitor both the impact of COVID-19 on children and their families, and the results of programmes designed to mitigate these impacts, including in humanitarian contexts. A COVID tag has been introduced to the financial tracking system, in addition to the existing disability tag, to make it possible to report on expenditure in the COVID-19 response that was disability-inclusive. The results framework for programmes related to COVID-19 includes four indicators specific to disability and a number that require disaggregation by disability. In addition, a questionnaire is being developed to include disability considerations in assessment of the socioeconomic situation for children and their families due to the COVID-19 pandemic.

## List of contacts for more information on the above examples

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