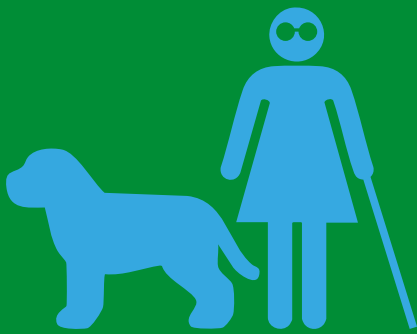




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The Response of Persons with Disabilities to Emergencies, Humanitarian Crises, and COVID-19



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The "Response of Persons with Disabilities to Emergencies, Humanitarian Crises, and COVID-19" guidelines were developed on the initiative of the Ministry of Emergency Situations of the Kyrgyz Republic within the framework of the Global Disability Fund; the project "Advancing the Rights of Persons with Disabilities in Kyrgyzstan" implemented by UNDP, UNFPA, and UNICEF under the overall leadership of the UN in Kyrgyzstan; and the UNDP and Finnish Ministry of Foreign Affairs project "Strengthening Human Rights Protection and Equal Access to Justice in the Kyrgyz Republic."

The views and opinions expressed are those of the author(s) alone and do not necessarily reflect the views of UNDP, UNFPA, and UNICEF. The Global Disability Fund and the Finnish Ministry of Foreign Affairs, which provide the grants, also bear no responsibility for them. The mention of specific organizations, locations, services, or products does not imply that UNDP endorses or recommends them in preference to others of a similar nature that are not mentioned.

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Bishkek, 2026

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ABBREVIATIONS AND ACRONYMS

COVID-19	coronavirus infection
CRPD	Convention on the Rights of Persons with Disabilities
OJSC	Open Joint Stock Company
SMS	Short Message Service
UN	United Nations
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
WHO	World Health Organization

INTRODUCTION

In 2019, Kyrgyzstan ratified the UN Convention on the Rights of Persons with Disabilities (CRPD), committing to promote, protect, and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity¹. Article 11 of the Convention states that States Parties must take "all necessary measures to ensure the protection and safety of persons with disabilities in situations of risk, including armed conflict, humanitarian emergencies, and the occurrence of natural disasters"².

To implement the norms and provisions of the Convention, in 2023, Kyrgyzstan adopted the state program "Accessible Country" for persons with disabilities and other low-mobility groups in the Kyrgyz Republic for 2023-2030³. This program provides for the creation of conditions for accessible infrastructure and services that facilitate the equal participation of persons with disabilities in society, including in emergency response areas.

Kyrgyzstan also participates in the Sendai Framework for Disaster Risk Reduction 2015–2030, a global voluntary agreement aimed at achieving a significant reduction in disaster risk and loss of life, livelihoods, and health, as well as in the economic, physical, social, cultural, and environmental assets of people, businesses, communities, and countries⁴. The Sendai Framework requires the state to implement key measures, including improving risk understanding, strengthening risk management, investing in risk reduction, and enhancing risk preparedness.

UNDP in the Kyrgyz Republic supports the government of Kyrgyzstan in implementing these international agreements through several projects, including the Global Disability Fund's "Advancing the Rights of Persons with Disabilities in Kyrgyzstan" project and the "Strengthening the Protection of Human Rights and Equal Access to Justice in the Kyrgyz Republic" project, implemented jointly with the Ministry for Foreign Affairs of Finland.

The Global Disability Fund Project, "Advancing the Rights of Persons with Disabilities in Kyrgyzstan," implemented in 2024-2025 by UNDP, UNFPA, and UNICEF under the overall leadership of the UN in Kyrgyzstan, aims to promote equal access for persons with disabilities to the realization of their rights, in accordance with the UN Convention on the Rights of Persons with Disabilities.

The project "Strengthening the Protection of Human Rights and Equal Access to Justice in the Kyrgyz Republic" is being implemented as part of a broader collaboration between UNDP Kyrgyzstan and the Ministry for Foreign Affairs of Finland, aimed at supporting the development of the Kyrgyz Republic and strengthening its institutions.

The purpose of these guidelines developed within these two projects is to raise public awareness about the response of persons with disabilities to emergencies, humanitarian crises, and COVID-19, taking into account the rights and needs of persons with different disabilities.

¹ Law "On Ratification of the UN Convention on the Rights of Persons with Disabilities, Adopted by the General Assembly of the United Nations on December 13, 2006 and Signed on September 21, 2011," 2006. [Electronic resource]. // URL: <https://cbd.minjust.gov.kg/4-2688/edition/938270/ru>

² UN Convention on the Rights of Persons with Disabilities, 2006. [Electronic resource]. // URL: https://www.un.org/ru/documents/decl_conv/conventions/disability.shtml

³ State program "Accessible Country" for persons with disabilities and other low-mobility groups of the population in the Kyrgyz Republic for 2023-2030. [Electronic resource]. // URL: <https://cbd.minjust.gov.kg/53-323/edition/1237354/ru>

⁴ Sendai Framework for Disaster Risk Reduction 2015–2030 [Electronic resource]. // URL: https://www.unisdr.org/files/43291_russiansendaiframefordisasterri.pdf

It is intended for conducting training sessions for representatives of state agencies (the Ministry of Labor, Social Welfare, and Migration; the Ministry of Emergency Situations; the Ministry of Health; etc.), emergency response and civil defense services, local authorities, organizations of persons with disabilities, and other stakeholders.

The guidelines "The Response of Persons with Disabilities to Emergencies, Humanitarian Crises, and COVID-19" were developed based on international and local experiences, consultations with disability activists, and the key principle of the UN CRPD, "Nothing About Us Without Us," which means the meaningful participation of persons with disabilities in decision-making that affects their lives.

The document consists of three parts. The first describes what "emergencies" are, the different types of emergencies, and the consequences they have for persons with disabilities. It then describes measures to be taken before, during, and after emergencies. The first part concludes with a description of actions to address the consequences and recover from emergencies.

The second part presents information about humanitarian crises and their impacts on persons with disabilities and provides a list of measures and recommendations for them in responding to humanitarian crises.

The third part is devoted to measures to protect persons with disabilities (one of the most vulnerable groups) from COVID-19 as an emergency associated with mass morbidity and severity of the disease, high hospitalization rates, and fatalities, including among persons with disabilities.

The guidance is based on the principle of shared responsibility, which involves the participation of governments, civil society, private companies, and local communities. This means that persons with disabilities are not viewed solely as beneficiaries but as key stakeholders whose experience helps develop evacuation plans, early warning systems, and training for emergency response specialists. Their participation ensures practical and inclusive disaster preparedness that takes into account diverse needs and challenges.

Inclusion at every stage—from planning to assessment—ensures that the needs of persons with disabilities are recognized and addressed equally before, during, and after emergencies, in line with the fundamental principle of the 2030 Agenda for Sustainable Development, "leaving no one behind⁵." Persons with disabilities play a key role in ensuring their own safety, providing valuable insights that enhance disaster preparedness for all, and addressing gaps in emergency response plans that often fail to consider the needs of this group.

UNDP Kyrgyzstan hopes that these guidelines will become a useful resource for acquiring practical knowledge and skills, enabling persons with disabilities to play a more active role in ensuring safety during emergencies. Such inclusion not only strengthens their self-confidence but also promotes equal participation in emergency management processes, ensuring that their rights and interests in emergency preparedness and response are realized on an equal basis with other members of society.

⁵ The 2030 Agenda for Sustainable Development, 2025. [Electronic resource]. // URL: <https://docs.un.org/ru/A/RES/70/1>



**Response of persons with
disabilities to emergencies**

1.1. What is an “emergency”?

Definition of an emergency

An emergency is an unexpected, sudden event that poses a threat to human life and health, damages property, and harms the environment. An emergency requires immediate intervention to mitigate the danger and prevent its further spread. Emergencies are defined by the following characteristics:

- An emergency entails a risk of death, injury, or serious harm to human health.
- An emergency occurs unexpectedly, without warning, and requires immediate, urgent action.
- An emergency causes significant material damage and harms objects and property.
- An emergency disrupts normal living conditions, requiring the evacuation or sheltering of people.
- An emergency harms the environment.

Types of emergencies

There are different types of emergencies. Table 1 provides definitions and examples.

Table 1. Types of emergencies

Types of Emergencies	Definition	Example
Natural Disasters	Adverse situations arising as a result of natural disasters	Earthquakes, floods, hurricanes, droughts, wildfires, storm winds, heavy rains, tornadoes, landslides, mudflows, avalanches, snowfalls, frosts.
Technological Disasters	Adverse situations arising as a result of human activity	Accidents and disasters at industrial and transport facilities, explosions, fires, collapses, emissions of hazardous substances, failures in utility systems (electricity, water supply, gas supply).

Biological Disasters	Adverse situations arising from infections and the spread of biohazardous substances	The mass spread of dangerous diseases among people (epidemics), animals (epizootics) or plants (epiphytotics), accidents at hazardous industries resulting in the leakage of pathogenic microorganisms and toxins, biological terrorism (spraying of hazardous substances).
Social emergencies	Critical situations caused by social conflicts, contradictions and wars	Wars, terrorist attacks, famine, mass riots, major strikes, pogroms, arson, attacks, robberies, mass gatherings of people (pandemonium), mass drug and alcohol use, suicide, banditry, hostage-taking.

A detailed classification of emergency situations by source, nature of manifestation, severity, and damage is provided in the national legislation of the Kyrgyz Republic.

The impact of emergencies on persons with disabilities

Emergencies pose a threat to society as a whole. However, persons with disabilities face disproportionately greater consequences during emergencies, exacerbating the challenges associated with their disability compared to others. These include:

Inequality

During emergencies, the needs of persons with disabilities are often ignored. They face greater hardship due to a lack of accessible evacuation procedures and information. They have unequal access to humanitarian aid, housing, and resources. Their ability to participate in decision-making is limited. Responsibility for providing assistance to persons with disabilities in emergencies is often shifted to their family members, which places them in a vulnerable position as well.

Discrimination

In emergency situations, persons with disabilities face ableism—discrimination based on disability. Ableism manifests itself in prejudices that the lives of persons with disabilities are less valuable and that they are incapable of making decisions and being independent, while priority is given to persons without disabilities during assistance. Persons with disabilities are denied accessible information and communication and essential services and are excluded from recovery, rehabilitation, and treatment programs.

⁶ Resolution of the Cabinet of Ministers of the Kyrgyz Republic "On Approval of the Classification of Emergency Situations and Criteria for Their Assessment in the Kyrgyz Republic," January 17, 2025, No. 21. [Electronic resource]. // URL: <https://cbd.minjust.gov.kg/7-37415/edition/25154/ru?anchor=pr>

Social isolation	In emergency situations, lack of access to information and services leaves persons with disabilities marginalized, isolated, and alone, without the necessary assistance with care, nutrition, and daily living. As a result, they feel abandoned, forgotten, and cut off from society. Social isolation leads to poor health and mental health, decreased self-esteem, and limited participation in society.
Deterioration in quality of life and health	The lack of qualified specialists and specialized care centers, as well as problems with the provision of necessary medications and assistive technologies during emergencies, leads to a deterioration in the physical and mental health of persons with disabilities and the exacerbation or emergence of new chronic diseases caused by stress and poor living conditions.
Stigmatization of persons with disabilities	During emergency situations, stigma against persons with disabilities is particularly pronounced, manifested in society's dismissive attitudes toward them. As a result, persons with disabilities experience feelings of fear, anxiety, vulnerability, insecurity, and worry about the future. This leads to a loss of motivation for recovery, decreased trust in assistance, a breakdown in social connections, and a crisis in relationships with others.
Poverty	Emergencies exacerbate poverty among persons with disabilities, increasing their social vulnerability and increasing the risk of death and violence. Poverty and lack of access to services during emergencies have a particularly strong impact on women and girls with disabilities, exposing them to the risk of sexual, physical, and mental violence.

Stages of emergency response

The following stages are distinguished in the process of response of persons with disabilities to emergency situations:

I. Emergency Preparedness	Prevention and reduction of risks associated with emergency situations, development of an action plan, awareness raising and training of the population, and preparation of forces and resources.
II. Response to an emergency situation	Immediate, timely action, including receiving information about the occurrence of an emergency, assessing the situation, making decisions, and eliminating/mitigating the risks associated with the emergency.
III. Disaster recovery and restoration	Elimination or mitigation of the impact of hazardous factors that arise as a consequence of emergency situations and pose a threat to human life and health, restoration of the life of the injured person, and his/her (re)habilitation.

1.2. Preparedness of persons with disabilities for emergencies

Awareness of persons with disabilities about emergencies

A primary aim in emergency preparedness is to inform persons with disabilities about what an emergency is, how dangerous it is, how to respond, how to interpret warning signs, what safety rules to follow, and where to seek help. Knowing what to do before, during, and after an emergency is a crucial part of preparedness and can be crucial when seconds count.

Persons with disabilities should be informed about emergency situations that may occur in their area. For example, in the Jalal-Abad and Osh regions, landslides frequently occur, threatening populated areas. In the mountainous regions of Kyrgyzstan, mudflows occur after heavy rains, posing a serious threat to infrastructure. In winter and spring, avalanches in these areas can cause destruction and loss of life. On mountain roads with heavy traffic, particularly in the areas of the Too-Ashuu, Ala-Bel, and Boom Gorges, rockfalls frequently occur, posing a deadly threat to people. The entire territory of Kyrgyzstan is located in a seismically active zone, so earthquakes are a frequent occurrence. In the last decade, Bishkek has experienced high levels of air pollution, which exacerbates chronic diseases and reduces the quality of life of persons with disabilities. In rural areas, persons with disabilities may experience difficulties due to heavy snowfalls and winds, torrential rains, and hail, which can lead to breakdowns in public utilities (power, water, gas, internet, and road closures). In early autumn (from mid-October) and late spring (until mid-April), Kyrgyzstan often experiences frosts, which, due to the cold, can affect the well-being of persons with disabilities.

Disability awareness raising should be conducted through official information, training sessions, dissemination of instructions, posters, booklets, flyers, information sheets, video clips, television and radio programs, mobile apps, digital resources, and social media through various channels, including:

- official websites of emergency services,
- mass media,
- organizations of persons with disabilities,
- institutions providing services to persons with disabilities:
- local authorities,
- volunteer communities,
- international, charitable, and humanitarian organizations,
- local communities.

The necessary information should be provided in accessible formats, taking into account the needs of different groups of persons with disabilities, including the formats listed in Table 2.

Table 2. Adapted formats of information materials for persons with different disabilities

Type of disability	Format for adapting information materials
Sensory disability	<ul style="list-style-type: none"> • sign language translation • subtitles and captions in video materials • Braille • audio or/and verbal description • audio and video format • tactile maps and diagrams
Intellectual disability	<ul style="list-style-type: none"> • Easy-to-Read: simple and clear language • visual support (illustrations, graphs, drawings, symbols) for text information for those who have difficulty reading • communication cards • social stories • step-by-step instructions
Psychosocial disability	<ul style="list-style-type: none"> • clear written instructions combined with visual aids • a combination of written and verbal information • information should be presented in the form of specific, sequential steps • Easy-to-Read: simple and understandable language • alternative communication • digital format with an accessible interface •
Physical disability	Placement of information materials (stands, posters, brochures, etc.) at a level accessible to people using assistive devices (wheelchairs, crutches, walkers, etc.).

PRACTICAL ASSIGNMENT

Everyone should be as prepared as possible for an emergency. Key information that persons with disabilities should have is the emergency hotline number. Table 3 below lists emergency numbers in Kyrgyzstan. Assess how accessible these hotline services are for persons with different disabilities. Accessibility includes communication in the following formats:

- voice messaging,
- two-way communication with real-time text: text-to-speech, speech-to-text,
- pre-programmed emergency messages with easy access,
- video communication,
- captioning of videos,
- accessible app,
- information for persons with disabilities on how to contact and use emergency services.

Table 3. Emergency hotlines in Kyrgyzstan

Emergency lines numbers in Kyrgyzstan		Assessing the availability of the hotline
112	United emergency number	
101	Fire Department	
102	Police	
103	Ambulance	
104	Gas Service	
112 Kyrgyzstan app	News, emergency alerts and advice on how to deal with emergencies.	

Personal emergency action plan

Emergencies can happen quickly and at any time, and emergency services (ambulances, fire departments, or police) may not be able to reach a person with a disability in time. Therefore, one of the most important steps in preparing for emergencies for a person with a disability is to develop a personal emergency action plan.

A personal emergency action plan is a list of specific steps that a person with a disability and their assistants should take during an emergency to ensure safety and protection. When developing a personal emergency action plan, it is important to consider the specific needs of the person with a disability.

The plan will help the person with a disability and their loved ones consider their actions and needs and explain to others how to help them in an emergency.

The plan should include the following measures and actions⁷:

- Assessing the needs of a person with a disability for assistance in an emergency: what assistance may be needed, who and how can provide it, and what a person with a disability can do independently before receiving assistance.
- Compile a list of individuals with contacts (phone numbers, addresses, and WhatsApp numbers) who can assist the person with a disability in an emergency. This list may include family members, friends, neighbors, ayil bashchysy (village councils), house committees, and service providers (social workers, healthcare workers). Persons with disabilities should be informed that they are on this list. This list should be kept in a safe and accessible place: for example, in an airtight container, a first aid kit (see the next section of the manual), or on electronic devices (mobile phone, tablet, laptop).
- Informing the support group of the person with a disability about where essential items (medications, hygiene products, food supplies, batteries, etc.) are stored, what assistance may be needed, and how to provide it.
- Storing or transferring keys to a house or apartment to a trusted person.
- Making a list of things that a person with a disability might need for at least a week in case he or she has to stay at home or, conversely, leave it in the event of an evacuation.
- Organizing a way to receive emergency alerts: download a mobile app, subscribe to emergency services on social media, ask friends to report information about emergency situations occurring in the place where the person with a disability lives. at home or, conversely, leave it in the event of an evacuation.
- Identifying accessible transportation options in the area where the person with a disability resides that would be needed during an evacuation: requesting information from transportation companies, local authorities, or disability service providers (emergency response services, social services, medical and educational institutions) about the availability of accessible transportation.
- Contacting local authorities and emergency response services to include a person with a disability in registries or register to receive targeted assistance in the event of an emergency.

⁷ Developing an Emergency Response Plan for Persons with disabilities. [Electronic resource]. // URL: <https://www.ready.gov/people-disabilities#plan>

-
- Ensuring the uninterrupted operation of medical equipment during a power outage if a person with a disability uses it at home. To do this, it is necessary to inform the electricity supplier (in Kyrgyzstan, this is the National Electric Grid of Kyrgyzstan) that the person with a disability is included in the list of people requiring priority power restoration.
 - During emergencies, a person with a disability who takes daily medications may have difficulty filling prescriptions or finding an open pharmacy. Therefore, it is important to consider an alternative way to provide these medications in emergency situations.
 - Having printed communication cards available for a person with a communication difficulty to enable rescuers and others to communicate with them. Communication cards are visual aids (pictures, symbols, words) that help people with communication difficulties (e.g., persons with autism spectrum disorder, Down syndrome, and deaf and hard of hearing individuals) exchange cards instead of words when communicating (see "Communication Cards for Emergencies"). These cards contain a message that allows the person to express an idea, identify a need, or answer a question.
 - Compile a list of places to evacuate to if they need to leave their home, as well as the addresses of the nearest medical facilities.

After developing a personal emergency action plan for a person with a disability, it is important to share it with neighborhood committees (neighborhood committees are self-organized bodies of residents created to address local issues and improve life in their neighborhood or home area), *aiyl bashchysy* (village councils), heads of organizations (where the person with a disability works), and local emergency services. They should discuss any logistics associated with the person's plan and document any special instructions (e.g., location of a shelter area or stairwell, request for assistance using an evacuation chair, etc.) in the emergency action plan documents. The plan should be revised or updated as necessary.

The plan should also be shared with people who will support the person with a disability in an emergency, and they should practice implementing it (e.g., quickly leaving the house as in a real emergency).

The plan suggests establishing a buddy system with a friend or colleague who can notify others in case of an emergency, offer advice, or provide necessary assistance.

PRACTICAL ASSIGNMENT

Develop a personal emergency preparedness plan by filling out Table 4, tailored to your specific needs.

Table 4. Personal emergency preparedness plan for an individual with a disability

My emergency information resources	
Emergency checklist for a week	
Emergency evacuation route map	
Copies of important documents to have with you in an emergency	
Emergency contact list with phone numbers and email addresses	

Emergency aid kit

During emergencies, persons with disabilities may require an emergency kit tailored to their specific needs. Assembling one is an important part of emergency preparedness. An emergency kit is a pre-assembled set of items needed to provide immediate assistance, stabilize the condition, and prevent deterioration. Having such a kit on hand can help save lives when professional support is not yet available.

The emergency aid kit includes the following items:

- Contact list: hotline numbers, phone numbers, WhatsApp and other social media accounts, and email addresses of people who can provide assistance to a person with a specific disability. This list should be kept in a Multifora (a clear plastic document storage envelope).
- A week's supply of medications (if available, also a mini-refrigerator for storing medications that require refrigeration) and important medical documents: medical records, doctor's orders, prescriptions.
- Communication tools: telephone, communication cards (see "Communication Cards for Emergencies"), electronic apps, social narratives (see "Social Narratives for Emergencies"), a notepad and pen (for writing if there is no service), and other communication tools that may be needed.
- Mobility aids: wheelchairs, canes, walkers (if available).
- Batteries, portable chargers (power banks), batteries for assistive devices (hearing aids, cochlear implants, electric wheelchairs, electronic prosthetics, pacemakers, screen readers, speech synthesizers, etc.), flashlights,
- Hygiene supplies: soap, toothbrush, towel, cleaning supplies for assistive devices (e.g., hearing aids), diapers, sanitary pads, dry and wet wipes, masks, gloves, etc.,
- Extra clothing: underwear, socks, warm clothes, shoes, a warm blanket,
- Extra food and water: bottled water, shelf-stable foods (canned goods, granola bars, dried fruit).

It could be included items in the kit that provide comfort and reduce anxiety during a stressful event, such as a favorite pillow, blanket, food (e.g., cookies, granola bars), and other things.

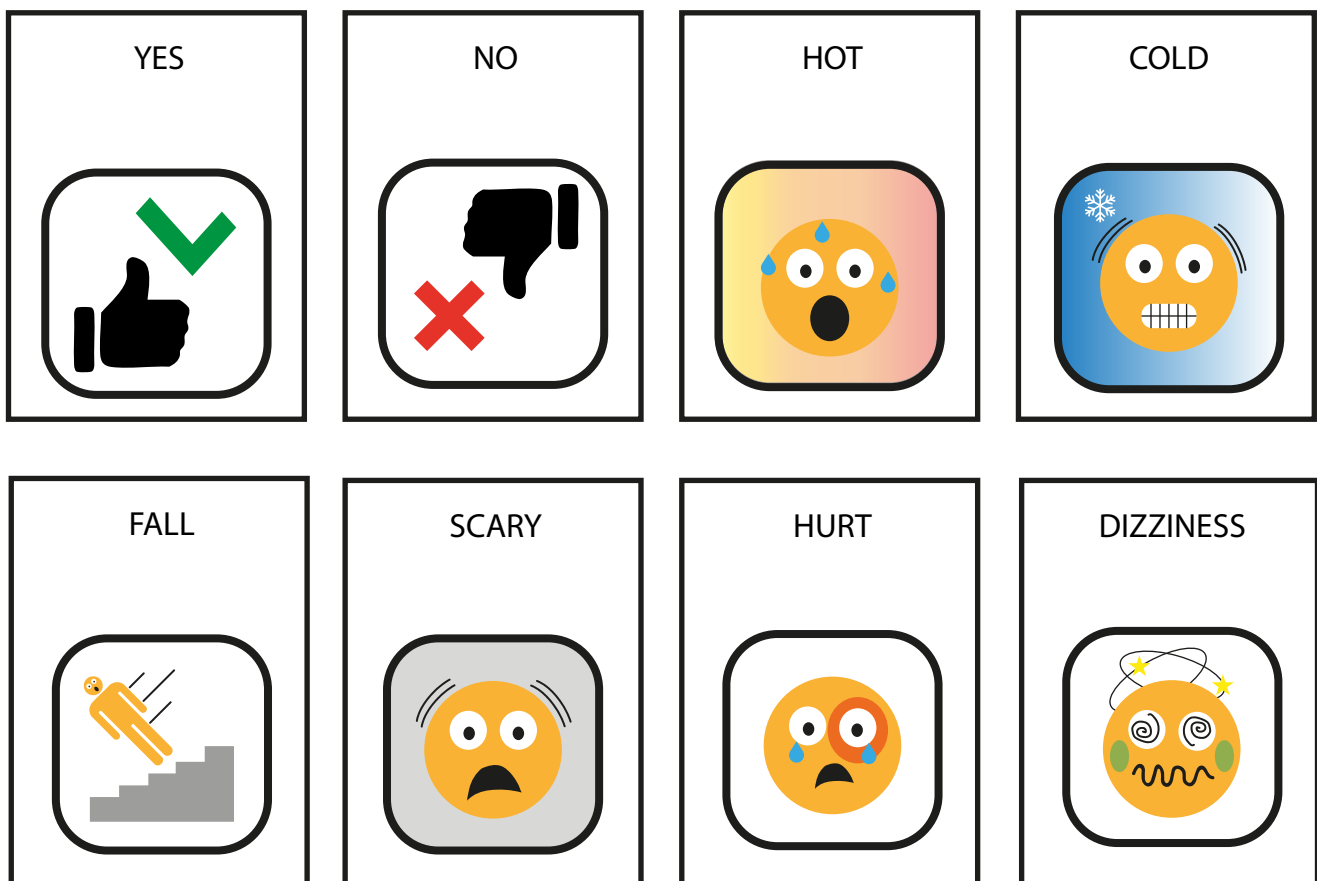
Communication cards for emergency situations

Persons with verbal communication difficulties (e.g., those with autism spectrum disorder, Down syndrome, speech or hearing impairments, etc.) may require assistance in communicating their needs to emergency personnel, firefighters, police, and other agencies during emergency situations. In such cases, it's important to have visual aids on hand that allow for alternative communication. One such aid is communication cards, which include pictures and simple phrases, are made of durable material, and are held together with a ring clip for easy access⁸.

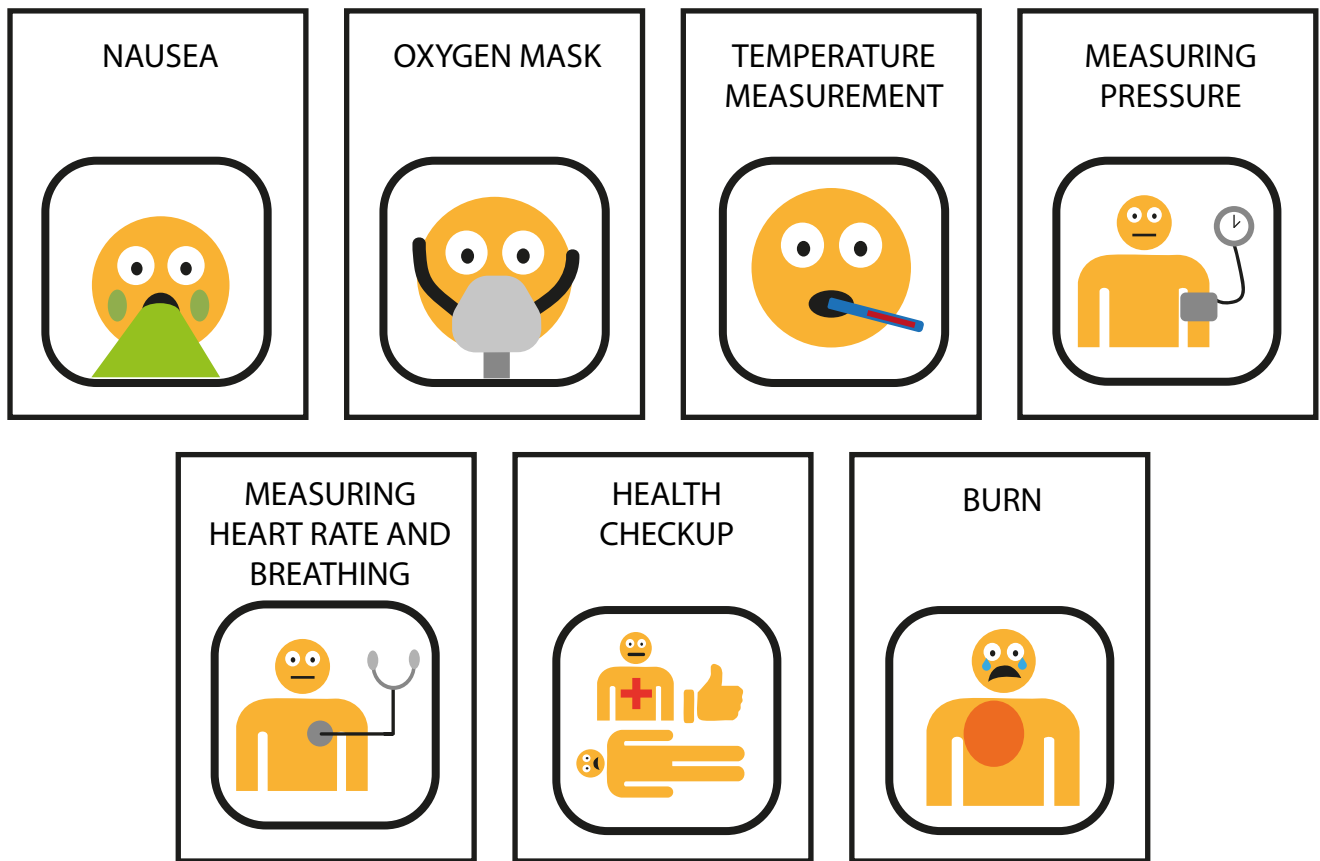
A person with communication difficulties can hand a card depicting their need for assistance to a rescuer, first responder, or assistant, thereby conveying the necessary information. Conversely, others can select cards with questions and show them to the person needing assistance to elicit the necessary information.

Communication cards can address personal information, a person's mental or physical condition, required actions, affirmations or denials (yes/no), or needs for specific items.

Illustration 1. Communication cards for people with speech impairments to respond to emergency situations.

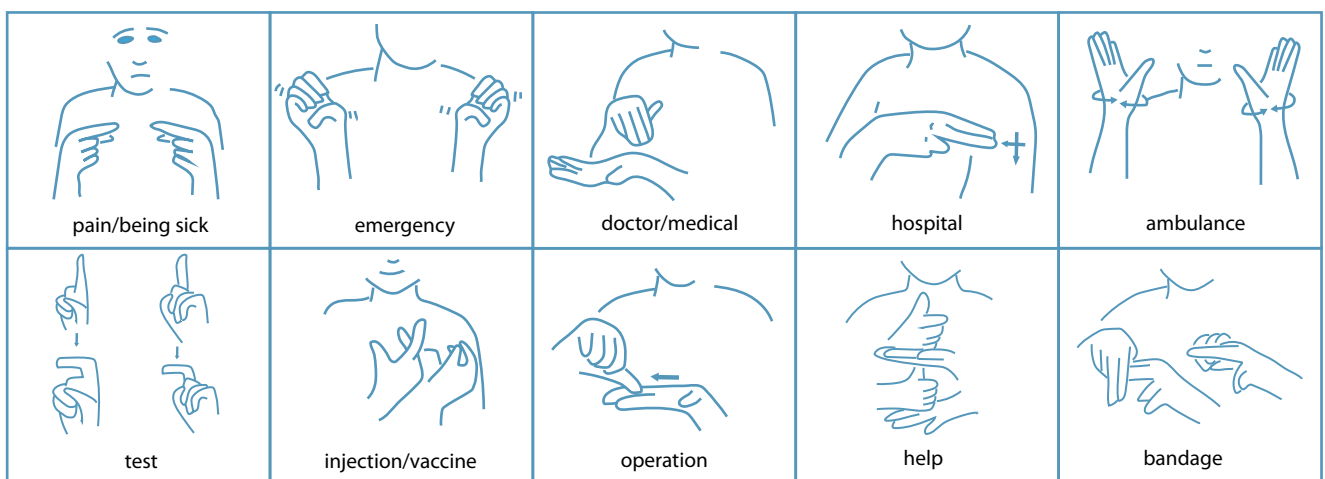


⁸ University of Florida. Pain Assessment and Management Initiatives. Communication cards. [Electronic resource]. // URL: <https://pami.emergency.med.jax.ufl.edu/resources/communication-cards/>



Communication cards can also be used to help deaf and hard of hearing people communicate with their caregivers. The cards contain images of sign language words and phrases and their written translations.

Illustration 2. Communication cards for people using sign language to communicate in emergency situations



Social narratives (stories) for emergency situations

Social narrative (story) is a tool that allows persons with intellectual and psychosocial disabilities to explain in simple terms what happens in emergency situations in order to reduce their anxiety, feelings of depression and understand the situation⁹. They help provide guidance and examples of appropriate responses to emergency situations¹⁰.

The purpose of a social narrative is to provide a clear example of expected behavior. Social narratives consist of directive sentences (sentences that tell a person what to do) and descriptive sentences (sentences that describe a situation). A well-written social story contains both types of sentences. Below are different types of social narratives.

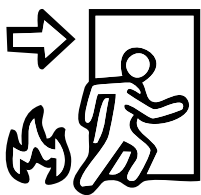
Illustration 3. Social narrative "Emergency"



Dangerous situations could occur in my country. These could include earthquakes, fires, explosions, and violence. People could get hurt.



I may scream or cry. I may be in pain. I may be angry, frustrated, or sad. My family may feel the same way. It's okay to be angry.



We may have to leave the house to go to a safe place. It's important for me to listen and follow the directions of my family or other people I know. I might take a deep breath, ask for a firm grip, or ask for help.

⁹ The Autism Hub. Resources for autistic people and their families affected by war and displacement, 2022. [Electronic resource]. // URL: <https://autismunity.org>

¹⁰ Hume, K., Waters, V., Dees, B., Rentschler, L., Sam, A., Steinbrenner, J., Kennedy, T., Tomaszewski, B., Reszka, S., Perkins, Y., Nowell, S., & Bossen, B. (2022). Resources for Autistic Individuals and their Families Impacted by War and Displacement. Chapel Hill, NC: School of Education, Frank Porter Graham Child Development Institute, and Allied Health of the University of North Carolina at Chapel Hill. [Electronic resource]. // URL: <https://afirm.fpg.unc.edu/resources-autistic-individuals-and-their-families-impacted-war-and-displacement>

Illustration 4. Social narrative “Urgent departure”



Illustration 5. Visual instructions for action in case of injury

What to do in case of injury?		
1	Check for other hazards (sharp objects, broken glass, broken wires).	
2	Call emergency services.	
3	Call bystanders for help.	
4	If bleeding occurs, cover the wound with a clean cloth.	
5	If a burn occurs, rinse the wound with cold water for 15 minutes.	
6	If a bone is broken, carefully place the bone between two rigid objects (like sticks) to prevent it from moving.	
7	Find a safe place and wait for help.	

PRACTICAL ASSIGNMENT

Create visual instructions for persons with psychosocial and intellectual disabilities on how to assemble a first aid kit for an emergency situation related to a cold snap in Kyrgyzstan. Include images and names of ten essential items that should be included in this emergency kit, along with the necessary steps for enduring these specific weather conditions.

What should I do in case of a sudden cold snap?		
№	Name of the item	Image of the item
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

1.3. Response to emergencies

Receiving an emergency signal

Standard emergency notification for persons with disabilities includes fire alarms equipped with audible signals, bells, horns, or loudspeakers.

Visual devices, such as a strobe light or text display, are also recommended to alert people who are deaf or hard of hearing. A strobe light is a device that flashes a light on and off momentarily. A digital sign can also be installed indoors to display text emergency notifications (Illustration 6).

Illustration 6. Digital Sign



Photo© Alertus

Visual components may not be provided in older buildings constructed to earlier codes. In such cases, the emergency response planning team should consider how residents who cannot hear the fire alarm will be warned to evacuate. Local emergency services or local authorities should then be contacted to install special signaling devices.

In addition to visual devices, smoke alarms (Illustration 7) and vibrating, tactile, and shaking devices (Illustration 8) are also recommended. For example, an alarm that vibrates the bed of a deaf or hard-of-hearing person. Hearing aids with increased volume and low-frequency sounds can also be used (Illustration 9).

Illustration 7.
Smoke detector



Photo © Planeta-b

Illustration 8.
Light bell



Photo © Istok-audio

Illustration 9.
Induction loop



Photo © Istok-audio

A group of deaf and hard of hearing individuals is encouraged to subscribe to emergency text alerts on their smartphones sent by emergency services, local authorities, and other organizations responsible for emergency response and public assistance.

Deaf and hard of hearing individuals may not hear audible alarms. Therefore, they should request that others get their attention through touch and eye contact, clearly stating the problem, using gestures and directions, writing a brief explanation on paper, and providing visual instructions on choosing the safest route or direction, including exits or evacuation maps.

Accessible emergency notification systems should be provided for blind and visually impaired individuals. These may include devices with loudspeakers (Illustration 10) and flashing lights, as well as smartphone apps for emergency notifications. Clear, color-coded, and accessible signage should be provided throughout the premises, as well as handrails and step markings on evacuation stairways. In addition, fire safety signs in Braille can be installed and emergency response instructions can be provided to blind and visually impaired people in Braille (Illustrations 11-12), large print, electronically, or audio format.

Illustration 10.
Sound Beacon



Photo © Planeta-b

Illustration 11.
Exit Sign with Braille.

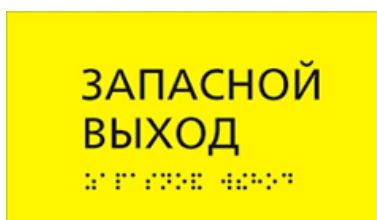


Photo © ozon.ru

Illustration 12.
Evacuation Plan with Braille



Photo © Stock.adobe.com

Blind and visually impaired persons are encouraged to request verbal instructions from others regarding the safest route or direction, estimated distances, and directional signs.

Some persons with disabilities may react to audible or visual alarms with confusion, fear, or panic, so it is important to consider their individual needs.

Persons with speech impairments can hear standard alarms and voice announcements and see visual indicators warning of danger and the need to evacuate. Therefore, they do not require special accommodations or additional planning.

Persons with psychosocial and intellectual disabilities can hear standard alarms and see visual indicators indicating the need to evacuate. However, it is important to assess their ability to recognize, understand, and respond appropriately to fire alarms and other emergency notification systems. Therefore, if necessary, they should be provided with the necessary assistance from others, for example, by demonstrating communication cards or visual instructions (see “Communication cards for emergencies”, “Social narratives (stories) for emergencies”).

PRACTICAL ASSIGNMENT

Conduct an assessment of the accessibility of emergency signaling systems, taking into account the needs of persons with different disabilities, by completing Table 5.

Table 5. Measures for notifying persons with different disabilities about emergencies

Disability Type	Emergency warning and signaling measures
People with sensory disabilities: <ul style="list-style-type: none">• Deaf and hard of hearing people• Blind and visually impaired people	
Persons with psychosocial disabilities	
Persons with intellectual disabilities	
Persons with physical disabilities	

Behavior of persons with disabilities in emergency situations

During emergency situations, it is important to take precautions specific to the individual's disability, including using assistive devices for orientation and signaling, and informing others about their disability and related needs. Key behavioral principles include remaining calm, immediately contacting emergency services, and following their instructions and directions.

During emergencies, individuals with disabilities are advised to take the following actions:

- Inform emergency services of the incident, its location, and any threats. It is also important to inform emergency services of the individual's disability and any specific needs (e.g., the need for accessible transportation).
- Signal people around you for help. Blind and visually impaired people are advised to use a white cane for orientation and to attract the attention of others. Reflective elements on the cane, as well as on clothing, will help rescuers spot them. Deaf and hard-of-hearing people are advised to use paper or a phone to type to explain what is happening to others. Persons with limited mobility are advised to use a call button. This device allows persons with limited mobility (persons with disabilities, the elderly, parents with children) to notify staff when they need help. It is installed at building entrances, in restrooms, and other locations where assistance is needed.
- Notify relatives, caregivers, or responsible individuals so they can provide emergency assistance to persons with disabilities, as planned during emergency preparedness.
- Monitor emergency information disseminated by emergency services or local authorities via television, radio, text messages, social media, or public address systems. This information includes an explanation of what is happening and instructions on what to do in such situations. If a person with a disability cannot access this information, they should ask others for clarification or rely on the actions of others.
- Carry an emergency kit containing items needed during an evacuation (see "Emergency aid kit").
- Move to a safe location. This depends on the type of emergency. This could be an interior wall or doorway, a location away from windows, loose furniture, or heavy objects that could fall or topple. In some cases, it is necessary to quickly exit the building. Most blind and visually impaired people are familiar with their surroundings and commonly used routes. Since the emergency route to safety is likely different from the usual one, blind and visually impaired people may require assistance. The assistant should support the person and guide them along the evacuation route. If people with limited mobility are unable to move to a safer location on their own, they can temporarily remain in a stairwell, indoors, or away from the hazard to await help, while informing emergency services of their location.

Люди с инвалидностью наравне со всеми должны быть извещены заранее о том, где находится безопасное место и как туда попасть. Безопасные места сбора людей должны иметь соответствующие обозначения (иллюстрации 13-14).

Illustration 13. Assembly area for a fire near the Hyatt Hotel in Bishkek



Illustration 14. Assembly area for an emergency near a public building in Bishkek



Photo © Rakhat Orozova

Exit routes from rooms and buildings should be marked with visible directional and informational signs, including raised letters or Braille, large print, arrows, visual and tactile markings, diagrams to convey evacuation routes and instructions, and descriptions of exit locations, accessible doors, corridors, ramps, and stairways.

It is important to note that elevators are not used in emergency situations unless they are specifically designed for such use. Recently, construction companies have been focusing efforts on creating elevators that are safe for use in emergency situations.

Evacuation

In some emergency situations, people are advised to leave their current location, requiring evacuation. Evacuation notices can be broadcast via television, radio, social media, mobile phones, and sometimes even door-to-door.

A standard building evacuation system consists of three components: evacuation routes, a building notification system for occupants or workers, and directions to the evacuation routes. Evacuation routes are unobstructed paths from any point in the building to an exit or safe space, including corridors, doors, stairways, smoke-proof barriers, horizontal exits, ramps, escape routes, escalators, moving walkways, fire escapes, fire ladders, emergency slides, alternating steps, safety zones, and elevators. A notification system consists of various emergency notification devices, including alarms, bells, sirens, speakers, indicator lights, or text displays. Evacuation route directions are directions to various exits or safe spaces, which may include visual signs and instructions displayed in various forms. Care must be taken to ensure all three components are accessible to persons with various disabilities.

Evacuation can take several days, and in some cases, it may be an emergency. Ensuring a prompt and safe evacuation, regardless of the circumstances, requires careful planning.

Emergency response agencies must have pre-established procedures to ensure no one is left behind. They must ensure that persons with disabilities can follow evacuation instructions and arrive at their destination without delays or obstacles. Therefore, they must check in advance for the availability of steps, ramps, elevators, accessible restrooms, sufficiently wide corridors, trained staff, accessible transportation, and appropriate assistive equipment.

There are four evacuation options:

- **Horizontal evacuation:** through building exits to the street or to undamaged areas of apartment buildings,
- **Vertical evacuation:** using stairs to exit the building to the street,
- **Stay put:** if you cannot leave the area immediately, it is important to maintain contact with emergency services,
- **Safety zone:** moving to a safe area.

Persons with disabilities must be informed of all evacuation routes and safe areas, and have access to building floor plans and entrance and exit locations.

Before evacuation

It is recommended to plan in advance where a person with a disability could evacuate to in the event of an emergency requiring them to leave their home or neighborhood. Local authorities (akimiyat, ayil okmotu, rescue services, and social services) can provide information about emergency shelters or assembly points, and consider accommodation options with relatives or friends, hospitals, or hotels.

It is also necessary to determine an accessible evacuation route in advance, conduct emergency evacuation rehearsals to be prepared for various scenarios, practice rules for quickly leaving the home, and clarify information about available transportation. Preliminary rehearsals of emergency evacuation routes are essential for ensuring a safe evacuation.

Residents of buildings or employees of organizations should be invited in advance to assist persons with disabilities in an emergency. If no volunteers are available, someone willing to assume this responsibility should be identified. They should be aware that before resorting to providing assistance, it is important to always ask the person with a disability how to assist them, move them, and what to take with them.

When preparing for an emergency evacuation, it is important to prioritize preparing a first aid kit, periodically checking its current status, and ensuring it is easily accessible (see "Emergency aid kit").

During the evacuation

During an evacuation, a person with a disability should take an emergency aid kit, necessary assistive devices, medical support medications, and other essential items for several days.

If a person has special needs, information about his or her condition, needs, and emergency contact information should be carried. This information can be placed on cards, badges, or special bracelets, or carried in a pocket or wallet. If a person uses a smartphone, information about his or her emergency needs should be added to the device.

Upon arrival at the evacuation site, it is important to inform shelter staff of the person's disability-related needs and explain how best to assist them.

Evacuation sites should be designed and equipped to be accessible and accommodate persons with disabilities without hindrance. A person with a disability must have access to any equipment necessary to ensure their safety. People unable to move independently should be lifted, dressed (if necessary), and transported by caregivers or rescuers trained in such work and using appropriate procedures. Rescuers use specialized equipment when evacuating persons with limited mobility. Table 6 shows several types of such emergency rescue equipment.

Table 6. Emergency rescue equipment for the evacuation of persons with physical disabilities

Title	Description	Illustrated example
Evacuation chairs	<p>This lightweight, compact, folding chair is narrow in width and features latching straps and small wheels, distributing a person's weight evenly throughout the structure.</p> <p>It can be operated by one person. This device is designed for transporting people down stairs, hallways, and passageways.</p> <p>Evacuation chairs should be located in an easily accessible location, such as on emergency stairways.</p>	<p>Illustration 15. Evacuation chairs</p>  <p>Photo © safelincs.co.uk</p>

Stretcher	<p>This portable, lightweight, and easy-to-carry device is made of waterproof material and features secure straps, handles, and soft surfaces for comfort and safety (Illustration 16).</p> <p>A stretcher is operated by one or more people and is designed for safe transportation down stairs or on a level surface.</p>	<p>Illustration 16. Stretcher</p>  <p>Photo © nassguard.sa</p>
Evacuation mats (underlays)	<p>This compact mat features a foam pad for added protection and secure straps to secure the user (Illustration 17).</p> <p>It can be operated by one or two people. In the first case, the user pulls one of the loops; in the second, two people carry the mat, holding it by both ends.</p>	<p>Illustration 17. Evacuation mat</p>  <p>Photo © Thorpe Mill</p>
Evacuation sleds	<p>These are devices that slide across surfaces (ground, floor, concrete, asphalt, carpet, etc.) and are equipped with traction straps for transport and securing straps for a person. When used, the person's hands remain free, allowing them to move freely.</p>	<p>Illustration 18. Evacuation sleds</p>  <p>Photo © medsled.com</p>

A new emergency evacuation technology has been developed for blind and visually impaired people. It's called "guiding sound"¹¹. This is an audible signal that directs people to safety by communicating the location of exits using a broadband noise. The varying tones and intensities of these devices provide easily distinguishable cues for finding the exit. Once people hear the sound from these devices, they intuitively follow it to quickly find their way out.

However, it's important to note that not all blind and visually impaired people can navigate an emergency and find an exit or safe area independently. In such cases, one or two people willing and able to assist them are needed.

¹¹National Fire Protection Association. Emergency Evacuation Planning Guide for Persons with disabilities. USA, 2007. [Electronic resource]. // URL: www.nfpa.org/disabilities

After receiving an emergency notification, deaf and hard of hearing people should follow standard exit signs and directions and use any standard evacuation routes from the building. However, some may require assistance in areas with low or no lighting, where their balance may be impaired without visual cues.

Persons with psychosocial and intellectual disabilities may require assistance recognizing alarms and understanding their meaning, as well as identifying visual indicators that warn of danger and the need for evacuation.

Rescuers who must evacuate persons with disabilities must be trained and instructed in evacuation procedures appropriately, professionally, and with minimal risk to those providing or receiving assistance. All equipment and technical devices must be in good condition to ensure full functionality in the event of an emergency. Emergency services personnel and other caregivers must always maintain a correct, professional, and non-discriminatory attitude toward persons with disabilities.

Evacuation areas must be accessible and comfortable for temporary stays. They must be equipped with all necessary equipment for the rapid exit and recovery of persons with disabilities after an emergency.

After the evacuation

At this stage, the primary focus is on restoring normal conditions and addressing the consequences of the emergency. After the evacuation, it is important to evaluate the actions of all participants, paying attention to their skills and behavior in a real emergency situation with respect to persons with disabilities. Any problems encountered by persons with disabilities during the evacuation (such as inaccessibility of the alarm, inability to descend stairs, or equipment malfunction) should be recorded and subsequently addressed.

Special attention should be given to individual psychological support, based on maintaining calm and respecting their autonomy. This support includes ensuring safety, active listening, addressing needs, and referrals to specialists to reduce acute stress (psychologists, psychotherapists, social workers, etc.).

1.4. Disaster Recovery

To facilitate disaster recovery, persons with disabilities must have access to inclusive services, including healthcare, nutrition, water, sanitation, protection, shelter, education, and resource support.

Healthcare and Nutrition

Obtaining necessary and timely medical care is a primary goal for the recovery of persons with disabilities affected by emergencies. They may be unable to access it due to a lack of awareness of available medical facilities, an inability to travel independently, or a lack of financial resources.

When preparing for emergencies, it is important for decision-makers to compile a list of medical services available to persons with disabilities and share it with emergency services and disability communities. All healthcare facility staff should be aware of the specific needs of persons with disabilities and how to address them and be familiar with the various specialized services available to them (sign language interpretation, audio description, Easy to Read, personal assistance, etc.). A clear referral system to specialized services within the facility and to other healthcare providers should be developed, and follow-up care for persons with disabilities should be ensured to ensure their recovery after discharge from the facility and that their healthcare needs continue to be met.

Healthcare facilities are responsible for providing assistive devices (e.g., crutches, wheelchairs, hearing aids, prosthetics, and eyeglasses) and medications.

Providing food to persons with disabilities during emergencies requires ensuring accessible food distribution points and delivery options, providing assistive devices for eating, and providing individualized support (e.g., supplementary nutrition or special diets). It is important to address the specific nutritional challenges faced by persons with disabilities, such as feeding difficulties, and prevent neglect or stigmatization by tracking malnutrition using disability-sensitive indicators.

Water and sanitation

Access to water and sanitation is a basic need for all persons with disabilities. Ensuring equal access to water and sanitation may require additional measures, including assistance with water collection without queues or long delays; accessible toilets (with ramps, grab bars on both sides, sufficient turning space for a wheelchair user, wide doors, and accessible instructions); accessible information and communication related to water and sanitation through adapted communication channels: for example, oral messages or Braille for blind and visually impaired people; written materials, visual or sign language for deaf and hard of hearing people; simple language, Easy to Read, communication cards, or social narratives for persons with psychosocial and intellectual disabilities; and accessible information for persons with physical disabilities.

Persons with disabilities should know where and when water will be delivered. The water supply system must be accessible and safe for them. It is recommended to establish a network to support persons with disabilities in accessing water and to raise public awareness of their right to water and sanitation services on an equal basis with everyone else.

Protection from violence

During emergencies, persons with disabilities are more likely than persons without disabilities to experience all types of violence (physical, sexual, emotional, and neglect). To prevent this, it is important to locate persons with disabilities and their family members close to facilities that provide services and assistance to those affected by emergencies. It is also recommended to recruit and train community volunteers to assist persons with disabilities and their families, provide them with channels of communication with specialists and rescuers, and provide psychosocial support if they experience stress, discomfort, and fear. Particular attention should be paid to women with disabilities, as they are particularly vulnerable in such situations due to overprotective families, low self-confidence, social isolation, and a lack of support related to both disability and gender.

Education

Children with disabilities must continue their education in school on an equal basis with other children. Therefore, it is necessary to take all measures to ensure the unimpeded resumption of the educational process with adapted infrastructure, teaching materials, tools, and teaching methods, taking into account the needs of children with disabilities.

Recovery

The U.S. Centers for Disease Control and Prevention has developed a set of recommendations for persons with disabilities to help them recover from emergencies¹². These recommendations are summarized below.

To maintain mental health and reduce stress associated with an emergency, it is recommended to eat a healthy diet, engage in more physical activity, get enough sleep, and avoid alcohol, tobacco, drugs, and medications not prescribed by a doctor.

It is important to continue following your personal emergency response plan and the instructions of support professionals. If you feel unwell, you should tell your doctor or someone you trust.

In emergency situations, it helps to be able to share your feelings with others and talk to friends, family, or people who support the person with a disability.

During an emergency, it's important to stay informed by watching, listening to, or reading the news. However, to reduce stress and protect their mental health, persons with disabilities are advised to take breaks from watching the news and using social media. Instead, try to engage in activities that help them stay calm.

¹² Coping with Your Feelings Before, During, and After an Emergency. [Electronic resource]. // URL: <https://www.cdc.gov/disability-emergency-preparedness/communication-resources/coping-easy-read.html>

Resource support and networking

During emergencies, persons with disabilities require resource support and networking. This includes creating a personal support network of trusted individuals who can provide emergency assistance, evacuation, communication, and basic needs before, during, and after a crisis.

For this reason, it is recommended that a person with a disability form a network of at least three people for each location they frequently visit (e.g., home, work, or rehabilitation center). The network can include family members, neighbors, friends, colleagues, and relatives.

Network members should regularly exchange key information: knowledge about the contents of the person with a disability's personal emergency response plan, the location of an emergency kit, necessary medications, documents, house keys, how to use the person with a disability's assistive devices, etc. It is important that all network members are aware of their specific needs and capabilities. If needed, the person with a disability can share copies of relevant emergency documents, evacuation plans, and an emergency health information map.

Members of this group should practice implementing the personal emergency response plan and evacuation to ensure everyone is familiar with the plan and identify any gaps. They should agree on and practice ways to communicate with the person with a disability in an emergency, including when phones are not working.

Persons with disabilities are also encouraged to contact local governments and disability organizations and register with the local emergency management agency to be included in a voluntary registry for targeted assistance during natural disasters.

Persons with disabilities can also find or form disability support groups or self-help groups in the person with a disability's area and identify resources available during emergencies. Self-help groups of persons with disabilities can work together to develop emergency response plans, research evacuation and transportation availability, assemble emergency kits, organize training exercises, identify inclusive services and specialists needed during emergencies, and provide psychosocial support to each other before, during, and after emergencies.



Responses of persons with disabilities to humanitarian crises

2.1. Humanitarian crises and their impact on persons with disabilities

What are humanitarian crises?

Humanitarian crises are emergencies that threaten the health, safety, and well-being of large numbers of people due to disruptions to their basic livelihoods (e.g., access to food, water, healthcare, and shelter). Humanitarian crises are caused by armed conflicts and civil wars, natural disasters with widespread destruction, widespread disease outbreaks (pandemics), political and economic collapses accompanied by infrastructure destruction and economic decline, and global climate change, which forces people to flee their homes in high-risk climate zones.

According to the United Nations, by 2025, approximately 305 million people will be in humanitarian crisis due to conflict and climate change, leading to forced displacement of civilians, hunger, and destruction¹³.

To overcome humanitarian crises, humanitarian aid is provided to the affected population in the form of food, distribution of goods and services, resettlement, water supply, distribution of medicines, protection and support, coordination, logistical support, and provision of communications.

The impact of humanitarian crises on persons with disabilities

Persons with disabilities are disproportionately affected during humanitarian crises, as many opportunities for humanitarian aid, shelter and assistance become inaccessible to them¹⁴. Furthermore, in post-disaster and post-conflict situations, disability rates among affected populations increase as people become injured and require specialized care and resources.

A study conducted by the international organization Handicap International notes that persons with disabilities face three main challenges during humanitarian crises: physical vulnerability, deteriorating psychological well-being, and high levels of violence against them¹⁵.

¹³ UN. Crisis Response, 2025. [Electronic resource]. // URL: <https://www.un.org/ru/global-issues/crisis-and-emergency-response>

¹⁴ UN Human Rights Council. Final research-based report of the Human Rights Council Advisory Committee on good practices and key challenges in the promotion and protection of human rights in post-disaster and post-conflict situations, 2025. [Electronic resource]. // URL: <https://docs.un.org/ru/A/HRC/28/76>

¹⁵ Handicap International, Disability in humanitarian contexts Views from affected people and field organizations, 2015. [Electronic resource]. // URL: <https://www.un.org/disabilities/documents/WHSDisability-in-humanitarian-contexts-HI.pdf>

Physical vulnerability	During humanitarian crises, due to direct physical impact, persons with disabilities lose mobility and develop new disabilities, including amputations, reduced or lost vision and hearing, and additional physical or sensory impairments. Their dependence on others increases, leading to social isolation. Many people lose the ability to use their assistive devices due to their loss or difficulties with maintenance.
Deterioration of psychological situation	The second most significant impact of humanitarian crises on persons with disabilities is psychological stress, disorientation, self-doubt, decreased independence, and deterioration in emotional well-being. This is due to the loss of family members, the absence of caregivers, homelessness, forced displacement, lack of income and resources for survival, essential medications, and emotional support.
High levels of violence against persons with disabilities	<p>During humanitarian crises, individuals with disabilities are at a greater risk than those without disabilities of experiencing physical, sexual, and emotional violence, necessitating enhanced protection. In such crisis situations, they often face barriers to accessing toilets and bathing facilities, which results in a lack of privacy for personal hygiene and further elevates their vulnerability to violence.</p> <p>Many individuals with disabilities who are compelled to leave their homes for safer areas often experience abuse, significantly heightening their vulnerability during crises.</p>

The challenges faced by persons with disabilities during humanitarian crises include:

- Lack of access to basic services such as food aid and water, sanitation and hygiene, as well as psychosocial support, protection, housing, and non-food items.
- Lack of access to specialized services, including special education, adapted communication, habilitation and rehabilitation, personal assistance, reasonable accommodations, and assistive devices.
- Lack of trained specialists capable of providing emergency assistance to persons with various disabilities in humanitarian crises and lack of specialized equipment.
- Societal bias against disability, based on negative stereotypes and attitudes toward persons with disabilities, leading to their discrimination.

PARCTICAL ASSIGNMENT

Identify the organizations or individuals responsible for the tasks that need to be addressed during humanitarian crises by completing Table 7.

Table 7. Responsible Organizations and Individuals in Humanitarian Crises in Kyrgyzstan

Nº	Task	Responsible Organizations and Individuals in Kyrgyzstan
1	Evacuation of victims during humanitarian crises	
2	Organization of temporary shelter	
3	Delivery and distribution of humanitarian aid (water, food, medicine)	
4	Provision of medical care	
5	Information support to the population	

2.2. Responses to humanitarian crises for persons with disabilities

A twin-track approach

In 2019, the Inter-Agency Standing Committee of the United Nations General Assembly developed guidance on the inclusion of persons with disabilities in humanitarian action¹⁶. This guide explains the importance of using a twin-track approach in humanitarian action, combining inclusive programming for the general population with targeted interventions for persons with disabilities. On the one hand, humanitarian programs and interventions designed for all people should include persons with disabilities. For example, food distribution sites, public toilets, and information related to the humanitarian crisis should be accessible to everyone, including persons with disabilities. On the other hand, humanitarian programs should address the specific needs of persons with disabilities (e.g., the availability of assistive devices and food delivery to persons with disabilities who are unable to access distribution sites).

This guidance notes that in response to humanitarian crises, persons with disabilities can take the following actions: participating in crisis response planning, organizing support networks, monitoring the availability of services, communication, and sharing information needed in humanitarian crises, and raising public awareness of the rights and needs of persons with disabilities in emergency situations.

Participation of persons with disabilities in planning responses to humanitarian crises

During humanitarian crises, the needs of persons with disabilities are often ignored, leading to dire consequences (see "The Impact of Humanitarian Crises on Persons with Disabilities"). Therefore, their participation in humanitarian response planning is critical at every stage of the crisis response: from needs and risk assessment to planning and resource allocation. Meaningful participation of persons with disabilities in humanitarian action means:

- Active participation in the entire humanitarian process, from the design and implementation to the evaluation of aid programs; not just presence, but the ability to influence decision-making is important. Incorporating the diverse perspectives of persons with different disabilities into decision-making ensures the effectiveness of services and the respect of rights.
- Creating an inclusive and accessible environment: Humanitarian efforts should be planned with accessibility in mind from the outset, including issues such as physical access, different information formats, and adapted communication.

¹⁶ Inter-Agency Standing Committee. Inclusion of Persons with Disabilities in Humanitarian Action Guidelines, 2019. [Electronic resource]. // URL: <https://interagencystandingcommittee.org/>

-
- Ensuring autonomy: Persons with disabilities should have the legal and practical ability to make their own choices and decisions.
 - Capacity development: Persons with disabilities should be able to develop their own knowledge and capacity to develop responses to humanitarian crises.

Organizing mutual support networks

Mutual support among persons with disabilities during humanitarian crises is critical because it allows them to support each other and solve problems together during times of heightened risk.

Persons with disabilities can form groups or communities to share information about where to obtain food, medicine, medical care, or shelter; help with everyday needs (e.g., mobility, eating, finding and using assistive devices); disseminate important information about service availability and evacuation routes; and jointly seek assistance from local authorities or international organizations, advocating for their rights and ensuring access to humanitarian aid.

These groups operate on a peer-to-peer principle, meaning people with similar experiences collaborate to solve the problems they face.

Organizations of persons with disabilities play a vital role in ensuring access to humanitarian aid and protection in humanitarian crises. These organizations are comprised of persons with disabilities, a majority (51%) of whom serve at all levels, including in the organization's management, on staff, or as volunteers. General Comment No. 7 of the UN Convention on the Rights of Persons with Disabilities sets out criteria for organizations of persons with disabilities:

- These organizations are established primarily to promote and protect the rights of persons with disabilities,
- They are recruited and represented by persons with disabilities,
- Such organizations may be local, national, regional, or international in scope,
- These organizations may represent persons with one or more types of disabilities or may be open to membership by all persons with disabilities,
- These organizations represent the interests of diverse groups of persons with disabilities (e.g., different genders, sexes, ethnicities, ages, migrant or refugee status),
- These organizations may operate as individual organizations, coalitions, intersectional organizations, or umbrella organizations of persons with disabilities,
- In most cases, these organizations are not affiliated with any political party and are independent from government authorities and any other non-governmental organizations.

Disability organizations can assist during humanitarian crises in the following ways:

- They can act as intermediaries, helping humanitarian organizations understand the specific needs of persons with disabilities and provide targeted assistance.
- They can disseminate important information about available resources to persons with disabilities, including those who are socially isolated.
- These organizations can provide psychological support and recovery assistance to affected persons with disabilities.
- They should be involved in the creation of temporary or permanent accessible environments, including the installation of ramps, handrails, and other assistive elements, as they have extensive personal experience in this area.
- They can assist in obtaining assistive devices (wheelchairs, crutches, or technical aids), which are often needed in emergency situations.
- They can organize fundraising and recruit volunteers to provide emergency assistance, such as evacuation or transportation of persons with disabilities.

Recommendations for persons with disabilities

In humanitarian crises, persons with disabilities are encouraged to:

- pay particular attention to their safety, health, and emotional well-being,
- stay informed through accessible channels, seek information from reliable sources, and contact state organizations and disability organizations if information needs to be adapted to the required format: sign language, Braille, audio description, or plain and simple language,
- have adequate supplies of food, medication, assistive devices, and other essential items,
- know the evacuation plan, having previously researched safe routes and areas,
- cooperate with rescuers to remove obstacles, and communicate their specific needs clearly and succinctly,
- advocate for and seek all necessary services, including food, shelter, water, sanitation, health care, and education,
- support caregivers: Recognize the important role of family members and other caregivers who assist persons with disabilities, as they may also require support.

PRACTICAL ASSIGNMENT

Identify which disability organizations in Kyrgyzstan can provide assistance to persons with specific disabilities in humanitarian crises by completing Table 8.

Table 8. Disability Organizations in Kyrgyzstan

№	Disability Organization	Services and assistance	The target group the organization works with (type of disability, age, gender)	Geographic coverage (city, district, region, etc.)



**Responses of persons
with disabilities to
COVID-19**

3.1. Persons with disabilities and COVID-19

In 2019, an outbreak of the virus known as COVID-19 swept the world. In 2020, the World Health Organization officially declared the spread of this disease a public health emergency of international concern¹⁷. Globally, there have been 777 million reported cases of COVID-19 and more than 7 million confirmed deaths¹⁸.

COVID-19 is a respiratory disease spread from an infected person to another through respiratory droplets and aerosols¹⁹. It spreads when a person infected with the virus coughs, sneezes, breathes, shouts, or talks. Infection also occurs by touching an object contaminated with the virus and then touching your mouth, nose, or eyes. A person can become infected with COVID-19 by touching objects and surfaces contaminated with the virus. COVID-19 can manifest in various ways, from asymptomatic to severe and fatal.

Persons with disabilities are at higher risk for this disease for a number of reasons, including difficulties with handwashing, the need to touch objects and people due to visual impairment (for example, blind people use screen readers touching them), the inability to wear masks due to sensory difficulties (for example, deaf and hard of hearing people read lips and facial expressions, so without a mask they will not be able to understand another person), living in crowded places (psychiatric boarding schools, nursing homes, special schools, etc.), and frequent visits to the doctor in a facility where many people are at the same time (for example, in queues).

¹⁷ World Health Organization. Statement on the second meeting of the Emergency Committee under the International Health Regulations regarding the outbreak of 2019 novel coronavirus [Electronic resource]. // URL: [https://www.who.int/ru/news-room/detail/30-01-2020-statement-on-the-second-meeting-of-the-international-health-regulations-\(2005\)-emergency-committee-regarding-the-outbreak-of-novel-coronavirus-\(2019-ncov\)](https://www.who.int/ru/news-room/detail/30-01-2020-statement-on-the-second-meeting-of-the-international-health-regulations-(2005)-emergency-committee-regarding-the-outbreak-of-novel-coronavirus-(2019-ncov))

¹⁸ World Health Organization, COVID-19 Cases, World, 2025. [Electronic resource]. // URL: <https://data.who.int/dashboards/covid19/cases?n=c>

¹⁹ Government of Canada. COVID-19 and Persons with disabilities in Canada, 2025 [Electronic resource]. // URL: <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/guidance-documents/people-with-disabilities.html>

3.2. Protecting persons with disabilities from COVID-19

To protect themselves from this disease, persons with disabilities are recommended to get vaccinated to help prevent severe illness, hospitalization, or death. Vaccinated people are less likely to become ill than unvaccinated people. Vaccination should be done under the supervision of a physician.

Persons with disabilities who are at increased risk of contracting COVID-19 are also advised to self-isolate in a safe area (at home), limit contact with others, maintain social distancing, and wear a respirator mask appropriate for their needs at all times (for example, deaf and hard of hearing people can wear a transparent mask that allows lip movements and facial expressions to be seen).

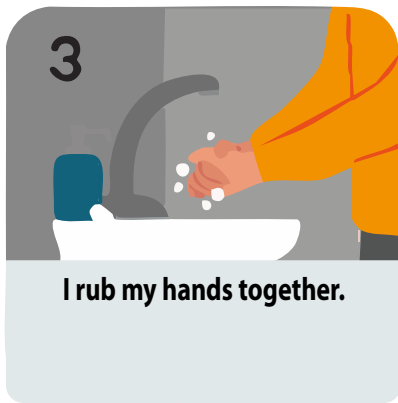
Blind and visually impaired people who require constant contact with objects (such as touching) are advised to frequently wash their hands with alcohol-based hand sanitizers.

As a preventative measure, COVID-19 testing is recommended at the slightest symptom, which is carried out by local health authorities.

Persons with disabilities are encouraged to stay informed about the spread of COVID-19 through accessible channels and, if necessary, request adaptations of materials (sign language, clear/plain language, Braille, audio description, and open and closed captioning). It is important for persons with disabilities to learn to recognize the symptoms of COVID-19, which include difficulty breathing, fever, and loss of taste or smell. Organizations providing services to persons with disabilities should provide them with COVID-19 awareness materials in all accessible formats, such as communication cards (illustration 19) and narrative stories.

Illustration19. Handwashing Flashcards During COVID-19





It is also important to require or implement frequent ventilation and cleaning of spaces where a person with a disability resides, including disinfecting entrance doors, ramp and stair handrails, door handles, and other frequently used surfaces.

Due to the increased risk of COVID-19, it is significant for persons with disabilities to monitor their health by increasing physical activity, maintaining a healthy diet, maintaining mental health, and quitting smoking.

To prevent COVID-19 infection, European Union experts recommend that persons with disabilities avoid crowded places and public transport whenever possible, stock up on sufficient food, medicines, and other essentials for at least two weeks, shop online or by phone, and seek help from family, friends, or carers; regularly clean and disinfect assistive devices such as wheelchairs and canes; develop a plan to ensure continuity of care and support; and identify organizations, hotlines, and people to contact for assistance if needed²⁰.

²⁰ Alexander D., Disabled Persons in Viral Pandemics: The Example of Covid-19. Council of Europe, 2021. [Electronic resource]. // URL: <https://rm.coe.int/publication-disabled-persons-in-viral-pandemics-the-example-of-covid-1/1680a44c46>

PRACTICAL ASSIGNMENT

Develop ten recommendations for persons with disabilities to mitigate the consequences of forced home isolation due to increased risk of COVID-19 by completing Table 9.

Table 9. Challenges and solutions for forced home isolation of persons with disabilities due to increased risk of COVID-19

Challenge	Solution
Example: Sedentary lifestyle	Regular physical exercise using available tools

GLOSSARY

A humanitarian crisis is an emergency that threatens the health, safety, and well-being of large numbers of people, characterized by widespread disruption of basic living conditions, such as access to food, water, health care, and housing.

A personal emergency action plan is a list of specific steps that a person with a disability and their loved ones should take during an emergency to ensure their safety and security.

A social narrative (story) is a tool that allows persons with intellectual and psychosocial disabilities to explain in simple terms what happens during an emergency in order to reduce their anxiety, feelings of depression, and understanding of the situation.

A strobe light is a device that emits rapid, bright, and repetitive flashes of light.

Ableism is a form of discrimination against persons with disabilities that consists of attitudes, practices, policies, and systems that exclude, stigmatize, or discriminate against persons with various disabilities.

An accessible environment is an environment designed for use and navigation by all people, including persons with disabilities, encompassing physical spaces, information, communication, and technology, ensuring equal access and participation for all.

An emergency is an unexpected, sudden event that poses a threat to human life and health, damages property, and harms the environment.

An extreme situation is a sudden occurrence that threatens life, health, property, or the environment, and for which ordinary means are insufficient.

Assistive technology is a broad range of devices, software, and services designed to improve, support, or compensate for the functional capabilities of persons with disabilities. They help persons with various disabilities, including sensory, motor, cognitive, and others, interact more effectively with others, learn, work, communicate, and live independently.

Communication cards are an alternative communication tool for people who have difficulty with spoken language. They allow them to express their needs, desires, and emotions using pictures instead of words.

GLOSSARY

Disability discrimination is any distinction, exclusion, or limitation based on disability that has the effect of diminishing or denying a person's rights on an equal basis with others.

Disability is the result of the interaction between persons with disabilities and attitudinal and environmental barriers, which hinders their full and effective participation in society on an equal basis with others.

Evacuation is the organized movement of people, material, and cultural assets to safer locations from areas where an emergency threat exists, such as during natural disasters, man-made accidents, or wartime.

Inclusion is the process of actively involving all people, regardless of their physical, mental, social, or other disabilities, in community life, education, and culture. This means creating conditions in which every person can feel part of society and realize their potential.

Persons with disabilities are individuals who have long-term physical, psychosocial, intellectual, or sensory impairments that, when interacting with various barriers, may hinder their full and effective participation in society on an equal basis with others.

Reasonable accommodations are changes or adjustments made to the work environment, rules, or procedures to provide persons with disabilities with equal opportunities to work and use services. These changes do not necessarily have to be expensive, but they must be necessary and reasonable, without creating excessive costs.

Stigmatization is the application of negative social labels or stigmas to an individual or group based on certain characteristics (physical, psychological, or behavioral), which leads to the formation of biased, negative societal attitudes and discrimination.

Universal design is the design of buildings, products, or environments that makes them accessible to all people, regardless of age, disability, or other factors.

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