

Quality Checklist – AAP, Disability, GBV risk mitigation and Localization for HNO including cluster specific needs overview

|   | UNICEF-led clusters/AoR's common approach to HNO  | Indicators  | Explanation of the indicators  |
|---|---|---|--|
| 1 | <p><b>Work with local women's organizations, organizations of persons with disabilities and other local actors for needs assessment, needs analysis and validation of the findings to facilitate participation of boys, girls, women including persons with disabilities.</b></p> | <p><b>The opinions of affected populations i.e. children, women and persons with disabilities are reflected in the HNO<sup>1</sup>.</b></p>   | <ul style="list-style-type: none"> <li>● Assess whether communities including different population groups i.e. children, women and persons with disabilities were engaged, and their voices were reflected in the analysis. Information from HH surveys such as MSNA alone are not counted.</li> <li>● Whether the perspective and knowledge of diverse groups of affected population i.e. children, women and persons with disabilities, have been taken into consideration into the needs analysis and identification.</li> <li>● Assess whether local actors were included in the needs identification.</li> <li>● Where community engagement was not possible or weak at needs assessment stage, the limitation is articulated in the HNO as a gap that they need to address.</li> </ul> |
| 2 | <p><b>Conduct a barrier analysis – identify key barriers that women, men girls and boys of different age and disabilities face when they access/use services/goods and feedback mechanisms in consultation with affected population.</b></p>                                      | <p><b>Key risks and needs for persons with disabilities, girls, boys, and women including their diverse barriers to humanitarian services and feedback mechanisms are outlined in the HNO incl. all clusters' needs overview.</b></p> | <ul style="list-style-type: none"> <li>● Clear analysis of key risks factors including GBV risks of different population group by age, gender and disability. If risk factors are not known, the information gap need to be articulated in the HNO.</li> <li>● Special needs of girls, boys, women and persons with disabilities in the sector and the country are included.</li> <li>● Identify key barriers of different population groups i.e. girls, boys, women and persons with disabilities to access to services, information and feedback mechanisms. (<a href="#">AAAQ framework</a> could be a good checklist to check different types of barriers).</li> </ul>   |
| 3 | <p><b>Identify risks and different coping mechanisms that women, men, girls and boys of different age and disabilities use to understand their different impact and capacity to cope with the shock.</b></p>  | <p><b>The HNO clearly describes who among target populations present the most severe humanitarian consequences and needs</b></p>  | <ul style="list-style-type: none"> <li>● Instead of listing children, women and person with disabilities as general vulnerable categories but an analysis of underlying causal factors to make them vulnerable in the settings and the sector is presented.</li> <li>● An analysis of how the crisis differently impact different population group be age, gender and disability at very minimum.</li> <li>● Disaggregate target population by age, gender and disability at minimum</li> </ul>  |
|   |   | <p><b>HNO reports on existing capacities and coping mechanisms of different population groups by age, gender and disability.</b></p>  | <ul style="list-style-type: none"> <li>● Whether the capacity of different population groups i.e. children, women and persons with disabilities are recognized.</li> <li>● Whether different coping mechanisms of different population groups i.e. children, women and persons with disabilities are recognized.</li> </ul>  |

Proposed Revised Criteria for Disability Inclusion Review of 2020 HRP's including cluster specific response plan

|   | UNICEF-led clusters/AoR's common approach   | Indicator  | Explanation of the indicators   |
|---|---|--|---|
| 1 | Response strategies which addresses identified barriers and protection risks including GBV to the services/facilities in consultation with boys, girls, women including those with disabilities are included. This could include a monitoring of safe access to and use of services/facilities/feedback mechanisms such as safety and inclusion audits. | <p><b>The HRP (cluster specific part) includes corresponding responses which address identified barriers and risks including GBV risks in the HNO.</b></p> | <ul style="list-style-type: none"> <li>• Whether the HRP recognizes diversity among children, women and persons with disabilities and implications for the design of the response</li> <li>• Whether the identified risks and barriers of different population groups are addressed. If it was identified as an information gap, a response strategy to address the information gap is included.</li> <li>• Whether any strategies to address information and participation gaps of girls, boys, women and persons with disabilities are included.</li> <li>• Whether any response to measure satisfaction of services from different population groups i.e. boys, girls, women and persons with disabilities are included.</li> <li>• whether the response includes BOTH mainstreaming AND targeted interventions of cross-cutting issues. (e.g. specific response targeting persons with disability and making sure that all services are accessible by persons with disabilities)</li> </ul> |
|   |   | <p><b>The HRP includes specific needs of different population groups i.e. boys, girls, women and persons with disabilities.</b></p>                        | <ul style="list-style-type: none"> <li>• Whether specific needs of different population groups i.e. children, women and persons with disabilities are reflected in the response strategies.</li> <li>• Whether the implications of different response modalities have been considered for persons with disabilities</li> </ul>  |
| 2 | Include strengthening the institutional capacity of local actors in the cluster response plan.  | <p><b>The HRP (cluster specific part) includes a strategy to strengthen the institutional capacity of local actors.</b></p>                                | <ul style="list-style-type: none"> <li>• Whether the Cluster response in the HRP includes an output on institutional capacity development of local actors in the</li> <li>• Articulate the importance of partnerships and co-implementation with local actors including faith based networks, community groups such as women groups, youth groups, disability groups and the academia in the response.</li> <li>• Highlight the importance of responsible partnering and duty of care, since local staff working at the forefront are highly likely to be exposed to the hazardous risks accompanied with the pandemic.</li> <li>• Clearly advocate for direct and flexible funding of local partners where possible.</li> </ul>  |
| 3 | The indicators use sex, age and disability disaggregated data and include at least one indicator related to access to   | <p><b>There is at least one indicator related to access to services/facilities/feedback mechanisms disaggregate by age, sex and disabilities.</b></p>      | <ul style="list-style-type: none"> <li>• Whether the indicator includes to monitor the access of different population groups.</li> <li>• Whether SADDD are used to collect data.</li> </ul>   |

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|  | services/facilities by different population groups. | <b>There are corresponding indicators to the response strategies that address barriers and risks of different population groups.</b> | <ul style="list-style-type: none"> <li>• Whether there is a corresponding indicator to the response strategies that address barriers, risks and information gaps (items 1)</li> <li>• Assess whether children, women &amp; persons with disabilities have been considered in the design of feedback and complaints systems</li> </ul> |
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**Resources for AAP, Disability, GBV and Localization inclusion into the HPC**

- [Compendium of cross-cutting tools for the HPC process](#)

**For more information:**

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