Individual Self Reflection 2020 on World Humanitarian Summit Commitments and Initiatives - CBM International
<table>
<thead>
<tr>
<th>Organisation Name</th>
<th>Organisational Type</th>
<th>City and Country where Headquartered</th>
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<tbody>
<tr>
<td>CBM International</td>
<td>NGO - International</td>
<td>Bensheim, Germany</td>
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<tr>
<td>Focal Point Name</td>
<td>Region</td>
<td>Twitter ID</td>
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<tr>
<td>Tushar Wali</td>
<td>Global</td>
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</table>
 Ensure full access to and protection of the humanitarian and medical missions

Individual Commitments

<table>
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<tr>
<th>Commitment</th>
<th>Commitment Type</th>
<th>Core Responsibility</th>
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<tbody>
<tr>
<td>CBM International commits to actively build its local partners’ capacity to work according to the principles of humanity, impartiality, neutrality and independence in humanitarian action.</td>
<td>Capacity</td>
<td>Uphold the Norms that Safeguard Humanity</td>
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Core Commitments

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<tr>
<td>Commit to ensure all populations in need receive rapid and unimpeded humanitarian assistance.</td>
<td>Uphold the Norms that Safeguard Humanity</td>
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1. Highlight the concrete actions taken between 1 January – 31 December 2017 to implement the commitments which contribute to achieving this transformation. Be as specific as possible and include any relevant data/figures.

The Emergency Response Unit (ERU) supported its country office and partner staff in Haiti, Bangladesh, Nigeria and Sierra Leone to enhance understanding on humanitarian principles and approaches to inclusive humanitarian response. Specific 4 days long workshops on principles and approaches on inclusive humanitarian action were organised in Indonesia and Ethiopia targeting two CBM country team and 5 partner organisation staffs. In addition, ERU recommended various on-line humanitarian trainings to new CBM and partner staff members in Haiti, Bangladesh, Ethiopia and Nigeria. Team members were directed to various essential trainings that addressed humanitarian principles and inclusive response approaches. For existing staff in these countries, these trainings were part of continuous professional education or as refresher.

At global level, CBM is working in consortium with the International Disability Alliance (IDA) and Handicap International (HI) to develop a training module on Article 11 – Situations of risk and humanitarian emergencies of United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) using Bridge CRPD SDGs initiative. This training will target both Disabled People’s Organisations (DPOs) members and humanitarian actors and will enable them to implement disability inclusive humanitarian aid.

Finally, CBM has been contributing throughout 2017 towards the development of the Inter-Agency Standing Committee (IASC) guidelines on inclusion of persons with disabilities in humanitarian action and the above mentioned training will allow needed capacities on the ground in affected countries to be able to implement the recommendations of the guidelines.

2. A. How are you measuring progress toward achieving your commitments? Only the categories selected by the organisation will be seen below.

☐ Other: No formal system in place, it is assessed by ERU through monitoring of annual plans and yearly reports.

B. How are you assessing whether progress on your commitments is leading toward change in the direction of the transformation?

Increased capacities on ground have led to better, principled aid programmes in the mentioned countries. This was evident in the evaluation reports of Nigeria, Ethiopia and Bangladesh. All reports highlighted improved capacities at partners end to deliver inclusive humanitarian assistance.

3. A. Please select no more than 3 key challenges faced in implementing the commitments related to this transformation. Only the categories selected by the organisation will be seen below.

☐ Human resources/capacity
☐ Joined-up humanitarian-development analysis, planning, funding and/or response
☐ Preparedness

B. How are these challenges impacting achievement of this transformation?
Small ERU of 4 people primarily engaged in managing response leaves little time for capacity development in a systematic way, so capacity building is reactive and limited in scope. Absence of formalized preparedness strategy for core at risk countries where CBM and its partners operate leads to patchy capacity strengthening.

4. **Highlight actions planned for 2018 to advance implementation of your commitments in order to achieve this transformation.**

CBM is developing its humanitarian strategy, expected to be completed by 2018. A big focus in the strategy is on readiness of CBM and its partners. A capacity and gap mapping exercise of priority at risk countries (CBM and its partners) will be completed by 2018, with business plan included in humanitarian strategy. CBM’s Global program standards will include Core Humanitarian Standards (CHS) to create more joined up accountability framework across the federation for development and humanitarian work.

5. **What steps or actions are needed to make collective progress to achieve this transformation?**

Investing in capacity and system strengthening within CBM and for its partners in order to deliver principled, efficient, efficient and inclusive aid is paramount. CBM is currently analysing this investment need in 2018 to make a business case for it. This will form the backbone to ensure that CBM continues to actively build local partners capacity to deliver aid based on humanitarian principles.

6. **List any good practice or examples of innovation undertaken individually or in cooperation with others to advance this transformation.**

1. Participation towards ongoing development of IASC guidelines on inclusion of persons with disabilities in humanitarian action, and
2. Leading the development of humanitarian module using Bridge CRPD SDGs initiative.

**Keywords**

Disability, Humanitarian principles
Individual Commitments

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<tr>
<td>CBM International commits to build alliances with organisations of persons with disabilities that can hold humanitarian leadership accountable for ensuring protection mainstreaming, therefore reducing vulnerabilities, making people safer and preserving their dignity.</td>
<td>Partnership</td>
<td>Leave No One Behind</td>
</tr>
<tr>
<td>CBM International will develop training programmes and partnerships to build capacity of organisations of persons with disabilities to become humanitarian stakeholders.</td>
<td>Capacity</td>
<td>Leave No One Behind</td>
</tr>
<tr>
<td>CBM International will participate in, support and provide technical expertise for initiatives aiming to develop minimum standards, global guidelines and tools for inclusion of persons with disabilities in humanitarian action.</td>
<td>Operational</td>
<td>Leave No One Behind</td>
</tr>
<tr>
<td>CBM International will provide technical expertise to support humanitarian stakeholders to include persons with disabilities in their operations.</td>
<td>Operational</td>
<td>Leave No One Behind</td>
</tr>
<tr>
<td>CBM International endorses the Charter on Inclusion of Persons with Disabilities in Humanitarian Action.</td>
<td>Policy</td>
<td>Leave No One Behind</td>
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1. Highlight the concrete actions taken between 1 January – 31 December 2017 to implement the commitments which contribute to achieving this transformation. Be as specific as possible and include any relevant data/figures.

As one of the important members of Age and Disability Capacity Building Consortium, CBM led a wide global consultation process to review the Humanitarian Inclusion Standards (Previously called Minimum standards for Age and Disability Inclusion in Humanitarian Action). The consultations carried out through regional, in-country workshops and online and brought organisations of persons with disabilities, older people associations, humanitarian and disaster risk reduction (DRR) stakeholders together. The feedback was consolidated and a revision was undertaken. The revised Humanitarian Inclusion Standards (HIS) have been vetted by the humanitarian sector experts that were engaged throughout the process. Additionally, the project produced good practice guide and online training resources. These were shared within CBM federation and a plan to disseminate and roll out these standards is currently being formulated.

As part of another consortium project with the International Disability Alliance (IDA) and Handicap International (HI), CBM is leading the development of humanitarian training module on Article 11 – Situations of risk and humanitarian emergencies of the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) using Bridge CRPD SDGs initiative. The choice of Bridge CRPD SDGs as a medium to deliver the training for both Disabled People’s Organisations (DPOs) members as well as humanitarian actors was taken in 2017. The training is being developed in 2018 and first pilot will be delivered in fall of 2018. This will be the beginning of supporting DPOs and its members to become essential humanitarian stakeholders.

2. A. How are you measuring progress toward achieving your commitments? Only the categories selected by the organisation will be seen below.

☐ Other: The progress was measured against project indicators, through documented consultation process, technical and project evaluation reports, formal publication HIS.
B. How are you assessing whether progress on your commitments is leading toward change in the direction of the transformation?

Many humanitarian actors, DPOs have been involved in the process of development of HIS. HIS are being referenced in major response and being promoted by other agencies to ensure disability inclusive humanitarian programming. Sphere Project has been approached to make HIS as companion standards thereby expanding its uptake and utilisation.

3. A. Please select no more than 3 key challenges faced in implementing the commitments related to this transformation. Only the categories selected by the organisation will be seen below.

☑ Multi-stakeholder coordination
☑ Strengthening national/local systems

B. How are these challenges impacting achievement of this transformation?

The HIS has been formally launched, however in order for HIS to be effective guidance to promote principled and inclusive aid, a more coordinated approach is required with a broad variety of humanitarian stakeholders including donors. Furthermore, HIS and training modules have to be included at national and local levels

4. Highlight actions planned for 2018 to advance implementation of your commitments in order to achieve this transformation.

CBM is working towards finalizing the development of training module on Article 11 – Situations of risk and humanitarian emergencies of UNCRPD and its subsequent roll out.
Discussions are on-going within CBM Federation as to how HIS can be rolled out internally and how we promote it externally.
CBM continues to contribute to the development of IASC guidelines on inclusion of persons with disabilities in humanitarian action which is expected to be published by 2018

5. What steps or actions are needed to make collective progress to achieve this transformation?

The development of training module, IASC guidelines and its further roll out has to have coherently in the most at risk countries in order to ensure comprehensive approach to achieving inclusive humanitarian assistance.

6. List any good practice or examples of innovation undertaken individually or in cooperation with others to advance this transformation.

Development of Humanitarian Inclusion Standards - HIS
Promotion of Charter on inclusion of persons with disabilities in Humanitarian action

Keywords

Disability, Disaster Risk Reduction
### Reinforce, do not replace, national and local systems

**Individual Commitments**

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<tr>
<td>CBM International commits to align its work on national and local resilience efforts, and to provide persons with disabilities and other at-risk groups with a mix of short-term assistance to address immediate needs and longer-term support to improve self-reliance.</td>
<td>Operational</td>
<td>Change People's Lives: From Delivering Aid to Ending Need</td>
</tr>
<tr>
<td>CBM International commits to increase investment in building community resilience through systematic mainstreaming of disability and gender sensitive Disaster Risk Reduction in CBM partners’ community-based projects by 2020.</td>
<td>Financial</td>
<td>Change People's Lives: From Delivering Aid to Ending Need</td>
</tr>
<tr>
<td>CBM International will support its local partners to adopt the Core Humanitarian Standard and to systematically collect feedback from affected communities, particularly from persons with disabilities.</td>
<td>Operational</td>
<td>Change People's Lives: From Delivering Aid to Ending Need</td>
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<td>Commit to a new way of working that meets people's immediate humanitarian needs, while at the same time reducing risk and vulnerability over multiple years through the achievement of collective outcomes. To achieve this, commit to the following: a) Anticipate, Do Not Wait: to invest in risk analysis and to incentivize early action in order to minimize the impact and frequency of known risks and hazards on people. b) Reinforce, Do Not Replace: to support and invest in local, national and regional leadership, capacity strengthening and response systems, avoiding duplicative international mechanisms wherever possible. c) Preserve and retain emergency capacity: to deliver predictable and flexible urgent and life-saving assistance and protection in accordance with humanitarian principles. d) Transcend Humanitarian-Development Divides: work together, toward collective outcomes that ensure humanitarian needs are met, while at the same time reducing risk and vulnerability over multiple years and based on the comparative advantage of a diverse range of actors. The primacy of humanitarian principles will continue to underpin humanitarian action.</td>
<td>Change People's Lives: From Delivering Aid to Ending Need</td>
</tr>
<tr>
<td>Commit to reinforce national and local leadership and capacities in managing disaster and climate-related risks through strengthened preparedness and predictable response and recovery arrangements.</td>
<td>Change People's Lives: From Delivering Aid to Ending Need</td>
</tr>
<tr>
<td>Commit to increase investment in building community resilience as a critical first line of response, with the full and effective participation of women.</td>
<td>Change People's Lives: From Delivering Aid to Ending Need</td>
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1. Highlight the concrete actions taken between 1 January – 31 December 2017 to implement the commitments which contribute to achieving this transformation. Be as specific as possible and include any relevant data/figures.

**Strengthening national/local leadership and systems**

In 2017, CBM continued to provide immediate assistance in both Bangladesh and Nepal, while building on on-going development and disaster risk reduction (DRR) engagements in these at risk geographies. In Bangladesh, existing engagement of persons with disabilities in the community level DRR committees allowed quick and efficient inclusive early warnings to be given to affected communities, evacuation to be carried out, and realisation of subsequent needs assessment and inclusive response while in Nepal, Nepal Disabled Women Association (NDWA) undertook an immediate response in an area where they have been working on empowerment of women with disabilities through livelihoods. Nepal experience also broke the largely held perceptions that persons with disabilities, especially women need support and can’t act as key responders and resources during an emergency.

**Adherence to quality and accountability standards (e.g. CHS, SPHERE)**

CBM also undertook Core Humanitarian Standards (CHS) self assessment by using an external consultancy firm, Agency Red, targeting broad stakeholder holder consultations within CBM Federation, carrying out focus group discussions (FGDs) with affected communities, local authorities in five countries. The self-assessment report will be available for submitted to CHS alliance by June 2018. An improvement plan will be subsequently developed before end of 2018.

2. A. How are you measuring progress toward achieving your commitments? Only the categories selected by the organisation will be seen below.

☑ Other: Emergency response and DRR work is measured through clear set of indicators. Thematic Disability inclusive DRR projects evaluation was done.

B. How are you assessing whether progress on your commitments is leading toward change in the direction of the transformation?

Investment in Community Based DRR projects is allowing increased preparedness and resilience at community level. It has also created a positive impact in the time of response directly reducing loss of life and assets. Engagement of local authorities, community, first responders is allowing translation of policy into inclusive practices.

3. A. Please select no more than 3 key challenges faced in implementing the commitments related to this transformation. Only the categories selected by the organisation will be seen below.

☑ Adherence to standards and/or humanitarian principles
☑ Joined-up humanitarian-development analysis, planning, funding and/or response
☑ Preparedness

B. How are these challenges impacting achievement of this transformation?

For smaller emergencies or non L3 (level three) crises, CBM needs to strengthen institutional links between humanitarian assistance, development and use of build back better principles. Lack of preparedness plans means that this link is not systematically made, thereby missing out on safeguarding investment. CHS self-assessment highlights areas of improvement for compliance.

4. Highlight actions planned for 2018 to advance implementation of your commitments in order to achieve this transformation.

CBM is developing a humanitarian strategy which has emphasis on preparedness as core pillar. Additionally, the CBM Federation strategy lays emphasis on having all community based inclusive development projects systematically mainstream DRR. Finally the improvement plan for CHS will address capacity strengthening component within CBM and partners too.

**CHS and Humanitarian Inclusion Standards (HIS)** will be promoted throughout the CBM Federation and prioritized CBM country offices and partners will be made aware of these standards and their implications.

5. What steps or actions are needed to make collective progress to achieve this transformation?

A Federation wide approach needs to be taken to maximize the available resources to have a more joined-up action to address the gap in linking humanitarian action and development as well as mainstreaming DRR in all CBM’s development engagements.
in at least at risk or hotspot countries. Humanitarian capacity strengthening (systems, processes and HR) as to be part of overall capacity strengthening work at country offices and partners level. Proper guidance package is needed.

6. List any good practice or examples of innovation undertaken individually or in cooperation with others to advance this transformation.

Led the review and rewrite of Humanitarian Inclusion standards - HIS
Developed the prototype Inclusive Humanitarian Hands on Tool https://hhot.cbm.org/

Keywords
Community resilience, Disability, Disaster Risk Reduction, Local action, People-centred approach, Quality and accountability standards
Anticipate, do not wait, for crises

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<td>Change People’s Lives: From Delivering Aid to Ending Need</td>
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1. Highlight the concrete actions taken between 1 January – 31 December 2017 to implement the commitments which contribute to achieving this transformation. Be as specific as possible and include any relevant data/figures.

CBM continued to engage in the Ethiopia Food crisis of 2016 and adjusted its food security and water management activities to not only respond to acute needs but start building resilience in the infrastructure, food practices and water management systems. The introduction of water use committees has led to reduction of water wastage and improvement in harvesting methods. The introduction of cash crops and provision of livestock has increased the financial resilience of the families and allowed some safety cash during times of need. Finally, communities’ engagement to agree on “give back” through seed banks and share the new born offspring’s to other vulnerable members of the community has expanded the reach of the project.

In Nigeria and Niger, emergency response in response to food insecurity was initiated in tandem with development projects. The objective was to allow transition from addressing acute needs to longer recovery and resilience building. The thematic evaluation of disaster risk reduction (DRR) projects in 2017 allowed to capture important learnings that were shared within the organisations. It is expected that this learning will be reflected in mainstreaming DRR and therefore concept of decreasing vulnerability and increasing resilience in all community based development initiatives of CBM in at risk geographies.

2. A. How are you measuring progress toward achieving your commitments? Only the categories selected by the organisation will be seen below.

☑ Other: Project monitoring visits/reports. An impact evaluation carried out in the Philippines for emergency and recovery projects covering three years period.

B. How are you assessing whether progress on your commitments is leading toward change in the direction of the transformation?

The evaluation report of both Ethiopia and Nigeria illustrated that the actions were timely. The meta analysis of DRR projects has highlighted that mainstreaming of DRR in community based inclusive development projects leads to more effective engagement at times of humanitarian response and supports increasing resilience.

3. A. Please select no more than 3 key challenges faced in implementing the commitments related to this transformation. Only the categories selected by the organisation will be seen below.

☑ Joined-up humanitarian-development analysis, planning, funding and/or response
☐ Preparedness

B. How are these challenges impacting achievement of this transformation?
A more systematic preparedness plan is required to allow a continuous monitoring of context, impact on on-going development work in anticipation of crisis, potential impact of anticipated shock and development of proper mitigation plans. In the absence of this, the work remains very reactive, sporadic and non-coherent at times.

4. **Highlight actions planned for 2018 to advance implementation of your commitments in order to achieve this transformation.**

CBM Federation strategy 2016-2020 has identified clear commitment to mainstream DRR into community based inclusive development programmes. This is being articulated in a form of guidelines in 2018. These guidelines with help CBM country team to reflect the same in their 3 to 5 years country plans.

The humanitarian strategy will also articulate preparedness work with a progressive plan for targeted prioritised countries at risk of natural hazards or conflicts.

5. **What steps or actions are needed to make collective progress to achieve this transformation?**

CBM need to develop a more joined-up approach between its inclusive humanitarian action strategy and the community based inclusive development strategy. This will need in-house capacities within CBM country teams and partners to better anticipate, be read and respond appropriately. Furthermore, inclusive development projects that include proper disaster risk analysis and contingency can prove to be good models for inclusive humanitarian engagements as the ground work is done during quieter times.

**Keywords**

Community resilience, Disaster Risk Reduction, Humanitarian-development nexus
Deliver collective outcomes: transcend humanitarian-development divides

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Joined-up humanitarian-development analysis and planning towards collective outcomes

CBM continued to engage in Ethiopia Food crisis of 2016 and adjusted its food security and water management activities to not only respond to acute needs but start building resilience in the infrastructure, food practices and water management systems. The introduction of water use committees has led to reduction of water wastage and improvement in harvesting methods. The introduction of cash crops and provision of livestock has increased the financial resilience of the families and allowed some safety cash during times of need. Finally, communities’ engagement to agree on “give back” through seed banks and share the new born offspring’s to other vulnerable members of the community has expanded the reach of the project.

In Nigeria and Niger, emergency response in response to food insecurity was initiated in tandem with development projects. The objective was to allow transition from addressing acute needs to longer recovery and resilience building.

Other-4C

The thematic evaluation of disaster risk reduction (DRR) projects in 2017 allowed to capture important learnings that were shared within the organisations. It is expected that this learning will be reflected in mainstreaming DRR and therefore concept of decreasing vulnerability and increasing resilience in all community based development initiatives of CBM in at risk geographies.

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CBM need to develop a more joined-up approach between its inclusive humanitarian action strategy and the community based inclusive development strategy. This will need in-house capacities within CBM country teams and partners to better anticipate, be read and respond appropriately. Furthermore, inclusive development projects that include proper disaster risk analysis and contingency can prove to be good models for inclusive humanitarian engagements as the ground work is done during quieter times.

Keywords

Community resilience, Disaster Risk Reduction, Humanitarian-development nexus
Charter on Inclusion of Persons with Disabilities in Humanitarian Action:

What concrete actions have you taken in support of the initiative.

CBM's humanitarian activities are aligned with United Nations Convention on the Rights of Persons with Disabilities (UN CRPD), Humanitarian Inclusion Standards (HIS) and therefore are upholding the commitments of the charter. At project implementation level, CBM partners with Disabled People's Organisations (DPOs) to ensure that persons with disabilities are included from assessment, to design, to implementation and evaluation. CBM actively supports persons with disabilities and DPO members to engage with partners of various clusters to promote inclusive response. To that end, CBM, along with it partners provides technical support to mainstream agencies on inclusive humanitarian action. CBM has developed guidelines such as All under one roof, 16 minimum requirements for accessible shelters and have been part of development of Humanitarian Inclusion Standards. CBM uses these standards in its own programmes. CBM has been actively promoting the use of this charter as a tool to implement Article 11 of UNCRPD in its global consortium project with Handicap International (HI) and International Disability Alliance (IDA).
# Additional Reports

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<tr>
<th>Attachment</th>
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<tbody>
<tr>
<td>CBM-HHoT leaflet.pdf</td>
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<tr>
<td>Humanitarian Inclusion Standards-flyer.pdf</td>
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