

## **CALL FOR PROPOSALS:**

To provide support in strengthening the integration of disability inclusion in WHO's humanitarian and health emergencies actions.

### **Background**

Including persons with disabilities in health emergencies and humanitarian action is critical to ensuring equitable and effective responses. Persons with disabilities often face heightened risks during crises due to barriers in accessing information, healthcare, and essential services. Exclusion can lead to preventable harm, including higher mortality rates, neglect in evacuation plans, and lack of accessible medical care. The [UN Convention on the Rights of Persons with Disabilities \(CRPD\)](#) and the [Sendai Framework for Disaster Risk Reduction](#) emphasise disability-inclusive approaches, recognising that leaving no one behind is both a moral obligation and a practical necessity. Without intentional inclusion, emergency responses may fail to reach those most in need, exacerbating existing inequalities.

Integrating disability inclusion into health-related humanitarian action requires concrete measures, such as ensuring accessible triage systems, providing sign language interpreters in emergency health messaging, and training medical staff on disability-specific clinical needs. The **World Health Organization (WHO)** underscores this imperative in its [Global Report on Health Equity for Persons with Disabilities](#) (2022), which calls for the systematic collection of disability-disaggregated health data during emergencies to identify gaps and tailor responses. WHO further stresses the need for accessible vaccination campaigns, mobile health units equipped for mobility devices, and mental health support for persons with disabilities facing trauma. By adopting these approaches, humanitarian health actors can prevent exacerbating pre-existing conditions, such as interrupted access to rehabilitation or lifesaving medications, and align with the [Inter-Agency Standing Committee \(IASC\) Guidelines on Inclusion of Persons with Disabilities in Humanitarian Action](#). Proactive inclusion not only complies with international frameworks but also enhances outbreak control and reduces secondary health crises among this high-risk population. The vendor will work closely with the Humanitarian Department in the Division of Health Emergency Preparedness & Response, as well as the Disability team at WHO Headquarters.

## Objectives and activities

**Objective 1:**    **The situation related to barriers, opportunities and entry points for disability inclusion in health interventions during humanitarian action and health emergencies is understood.**

### Proposed activities:

- Meet with relevant WHO workforce members across three levels of the organization to identify opportunities for action.
- Map and meet with key external interlocutors to identify key issues relevant for WHO to progress disability inclusion in this work.
- Collect case studies on successful integration of disability inclusion in health interventions related to humanitarian action and health emergencies.

### Deliverables:

- (1) Background paper on entry points for WHO to advance disability inclusion in health interventions during humanitarian action and health emergencies.
- (2) PPT and information sheets for internal WHO and external stakeholder meetings.
- (3) Five case studies on the integration of disability inclusion in health interventions of humanitarian action and health emergencies.

**Objective 2:**    **WHO understands the way forward to improve disability inclusion in health interventions during humanitarian action and health emergencies, supporting a stronger leadership role on this work within the Inter-Agency Standing Committee.**

### Proposed activities:

- Prepare and deliver webinars across WHO regions and levels to share information collected in relation to Objective 1.
- Develop concrete options to discuss with stakeholders and donors on how to improve disability inclusion in health interventions during humanitarian action and health emergencies.

### Deliverables:

- (1) A PPT and associated information is developed for WHO to deliver internal webinars.
- (2) A draft project proposal is developed, focused on addressing information from Objective 1.

## **Eligibility criteria**

### **Minimum criteria of the work or vendor:**

- (1) Vendor must be an organization working at the international level (e.g., working in more than one country).
- (2) Vendor must have first-hand experience on working on disability in humanitarian actions and/or health emergencies, including at the country level.
- (3) Vendor must have access across its network, to organizations and entities working on humanitarian actions and/or health emergencies.
- (4) Vendor must have experience in information gathering, analysis and dissemination on issues related to humanitarian actions and/or health emergencies.
- (5) Vendor must have capacity for coordinating meetings and interviews with stakeholders, as well as coordinating and delivering information sessions (e.g., webinars).

### **Preferable experience of the vendor:**

- (1) Experience working with WHO at the international level on health equity for persons with disabilities and/or disability inclusion in humanitarian actions and/or health emergencies.
- (2) Experience supporting organizations to develop capacity on disability inclusion in humanitarian actions and/or health emergencies.
- (3) Experience working across various regions, countries and contexts.

## **Planned timelines**

- **Start date** – 15/09/2025.
- **End date** – 31/12/ 2025.

**Total number of days:** 50.

## Proposal requirements

The proposal submitted in response to this CFP should include:

- Statement of interest and relevant experience, including examples (one page maximum).
- Detailed timeline for the proposed activities, including a statement on considerations for successfully implementing the activities and attaining the deliverables (two pages maximum).
- Costs proposal (one page maximum).

## Submission of proposals

Prospective vendors are invited to submit a proposal in response to this CFP to the email [disability@who.int](mailto:disability@who.int) by **17:00 (CEST) 21 August 2025**.