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निदेशक
Mrinalini Shrivastava. IPS
Director



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F.No.1-75/2024-PP (117943)

Dated: 30th July, 2025

Dear Sir / Madam,

The National Disaster Management Authority (NDMA) recognizes that a truly effective and resilient disaster risk reduction (DRR) framework must be both inclusive and people centered. Persons with disabilities, particularly children, women and girls, and older persons with disabilities experience heightened and intersecting vulnerabilities across all stages of the disaster cycle.

2. The NDMA has issued a Guideline on Disability-Inclusive Disaster Risk Reduction (DiDRR) which aims to ensure that disaster risk reduction (DRR) strategies are inclusive of persons with disabilities. These guidelines align with international frameworks like the Sendai Framework for Disaster Risk Reduction (2015–2030) and national commitments under the Rights of Persons with Disabilities Act, 2016.

3. NDMA organized a Two-Day National Workshop on Strengthening Disability-Inclusive Disaster Preparedness and Humanitarian Action in June 2025 in collaboration with the Department of Persons with Disabilities, GoI, Unicef, OPDs and other stakeholders. Based on the deliberations in the workshop, NDMA has come out with an Advisory (Annexure - I) for relevant stakeholders.

4. It is therefore requested that you may kindly facilitate circulation of this advisory through all concerned and relevant stakeholders for their necessary consideration and implementation.

Yours faithfully,

(Mrinalini Shrivastava)

Encl: as above

To,

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***Advisory on Strengthening Disability-Inclusive Disaster Risk
Reduction (DiDRR)***
**National Disaster Management Authority (NDMA), Government of
India**

Background

India faces recurrent natural and human-induced disasters such as floods, cyclones, earthquakes, heatwaves, and industrial accidents, which impact millions each year. Among the most disproportionately affected are persons with disabilities, who constitute over 2.68 crore people as per Census 2011. Notably, the 2011 Census reflected only 7 legally recognized disability categories, which have since been expanded to 21 under the Rights of Persons with Disabilities (RPwD) Act, 2016.

The heightened vulnerability of persons with disabilities during disasters does not arise from the disability itself, but from deeply entrenched structural and systemic barriers. These include inaccessible infrastructure and services, exclusion from emergency planning and decision-making processes, communication gaps, and a lack of representation in disaster governance frameworks. During emergencies, persons with disabilities often face disproportionate challenges in receiving timely early warnings, evacuating safely, accessing medical care, and availing essential relief and rehabilitation services. These challenges are further exacerbated by the unavailability or loss of assistive devices, absence of caregiver support, inaccessible shelters, and non-inclusive communication formats. Limited participation in policy-making platforms often leads to unaddressed needs, reinforcing systemic exclusion, undermining agency, and perpetuating infantilization.

Field-level experiences underscore these concerns. For instance, during floods in Chennai and Assam, the absence of accessible early warning mechanisms and inclusive relief services significantly impeded the ability of persons with disabilities to respond or evacuate effectively, leaving many to navigate the crisis independently. Such situations not only magnify risk exposure but also reveal critical gaps in preparedness, response, and coordination.

These realities highlight the urgent need for inclusive, accessible, and community-responsive disaster risk reduction frameworks. Embedding accessibility, equity, and universal design principles across all stages of disaster management is essential to ensure that persons with disabilities are not only protected but are active participants in building resilient systems that leave no one behind.

India has made significant legal and policy commitments toward advancing disability inclusion in disaster risk governance. The Rights of Persons with Disabilities (RPwD) Act, 2016, aligned with India's obligations under the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD), explicitly mandates equal access to safety, protection, and disaster risk reduction for persons with disabilities. Complementing this mandate are key national instruments such as the National Disaster Management Plan (NDMP), 2019, the NDMA Guidelines on Disability-Inclusive Disaster Risk Reduction, 2019, and the Standard Operating Procedure on Disaster Management for Differently Abled Persons, 2017. Collectively, these frameworks recognize the need for inclusive disaster preparedness and response.

However, implementation across states and districts remains uneven and fragmented, often hindered by capacity constraints, inadequate data systems, and limited institutional accountability. Insights from recent national-level consultations, particularly the June 2025 workshop on "Strengthening Disability-Inclusive Disaster Response and Humanitarian Action," convened by the National Disaster Management Authority (NDMA) in collaboration with the United Nations in India underscore the urgent need to translate these policy commitments into concrete, system-wide actions.

Institutionalizing inclusion requires strengthening the leadership and participation of persons with disabilities, their families, caregivers, and Organisations of Persons with Disabilities (OPDs); ensuring universal accessibility in early warning and action systems; enhancing the capacity of first responders and local governance structures; and embedding inclusive approaches across all phases of the disaster management cycle to ensure the safety, dignity, and protection of persons with disabilities.

A disability-inclusive approach to disaster risk reduction is both a legal obligation and a pragmatic necessity as disability-inclusive disaster risk reduction paves the way for universally accessible disaster risk reduction for other vulnerable communities like children, pregnant women, senior citizens, etc. who face similar disproportionate vulnerabilities and risk. It strengthens community resilience by ensuring that no one is left behind in planning and response. This advisory builds upon these insights and evidence to provide a national-level roadmap for institutionalizing Disability-Inclusive Disaster Risk Reduction (DiDRR) across all phases of the disaster management cycle and across all relevant stakeholders.

India's Constitutional, Legislative, and International Commitments

To systematically strengthen Disability-Inclusive Disaster Risk Reduction (DiDRR), it is critical to align implementation with India's constitutional provisions, national laws, international obligations, and disaster management mandates. These frameworks

collectively guide the mainstreaming of disability inclusion across disaster governance and planning systems:

- **Constitution of India:** Article 41 and Article 46 direct the State to ensure public assistance and promote the welfare of persons with disabilities and other vulnerable groups.
- **Disaster Management Act, 2005:** Section 12 mandates inclusive relief standards; Sections 8–10 empower NDMA to develop inclusive policies, guidelines, and coordinate with national authorities for risk reduction.
- **Rights of Persons with Disabilities (RPwD) Act, 2016:** Section 8(2)(d & e) and Section 39 mandate protection and safety of persons with disabilities in disaster and emergency situations.
- **Mental Healthcare Act (MHCA), 2017:** Section 94 of the Act allows for emergency treatment for individuals with mental illness, which can be extended to seven days during a government-declared disaster or emergency.
- **National Policy on Disaster Management (NPDM), 2009:** Recognizes persons with disabilities as a vulnerable group and mandates inclusive approaches across all phases of disaster management.
- **National Disaster Management Plan (NDMP), 2019:** Outlines operational requirements for disability-disaggregated data, accessibility audits, and OPD participation in disaster preparedness and response.
- **NDMA Guidelines on Disability-Inclusive Disaster Management (2019):** Recommend accessible early warning systems, inclusive shelters, assistive technologies, and active OPD engagement in disaster coordination.
- **UNCRRP:** Article 11 obligates States to ensure protection and safety of persons with disabilities in all risk and humanitarian emergencies.
- **Sendai Framework for Disaster Risk Reduction (2015–2030):** Emphasizes inclusive, accessible, and people-centered disaster risk governance, with active participation of persons with disabilities.
- **Sustainable Development Goals (SDGs):** Targets 11.5, 13.1, and 17.18 call for reducing disaster-related impacts on vulnerable populations, strengthening resilience, and improving disability-disaggregated data.
- **G20 Disaster Risk Reduction Working Group (DRRWG), 2023:** Under India's G20 Presidency, the inaugural DRRWG communique called for universal accessibility in DRR, community-based approaches, and inclusion of persons with disabilities in data systems and decision-making.
- **Incheon Strategy to “Make the Right Real” for Persons with Disabilities in Asia and the Pacific:** Goal 7 commits member states to ensure disability-inclusive disaster risk reduction and management as part of regional implementation of the 2030 Agenda for Sustainable Development.

Together, these legal and normative frameworks underscore India's obligation to integrate DiDRR into all levels of planning, response, and recovery. They serve not only as compliance mandates but as enablers of inclusive governance, resilience building, and equitable development.

Below are some of the gaps and systemic challenges in advancing disability-inclusive disaster risk reduction in India:

- 1. Absence of Accurate and Reliable Real-time Disaggregated Data on Persons with Disabilities:** There is a lack of up-to-date, disability-disaggregated data and mapping of PwDs across most districts. As per RPwD Act of 2016, all State and District Disaster Management Authorities are expected to maintain such mapping of PwDs. Without accurate information on the types of disabilities, locations, and needs of persons with disabilities, planning and resource allocation remain generic and exclusionary. The reluctance to self-identify due to stigma, absence of appropriate data collection tools, and under-utilisation of frameworks like the Washington Group Questions (WGQ) further exacerbate this gap.
- 2. Inaccessible Public Infrastructure and Emergency Services and Infrastructure:** Most public buildings, disaster shelters, cooling shelters, healthcare centers, evacuation routes, and transport systems do not adhere to Universal Design principles or national accessibility norms. As a result, persons with disabilities, especially those with mobility impairments, are unable to safely access critical facilities during disasters. For instance, inaccessible toilets, absence of ramps or tactile pathways, and inadequate signage can endanger lives during evacuations or prolonged sheltering. In India, there are very few individuals and institutions championing Universal Design (UD)—an approach to crafting products, environments, and services that are usable by all people, to the greatest extent possible, without the need for costly adaptations or specialized solutions. The use of inaccessible infrastructure during emergency response often forces persons with disabilities to rely on ad hoc coping mechanisms, leading to delayed assistance and avoidable fatalities.
- 3. Communication Barriers and Non-Inclusive Early Warning Systems:** Early warning systems, evacuation advisories, and risk communication strategies frequently exclude persons with hearing, visual, or intellectual and developmental disabilities. Announcements are often limited to audio or visual channels, with no tactile, symbolic, or simplified formats, or formats adapted for persons with intellectual, learning, or psychosocial disabilities. Additionally, risk messages are not available in local languages or alternate communication modes such as sign

language, audio description, captioning, or easy-to-read, plain language formats, resulting in limited comprehension and preparedness among PwDs.

4. **Underrepresentation of Persons with Disabilities in Decision-Making and Planning:** Persons with disabilities and their representative bodies are rarely involved in disaster planning, response coordination, or capacity assessments. This exclusion leads to planning blind spots where their specific needs are unaccounted for. In the absence of disability-inclusive committees or designated officials (e.g., District Disability Commissioners), the lived experiences of PwDs are not integrated into policies or emergency protocols.
5. **Limited Availability and Maintenance of Assistive Technologies (AT):** Access to essential assistive devices, such as wheelchairs, crutches, hearing aids, or communication boards, remains constrained, especially in rural and disaster-prone regions. There is no centralised inventory, supply chain, or repair mechanism for ATs during or after emergencies. This impacts not just mobility but also communication, health, and survival for persons with functional limitations.
6. **Inadequate Capacity Building and Training of First Responders and Local Workers:** Rescue teams, health workers, police, and local volunteers (e.g., Aapda Mitras) often lack training in inclusive search and rescue protocols, accessible communication, and respectful engagement with persons with disabilities. This can lead to neglect, mishandling, or even harm during evacuations. Additionally, frontline workers are rarely sensitised to invisible disabilities such as autism, intellectual disabilities, or psychosocial conditions, further marginalising affected individuals during crisis response.
7. **Weak Community Engagement and Preparedness Mechanisms:** At the grassroots level, awareness around disability inclusion is low. Gram Panchayats, Anganwadi centers, and village health workers are not systematically involved in mapping vulnerable persons with disabilities or including them in community-level disaster drills. This results in poor last-mile connectivity, delayed responses, and high-risk outcomes during real emergencies. The absence of community-based preparedness tailored for persons with disabilities is a critical gap.
8. **Fragmented Institutional Coordination and Budgetary Constraints:** There is no standard operating procedure for inter-agency coordination specific to DiDRR. Disability inclusion is often seen as the responsibility of a single department (such as Social Justice), rather than being embedded across disaster management structures. Moreover, lack of earmarked funding for DiDRR activities, retrofitting,

accessible IEC (Information, Education and Communication) materials, or caregiver support limits the scope and scale of inclusive implementation.

9. **Lack of Mental Health Support mechanisms:** There is limited to no provision for mental health support in disaster management which can cause intensified psychosocial distress and compound psychosocial disability for those living with mental illness already.

This advisory is designed to provide actionable recommendations for central and state governments, disaster authorities, civil society, and private stakeholders to systematically mainstream disability inclusion in DRR policies, planning, infrastructure, training, communication, and community engagement.

Actionable Measures for Implementing Disability-Inclusive DRR Across All Levels of Governance

1. Inclusive Governance and Representation

- State Disaster Management Authorities (SDMAs) and District Disaster Management Authority (DDMA) should integrate with the designated Disability Commissioners/officers at the district level under the Rights of Persons with Disabilities Act, 2016 to encourage disability perspectives are embedded in planning, response, and recovery.
- Encourage that Persons with Disabilities and Organisations of Persons with Disabilities (OPDs) are formally included in the State and District Disaster Management Authorities (SDMAs and DDMA).
- Encourage the inclusion of OPDs in DRR committees, task forces, and the formulation of Standard Operating Procedures (SOPs) at local, block, and state levels.
- Enhance visibility and engagement by appointing persons with disabilities as community ambassadors, trainers, and champions across local, district, and state levels.
- Encourage States to notify nodal officers for persons with disabilities within each DDMA and SDMA to serve as points of coordination for DiDRR implementation.
- Government departments and ministries must involve people with disabilities in designing the department/ministry level preparedness and response plans.

2. Data and Monitoring

- Incorporate disability-specific vulnerabilities into hazard, risk, and capacity assessments conducted under the National Disaster Management Plan. Use tools such as participatory vulnerability mapping, and community-based risk

assessments disaggregated by disability type, gender, and age, in collaboration with local OPDs and NGOs.

- Mandate the collection of data on disability (type, severity, support needs) during household surveys, especially in high-risk zones. Integrate this into GIS-based platforms like the National Database for Emergency Management (NDEM) to improve evacuation planning, shelter allocation, and relief targeting.
- Promote harmonisation of disability data with platforms such as UDID, UDISE+, and Health MIS for effective monitoring and reporting.
- As per RPwD Act 2016, all DDMA to map persons with disabilities to enable preparation of family and community level preparedness plans.
- Collect mental health data from private practitioners for each district to ensure availability of psychiatric medication in the aftermath of a disaster.

3. Accessible Infrastructure and Assistive Technology

- Comply with the Harmonised Guidelines and Standards for Universal Accessibility in India (2021) mandatory for all public buildings, including shelters and hospitals, for those listed in disaster preparedness plans.
- Conduct regular access audits of critical infrastructure to ensure that it is disability friendly. Prioritise retrofitting of cyclone shelters in coastal states (e.g., West Bengal, Andhra Pradesh), schools used as shelters, and primary health centres.
- Develop and integrate a national plan for the pre-positioning, distribution, and maintenance of priority assistive devices (wheelchairs, hearing aids, white canes, communication boards, etc.) during emergencies.
- Create mobile accessibility audit teams comprising OPDs, engineers, and urban planners to conduct periodic (annual) assessments of shelters and critical infrastructure.
- Priority must be given to retrofitting shelters, schools, and health facilities listed in District Disaster Management Plans (DDMPs), especially in disaster-prone regions.
- For true inclusion, all sectors and service providers should consider adopting Universal Design (UD) principles. UD is an approach to designing products, environments, and services to be usable by all people, to the greatest extent possible, without the need for adaptation or specialized design.

4. Inclusive Communication and Early Warning Systems

- Ensure that the Indian Meteorological Department (IMD) based early warning alerts are provided by the State Disaster Management Authorities and District Disaster Management Authorities (SDMA and DDMA) in visual (text, flashing lights), auditory (sirens, audio messages), tactile formats (vibrating alerts) and other accessible formats for people with disabilities.

- Ensure websites, mobile apps and SMS alerts conform to Web Content Accessibility Guidelines (WCAG) 2.1 standards. Include Indian Sign Language (ISL) videos, screen-reader compatibility, and text-to-speech functions.
- All state-level alerts should be tested for accessibility across disability types, including usability testing with OPDs.
- Integrate disability inclusion modules into the training curricula of the DRR. Focus on respectful communication, appropriate handling of assistive devices, and evacuation support for persons with disabilities.
- Institutionalize partnerships with community radio, local media, and grassroots networks to amplify early warnings in remote or marginalised areas.

5. Capacity Building and Awareness

- State Disaster Management Authorities (SDMA), and District Disaster Management Authorities (DDMA) officials, as well as field staff like Accredited Social Health Activists (ASHAs) and Anganwadi workers should undergo regular training in Disability-Inclusive Disaster Risk Reduction (DiDRR).
- Track persons with disabilities as volunteers (Disaster Friends/Volunteers) under State and District community resilience program. Empower them as peer educators and trainers in schools, community centres, and self-help groups.
- Engage Organisations of Persons with Disabilities (OPDs) in leading community-based mock drills, Capacity Building, Information, Education, and Communication (IEC) campaigns, and psychological first aid activities using Indian Sign Language (ISL)-based emergency communication.
- Empower disabled people by hiring them and involving them in DRR activities including in Governance model at State and District level.
- Facilitate community-based inclusion hubs or social support circles that build long-term community resilience and peer-to-peer solidarity before, during, and after disasters.
- Develop matrix on 21+ disabilities, vulnerable communities vs diverse geographies, disasters for easy understanding and appropriate adaptations / accommodations.
- Integrate DiDRR training into the State and District School Safety Programme (NSSP) and ensure that school safety is inclusive of children with disabilities. Sensitization must also be extended to teachers, caregivers, and education officials.
- Integrate the State and District Mental Health Programme and community-based mental health services in disaster management frameworks especially in rural and disaster-prone areas.
- Mandate access to sexual and reproductive health services and information before, during, and after disasters to ensure their safety, dignity, and well-being.

- Special emphasis has to be given to private institutions for PwDs, operating from homes.

6. Legal and Financial Integration

- Preferably design that hazard mitigation programs/projects (state, and district) includes budget allocation for DiDRR activities – including inclusive shelters, accessible transport, and communication.
- Embed DiDRR as a cross-cutting theme in State and District Disaster Management Plans, sectoral schemes (health, housing, urban planning), and annual budget allocations.
- Update the Building Codes, Fire Safety Norms, and Disaster SOPs to include DiDRR criteria in line with the Rights of Persons with Disabilities (RPwD) Act, 2016, the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD), NDMA's Guidelines on Disability-Inclusive DRR (2019) and the Harmonised Guidelines and Standards for Universal Accessibility in India (2021) issued by the Ministry of Housing and Urban Affairs. In addition, conduct compliance audits at regular intervals.
- Ensure these codes address universal design in all public, emergency, and temporary infrastructure (shelters, schools, health centers, transport hubs); safe evacuation routes and tactile fire alarms; inclusive signage, visual-auditory warnings, and accessible emergency exits.
- State and District Disaster Management Authorities (SDMAs/DDMAs) are advised to revise their SOPs and building permissions in consultation with State Commissioners for Persons with Disabilities, Public Works Departments (PWD), Fire Safety Services and Urban Local Bodies.
- Integrate accessibility compliance audits into all central and state infrastructure audits funded under schemes like AMRUT, PMAY (Urban/Rural) and Smart Cities Mission.
- Design inclusive social protection schemes and cash transfer mechanisms post-disaster, ensuring doorstep delivery, grievance redress mechanisms, and awareness through accessible IEC.
- State governments are encouraged to revise their State Action Plans on Climate Change (SAPCCs) to include DiDRR priorities and allocate dedicated resources for climate-resilient inclusive infrastructure and services.
- Periodic Legislative Impact Assessment of all disaster risk reduction laws, policies, guidelines, action plans, Standard Operating Procedures, etc. to ensure disability inclusion.
- Make Universal Design a mandate/law under municipal laws for all construction activities.

Disability inclusion must transition from a compliance-based obligation to a strategic and transformative principle, one that safeguards lives, builds resilience, and fulfills India's constitutional commitment to equality, dignity, and justice for all citizens.