



# Pocket Guide: Safeguarding persons with disabilities and/or mental health conditions in the workplace

This guide focuses on disability-inclusive safeguarding in the workplace in the humanitarian and development sector. Disability-inclusive safeguarding practices can help better safeguard everyone; it is in the interest of all organisations to consider this guide in their safeguarding work.

This guide was developed with persons with disabilities. It was also informed by Resource and Support Hub (RSH) research in Nigeria on how organisations of persons with disabilities (OPDs) keep people safe. [Click here](#) to read the research.

This guide will be useful for all staff, but especially those responsible for diverse and inclusive working practices, e.g. Human Resources, management and leadership in creating a culture in the workplace for safeguarding.

We have developed an accompanying guide on the risks faced by persons with disabilities in CSO programmes and considerations for disability-inclusive safeguarding. It is [here](#).

This guide is split into three sections:

1. Definitions of different disabilities: physical disabilities, hearing impairments, intellectual disabilities, mental health conditions and psychosocial disabilities and visual impairments.
2. Risks of sexual exploitation, abuse and sexual harassment (SEAH) and other harms and abuses that persons with disabilities face in the CSO workplace.
3. Responding to the risks identified and how to make your workplace safeguarding measures disability-inclusive. Go straight to page 12 for responses and action table!

## Defining disability

The UN Convention on the Rights of Persons with Disabilities ([UNCRPD](#)) describes persons with disabilities as “those who have long-term physical, mental, intellectual, or sensory impairments which, in interaction with various barriers, may hinder their full and effective participation in society on an equal basis with others”.

When combined with these impairments, barriers that exist in society can hinder effective participation in society.

**Impairment + barriers = disability**



## Using safe language

It is important to identify and use locally appropriate terminology relating to disability to avoid further stigma and discrimination. Work with persons with disabilities and local OPDs to establish this.

## Connecting safeguarding and disability inclusion

- Risks of sexual exploitation, abuse and sexual harassment (SEAH) and of other harms and abuses are driven by different forms of abuse of power and inequalities. “The more power a person has, the greater the opportunity to exploit, abuse and harass others. The less power a person has, the more they are likely to be targeted for exploitation, abuse and harassment. The degree of power someone has is closely linked to structural, hierarchical and situational factors” ([RSH](#)).
- Persons facing discrimination due to their disability, or multiple forms of discrimination due to their intersecting identities (e.g. disability + woman), may be at increased risk of being targeted for SEAH and other harms and abuses by those with more power.
- Safeguarding measures are designed to mitigate risks that people face. If they are not designed with and for persons with disabilities, they will not work to safeguard them from the different risks they may face. Persons with disability may also find it more difficult to access services, find support or solidarity when abuse has taken place.

# Definitions of different disabilities

## Physical disabilities

Physical impairments affect a part(s) of a person’s body and can limit their physical functioning, mobility, strength and/or dexterity.

People can acquire physical disabilities from family genetics, injury, illness, accidents, aging, or a medical condition’s side effect. Some physical disabilities include, but are not limited to, cerebral palsy, stroke, spina bifida, arthritis, spinal cord injury, albinism and muscular dystrophy. Amputations from trauma are also included.

## Hearing impairments

Hearing impairments may range in their intensity. This can happen in one or both ears and can lead to difficulty hearing different sounds.

People can acquire hearing impairments from aging, exposure to loud sounds, family genetics, some medication and some illnesses. 'Hard of hearing' refers to persons with hearing loss that

ranges from mild to severe. People who are hard of hearing usually communicate through spoken language and can benefit from hearing aids, cochlear implants, and other assistive devices as well as captioning on screens.

Deaf persons mostly have profound hearing loss, which implies very little or no hearing. They may use lip reading or sign language for communication.

## Intellectual disabilities

Intellectual disabilities refer to impairments characterised by limitations in both intellectual functioning and how someone copes in their environment (adaptive behaviour).

The impairments cover many everyday social and practical skills which can include: mental capacity, such as learning, reasoning and problem solving, interpersonal skills, social responsibility and self-esteem, memory/recollections, and practical skills including activities of daily living, travel, use of money and healthcare.

## Mental health conditions and psychological disabilities

Mental health conditions refer to conditions that affects a person's thinking, feeling, behaviour or mood. These conditions can deeply impact everyday living and may also affect the ability to relate to others. Mental health conditions can include depression, anxiety, and psychosis.

When there are barriers to the full and meaningful participation of persons with mental health conditions on an equal basis with others, the situation can become disabling. This is referred to as psychosocial disability.

Psychosocial disabilities may not be obvious. Some people may choose to tell others that they may have a disability, whilst others may not.

## Visual Impairments

Visual impairments refer to a long-term condition that affects a person's ability to see. Visual impairments include total blindness or partial vision loss.

People can acquire visual impairment from family genetics, injury, illness, accidents, side effects from a medical condition or age-related muscular degeneration. People who have visual impairments usually use aids/assistive devices to help with their communication, for example screen readers, magnifiers and verbal reporting.



# Risks of harm and abuse, including SEAH, that persons with disabilities face in the CSO workplace

## Common risks for all persons with disabilities

Persons with disabilities have a right to be, and often are, employed in a range of roles. Persons with disabilities are not one homogenous group; it is important to understand the risks faced by persons with different disabilities and how they interact with other identity characteristics ([click here](#) to read more about intersectionality).

Persons with disabilities often face forms of exclusion and discrimination which can lead to common, and specific, risks of harm and abuse in the workplace. Forms of exclusion and discrimination, and risks of harm and abuse, are compounded by organisational approaches to safeguarding which are not disability-inclusive and lack an understanding of intersectional risks. This includes underlying negative and incorrect assumptions and attitudes relating to disability. These attitudes may include the misconception that persons with disabilities are in some way different, that their lives have less worth than the lives of persons without disabilities, or that they do not feel, experience or understand the same things as persons without disabilities. Such attitudes often provide justification and permission for adults and children with disabilities to be abused or for their abuse to be discounted.



### Remember!

Not all disabilities are obvious. Persons with disabilities that cannot be seen may face stigma and discrimination, including people not believing that they have a disability.

## Discrimination and exclusion

Improvements have been made with regard to ensuring non-discrimination and creating diverse and inclusive environments in workplaces (this is bound by legislation in certain countries). Yet



organisations can still create workplaces which feel discriminatory and foster exclusion, this may or may not be intentional. Some of this will arise from a lack of understanding of persons with disabilities from colleagues, which in turn means a lack of appropriate support. Some of this arises because organisations are unwilling, or consider themselves incapable, of making adjustments and creating a more inclusive environment.

## Increased risks of harm and abuse

Persons with disabilities may face increased risks of harm and abuse in the workplace. A number of these risks may be common, some may present differently for different disabilities, and some of the risks will be specific to the type of disability a person has. The following are risks of harm and abuse that might be faced by persons with any disability:

- There is a risk of stigma, discrimination, bullying and harassment and negative stereotyping of persons with disabilities by staff. This may be demonstrated by a lack of staff understanding of the correct terminology to use when discussing disabilities. This can occur in the workplace and in external meetings.
- The exclusion, humiliation, intimidation and/or denial of opportunities faced by persons with disabilities may increase low self-esteem and the risks of emotional and psychological harm.
- Abusers may target persons with disabilities in the workplace thinking that they are more socially excluded and less likely to report harms and abuses or be believed if they report these issues.
- Women with disabilities and persons who have a disability plus other characteristic(s) that may cause discrimination in your setting, such as race, nationality, LGBTIQ+, may be at more risk.

## Organisational approaches to safeguarding which are not disability-inclusive

Organisations implementing safeguarding measures which are only designed to safeguard those without disabilities, and are not intersectional, will create or contribute to key risks.

### Creating safe and inclusive workplaces

- Risk assessments in the workplace may not consider persons with disabilities appropriately so their needs may not be taken into account.
- Persons with disabilities may be unable to give their feedback on the inaccessibility of the workplace due to fear of being labelled a troublemaker, losing their job, or through lack of opportunity to do so.

### Physical workplace adjustments



- A lack of understanding of what adjustments can be made for persons with disability to work to their full potential.
- Inaccessibility of workplace environments and/or communications may increase the risk of harm, particularly communications about safety measures.
- Persons with disabilities may be at risk of injury when operating some machinery if machines are not made safe for all to use.

### Establishing safe and inclusive reporting mechanisms

- Stigma and discrimination may lead to persons with disabilities not being believed if they report harms or abuse.

## Specific risks for persons with different disabilities

In addition, organisational approaches to safeguarding which are not disability-inclusive may impact persons with different disabilities in different ways. The following table illustrates this:

	Physical disabilities	Hearing impairments	Intellectual disabilities	Mental health conditions/psychosocial disabilities	Visual impairments
<p><b>Creating safe and inclusive workplaces</b></p> <ul style="list-style-type: none"> <li>•</li> </ul>	<ul style="list-style-type: none"> <li>• Colleagues resist learning new ways of communicating with colleagues with hearing impairments.</li> <li>• Isolation due to inaccessible communications with other colleagues.               <ul style="list-style-type: none"> <li>•</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Particularly high risk for bullying, humiliation, laughing at persons with intellectual impairments.</li> <li>• Lack of staff understanding of intellectual disabilities excludes or marginalises colleagues with intellectual disabilities.</li> <li>• Staff with intellectual disabilities may misunderstand social cues or the nuances of</li> </ul>	<ul style="list-style-type: none"> <li>• Organisational structures and processes do not adapt to or support employees with a mental health condition or a psychosocial disability (this may also exacerbate and worsen mental health conditions).</li> <li>• Lack of psychosocial support within the organisation (buddy system, mental health crisis plan or referral options to counselling) (<a href="#">Click here</a> for the</li> </ul>	<ul style="list-style-type: none"> <li>•</li> </ul>	

	<b>Physical disabilities</b>	<b>Hearing impairments</b>	<b>Intellectual disabilities</b>	<b>Mental health conditions/psychosocial disabilities</b>	<b>Visual impairments</b>
			<p>interpersonal relationships which leads to exclusion or discrimination.</p> <ul style="list-style-type: none"> <li>• Dependency on others for support can impact on independence in the workplace and delivering to potential.</li> </ul>	<p>resource on RSH Safeguarding and Wellbeing).</p> <ul style="list-style-type: none"> <li>• Unsupportive culture which sees mental health as the individual's problem.</li> <li>• Lack of support for time off work, more breaks, or the need to attend appointments.</li> </ul>	
<b>Physical workplace adjustments</b>	<ul style="list-style-type: none"> <li>• Support required on mobility may be exploited by those provided that support.</li> <li>• Inaccessibility of facilities, e.g. no ramps/lifts, may</li> </ul>	<ul style="list-style-type: none"> <li>• Lack of accessible communication on organisational policies, including safeguarding procedures.</li> </ul>	<ul style="list-style-type: none"> <li>• Lack of accessible safeguarding information, in easy to understand formats</li> <li>•</li> </ul>	<ul style="list-style-type: none"> <li>•</li> </ul>	<ul style="list-style-type: none"> <li>• Challenges navigating around offices or work-related locations without support.</li> <li>• Workplace layout and design may worsen the</li> </ul>

<b>Physical disabilities</b>	<b>Hearing impairments</b>	<b>Intellectual disabilities</b>	<b>Mental health conditions/psychosocial disabilities</b>	<b>Visual impairments</b>
<p>increase the risk of injuries to staff with physical disabilities.</p> <ul style="list-style-type: none"> <li>• Lack of accessible toilets etc. compromises persons dignity</li> <li>• Inaccessibility of facilities leads to exclusion from work events, meetings or interactions where important information is shared.</li> <li>• Persons with physical disabilities may need more time to move from place to place.</li> </ul>	<ul style="list-style-type: none"> <li>• Lack of priority on resourcing special equipment.</li> <li>• Seating plans in offices prevent Persons with hearing impairments participating fully.</li> <li>• Workers with hearing impairments may not hear emergency alarms that are only provided over a loudspeaker.</li> <li>• Lack of appropriate breaks during trainings, meetings or other work sessions, for</li> </ul>			<p>working experience (poor lighting, lack of colour contrasts on walls or walls that can be seen through, lack of different textures in flooring and no blinds to shield areas from sun light).</p> <ul style="list-style-type: none"> <li>• Staff lack capacity and understanding on guiding colleagues with visual impairments around activities or locations</li> <li>•</li> </ul>

<b>Physical disabilities</b>	<b>Hearing impairments</b>	<b>Intellectual disabilities</b>	<b>Mental health conditions/psycho-social disabilities</b>	<b>Visual impairments</b>
<ul style="list-style-type: none"> <li>• No, or limited, adjustment in workload where Persons with physical disabilities may tire quickly.</li> <li>• Transportation to the workplace inaccessible or difficult.</li> <li>• Emergency exits not accessible for persons with physical disabilities.</li> </ul>	<p>those lip reading or using sign language.</p>			
<p><b>Establishing safe and inclusive reporting mechanisms</b></p> <ul style="list-style-type: none"> <li>•</li> </ul>	<ul style="list-style-type: none"> <li>•</li> </ul>	<ul style="list-style-type: none"> <li>• Persons with intellectual disabilities assumed as not understanding</li> </ul>	<ul style="list-style-type: none"> <li>•</li> </ul>	

**Physical disabilities**

**Hearing impairments**

**Intellectual  
disabilities**

**Mental health  
conditions/psycho-  
social disabilities**

**Visual impairments**

abuse or less able to report abuse.

- Reports of harm from Persons with intellectual disabilities not taken seriously



# Managing the safeguarding risks: How to make your safeguarding disability-inclusive

Organisations which actively create and promote a safe, positive working environment can: (1) better prevent SEAH, as well as other forms of harm and abuse, (2) improve how reports of abuse are received and responded to, and (3) more effectively achieve organisational aims and objectives. Disability inclusion is one key part of this.

## Three important steps before you start!

- 1. Disability awareness.** When setting up disability-inclusive safeguarding systems, the first step is to ensure that everyone understands that persons with disabilities have the same rights as everyone else. Disability rights awareness raising must be conducted regularly. You can use the definitions and risks sections above for this and refer to the [UNCRPD](#).
- 2. Reflect disability rights and inclusion in core documents.** Ensure that your organisational policy on safeguarding or SEAH, your Code of Conduct, human resource materials and organisational strategy more generally, highlight non-discrimination and equality as a core value. In this, you can outline the importance of recruiting, retaining, promoting and including persons with disabilities overall.

Points to consider when developing a disability-inclusive safeguarding policy:

- Is the safeguarding policy available in accessible formats and relevant languages?
  - Does the safeguarding policy, and other organisational documents, use terms that are appropriate, not derogatory and avoid stereotypes for persons with disabilities?
  - Does your safeguarding policy or another policy require all staff, including safeguarding staff, to undergo disability rights and general inclusion training?
  - Does your policy recognise the increased risks for persons with disabilities and other at-risk groups in your context? Does your policy also recognise that different characteristics may intersect to affect an individual's risk? E.g. that women, girls or people from a marginalised ethnic group with a disability may be at heightened risk.
  - Do the tools and procedural documents consider inclusion and require staff to think about disability inclusive risk mitigate and incident response?
- 3. Engage with your staff often and in ways that are confidential and safe.** Consult on safeguarding risks, needs and mitigation strategies with all staff, including persons with disabilities and/or organisations of persons with disabilities. One-off input into a policy or safeguarding/safeguarding-related procedure will not be enough; seek feedback regularly, listen to the feedback and integrate into organisational learning.

## Quick action table

General actions to mitigate safeguarding risks for persons with disabilities and/or mental health conditions in CSO workplaces.

### Organisational culture

Support staff with disabilities and/or mental health conditions to develop healthy working relationships with the management and other employees by encouraging appropriate social interaction and maintaining open communications. Examples include disability inclusive work socials and information sessions or webinars run by different individuals on their disability (if they want).

Ensure that the work environment is flexible to allow for persons with disabilities and/or mental health conditions to adjust their work according to their requirements. E.g. Ensure that employees are fully supported to remain at work or return to work as smoothly as possible after a break.

Apply a learning culture to safeguard persons with disabilities. Many organisations are still working out how to fulfil the obligations of disability-inclusive safeguarding; staff must be made to feel comfortable to share challenges and successes.

High focus on safeguarding linked with disability inclusion may lead to a culture of fear and avoidance, especially when the repercussions of failure are so high.

Include imagery of a diverse workforce when representing your staff including person with disabilities but ensure that persons with disabilities are not overly pointed out or used as spokespersons as a box ticking exercise.

## Safe spaces and support

Where there is interest, provide opportunities for staff with disabilities and/or mental health conditions to come together in a private, confidential safe space to discuss challenges and risks of SEAH and other harm and abuse that they may face. This is not a space for other colleagues.

Establish a Disabled Employee Network (DEN) or equivalent to discuss issues faced and find resolutions them.

Initiate a 'buddy system' for all staff, where there is interest.

Create a 'safe space' in the workplace where all staff can have some 'time out', contact their buddy or other sources of support or access self-help. Read our Wellbeing and Safeguarding resource for more ([click here](#)).

## Reasonable Adjustments

### Travel to Work

Ensure that the work environment allows staff with disabilities and/or mental health conditions to adjust their transportation requirements to and from work in the most convenient way and is understanding of delays.

Offer home or hybrid working to offer more flexibility.

Ensure that the work building is situated near public transport links, where possible.

### Care Giver

Cost provisions should be made for staff with disabilities and/or mental health conditions to have support such as: A sign language interpreter, personal assistant, advocate or caregiver accompany them on training or reporting or travelling. (There may be Government support available for this in your country).

Include information in training on how individuals should interact with support staff - for example not speaking directly to sign interpreters and ignoring person with hearing impairment.

## Risk management

Ensure that workplace risk assessments take into consideration the additional and/or intersectional risks for staff with disabilities and/or mental health conditions. Include travel to and from the workplace. Include persons with disabilities in the risk assessment and mitigation process.

Include persons with disabilities in the process of identifying risks and appropriate mitigations.

Ensure that learning processes and feedback systems on the safeguarding procedures are inclusive and persons with disabilities are given equal chance to suggest improvements. Make sure to close the feedback consultation loop with persons with disabilities.

Conduct accessibility audits for the physical environment with persons with disabilities including those with visual, hearing and physical impairments.

## Case-handling and investigations

Where possible, assign one individual to the case team who is able to communicate well with the survivor in a manner which works for them.

Expect and proactively identify specific risks and additional support needs for the case handling process, e.g. sign language interpreter, physical access needs and specific medication. ([Click here](#) for an infographic on the case-handling process).

More people may be included in the investigations team due to the accessibility and communication support needs. Manage the investigation team members so only necessary staff are included and uphold confidentiality at all times.

Note that it may be necessary to allow more time for case-handling and investigations for persons with disabilities.

## Recruitment

Recruitment	Persons with physical disabilities	Persons with hearing impairments	Intellectual disabilities	Persons with mental health conditions and psychosocial disabilities	Persons with visual impairments
<p>Ensure that recruitment advertising strategies, application requirements and interview procedures consider the specific requirements of staff with disabilities and/or mental health conditions. For more information, <a href="#">click here</a> for a Safe Recruitment tip sheet.</p> <p>Ensure that there are inclusive HR policies to protect the wellbeing of staff with disabilities and mental health conditions, including leave, extended sick leave, time for medical appointments, and mental health leave.</p> <p>Criminal checks and references completed and previous complains around discrimination etc. taken seriously.</p> <p>Identify if government support packages for employing persons with disabilities been sought.</p>	<p>Use various advertising strategies, e.g. radio, online, posters.</p> <p>Interview locations are accessible and easy to travel to.</p>	<p>Advertising strategies, and application procedures have clear, simple instructions with visual imagery.</p> <p>Interviews should be conducted in a manner that suits the person, including making provision for sign interpreters.</p>	<p>Clear, simple instructions for applying for roles with visual imagery.</p> <p>Interviews should be conducted in a manner that suits the person, ensuring that questions asked are clear and straightforward.</p>	<p>Mention any wellbeing and mental health support being provided, if available.</p>	<p>Use accessible documents and platforms for the advertising.</p> <p>Interviews should be conducted in a manner that suits the person, including ensuring that the person understands the format and who is asking questions at which point.</p>

## Training / orientation

Training / orientation	Persons with physical disabilities	Persons with hearing impairments	Intellectual disabilities	Persons with mental health conditions and psychosocial disabilities	Persons with visual impairments
<p>Ensure that all staff, especially those who are supervising a persons with a disability or mental health condition, receive training or a briefing to build their understanding of their safeguarding risks and requirements. This should consider the definitions and implications of various disabilities and mental health conditions, associated risks in each context and how to communicate with persons with different disabilities.</p> <p>Raise awareness amongst staff on disability rights, appropriate language and combatting stigma and discrimination.</p> <p>Ensure regular staff training on safeguarding is disability-inclusive and that disability-inclusive safeguarding is not seen as an optional 'tag-on' for staff.</p>				<p>Ensure that supervisors are trained to listen, discuss and support persons with mental health conditions in a confidential way.</p> <p>Where possible, provide training on psychological first aid for staff.</p>	<p>Training for all staff on how to guide someone with a visual impairment.</p> <p>Training on for all staff how to set and use audio reader on word and other software.</p> <p>Orientation training for individuals with sight loss to help navigate their working environment.</p>

## Performance management

Performance management	Persons with physical disabilities	Persons with hearing impairments	Intellectual disabilities	Persons with mental health conditions and psychosocial disabilities	Persons with visual impairments
<p>Ensure that staff who are supervising persons with disabilities and/or mental health conditions continue to be aware of risks that they may face and are provided with additional training and awareness information as required. Related information is also detailed in the RSH Tip Sheet on Wellbeing and Safeguarding, <a href="#">click here</a> to read it.</p>		<p>Ensure meetings are kept to manageable lengths for those using sign language interpreters or lip reading.</p>	<p>Ensure that the objectives set are realistic and achievable and how performance is managed is clear and understood.</p>	<p>Ensure employees have a mental health crisis plan and have shared necessary information with their manager, if they agree. Provide non-disclosure agreements to keep disclosures of mental health conditions confidential between the employee and the employer. This can reduce stigma and discrimination.</p>	

## Information sharing / Awareness raising amongst staff

<b>Information sharing / Awareness raising amongst staff</b>	<b>Persons with physical disabilities</b>	<b>Persons with hearing impairments</b>	<b>Intellectual disabilities</b>	<b>Persons with mental health conditions and psychosocial disabilities</b>	<b>Persons with visual impairments</b>
<p>Ensure that the needs of staff with disabilities and/or mental health conditions are included when creating and sharing information for staff and representatives on what safeguarding is and how to report incidents.</p> <p>Ensure that information is shared in accessible formats.</p>	<p>Materials promoted and shared in locations where they can be seen. This may include visits to individuals to share materials.</p>	<p>Written materials should use plain language but also be accompanied by visual imagery.</p>	<p>Written materials should use plain language but also be accompanied by visual imagery. Visual imagery can include images of the points described but must avoid being too explicit or potentially re-traumatising. Demonstrate the activities that the person is supposed to do rather than just describing, this can reduce the risk of misunderstanding.</p>	<p>Emphasise messages on anonymous reporting options, confidentiality and that every report will be taken seriously.</p>	<p>Ensure information is accessible for people using assistive technology, such as screen readers and magnifiers.</p>

## Staff reporting of harm and abuse, including SEAH

<b>Staff reporting of harm and abuse, including SEAH</b>	<b>Persons with physical disabilities</b>	<b>Persons with hearing impairments</b>	<b>Intellectual disabilities</b>	<b>Persons with mental health conditions and psychosocial disabilities</b>	<b>Persons with visual impairments</b>
<p>Include staff with disabilities and/or mental health conditions (and other staff) in the design, and adaptation, of a range of safeguarding reporting channels.</p> <p>Check accessibility of reporting channels by monitoring usage with data disaggregated by disability and feedback mechanisms proved and encouraged.</p>	<p>Physically accessible, for example with no steps or lift, wide doorways, wheelchair entry, reporting structure within reach (e.g. box).</p>	<p>Clear, simple user instructions with visual imagery.</p>	<p>Clear, simple user instructions with visual imagery.</p> <p>Demonstrate the activities that the person is supposed to do rather than just describing, this will reduce the risk of mis-understanding.</p>	<p>Reiterate that the reporting process is confidential and can be anonymous to avoid concerns over discrimination.</p>	<p>Ensure channels are accessible for people using assistive technology, for example screen readers and magnifiers.</p>



## Contributors

RSH is very grateful to all the individuals who contributed to the development of this product:

- Shikuku Obosi: A physically disabled person and a consultant on disability inclusion from Kenya.
- Augustine Onyeachonam: A Physically disabled person, Lead advisor in the Joint National Association of Persons with Disabilities in Nigeria, Disability Advocate/Stakeholder, Disability Counselor.
- Emeka Udeh: A Deaf employee in Special School for the Deaf, and member of the Joint National Association of Persons with Disabilities in Nigeria.
- Uzoamaka Didiugwu: A Special Educationist (Specialist Sign Language Interpretation). In charge of Disability Centre Enugu State University of Science and Technology, Nigeria.

## References

- Able Child Africa and Save the Children (2021), ***Disability-inclusive child safeguarding guidelines*** (based on consultations with children and youth with disabilities in Rwanda).
- Able Child Africa (2021), ***Disability-inclusive child safeguarding toolkit***.

## General reading relating to disability inclusion in international development

- **UN Convention on the Rights of Persons with Disabilities**
- **FCDO disability inclusion and rights strategy 2022 to 2030**
- **International Disability and Development Consortium**