



Accessibility Audit in Women and Girls First Programme Targeted States and Regions in Myanmar

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The UNFPA in Myanmar, through the Women and Girls First (WGF) Programme and in collaboration with the implementing partner Myanmar Independent Living Initiative (MILI), conducted accessibility audits at the service facilities operating by WGF's implementing partners and sub-grantees in selected states and regions of Myanmar.

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ACRONYMS AND ABBREVIATIONS

AWO	Ashio Women Organization
CFM	Community Feedback Mechanism
CFSI	Community and Family Services International
CPI	Community Partners International
CRPD	Convention on the Rights of Persons with Disabilities
CSOs	Civil Society Organizations
DRC	Danish Refugee Council
EEI	Ethnic Equality Initiative
ESCAP	Economic and Social Commission for Asia and the Pacific
FRC	Finnish Refugee Council
GBV	Gender-Based Violence
HH	Helping Hands from Cherry Land
HPA	Health Poverty Action
ICT	Information and Communications Technology
IEC	Information Education Communication
IP	Implementing Partners
ISR	The Institute of the Sisters of Reparation
KMSS	Karuna Mission Social Solidarity
KNWO	Karenni National Women Organization
KPFS	Key Population Friendly Space
LKWO	Loi Kham Women Organization
LNOB	Leave No One Behind
MHPSS	Mental Health and Psychosocial Support
MI	Malteser International
MILI	Myanmar Independent Living Initiative
MMA	Myanmar Medical Association
MNCH	Maternal Newborn and Child Health

ACRONYMS AND ABBREVIATIONS

MSI	Marie Stopes International
OPD	Organization of Persons with Disabilities
PHC	Primary Health Care
PHWC	Pa-Oh Health Working Committee
PSEA	Prevention of Sexual Exploitation and Abuse
PUI	Premiere Urgence Internationale
PWD	Persons with Disabilities
PWAC	Pa-O Women Affair Committee
RFB	Reaching the Furthest Behind"
RI	Relief International
SRHR	Sexual and Reproductive Health and Rights
SSDF	Shan State Development Foundation
TWG	Thandaunggyi Women Group
UNFPA	United Nations Population Fund
WFFP	Women's Federation for Peace
WGC	Women and Girls Centre
WGF	Women and Girls First
WON	Women Organizations Network

1. EXECUTIVE SUMMARY

This Accessibility Audit Report presents an in-depth assessment of the institutional, physical, information and communication accessibility of facilities and services operated by UNFPA's implementing partners and sub-grantees under the Women and Girls First (WGF) Programme in Myanmar. The audit focused on identifying barriers to access for persons with disabilities in key service delivery points such as Women and Girls Centres, Health Posts/Clinics, Safe Houses, Youth Centres, and Key Population Friendly Space located in Kachin, Kayah, Kayin, Mon, Northern and Southern Shan, Rakhine, Bago (East), and Yangon. The primary objectives of the audit were to identify the barriers in the service facilities, develop actions to improve institutional, physical, information, and communication accessibility for people with disabilities, and provide actionable recommendations for creating an evidence-based accessibility policy and action plans that benefit everyone.

The audit was conducted through a comprehensive methodology, including site visits, interviews, and ground audits with facility staff, relevant experts and representatives from organizations of persons with disabilities in the areas. A total of 50 audit teams across multiple facilities were involved in the assessment. The findings revealed significant gaps in organizations' policies and practices, physical buildings of facilities, and information and communication systems and measures of the facilities through an accessibility lens that complies with international and national accessibility standards.

Based on the findings, the report provides actionable recommendations in several key areas: the initiation, implementation, and evaluation of accessibility policies and practices; universally accessible designs in facilities and office buildings; accessible information and communication systems and measures; and staff capacity development on accessibility and disability inclusion at each of UNFPA's implementing partners and their service facilities. These measures will ensure that people with disabilities can fully access services and equally participate in the activities of the organizations' programmes and facilities upholding their rights and dignity.

2. INTRODUCTION

The United Nations Population Fund (UNFPA), since 1973, has provided continuous support to different target priorities, including Sexual and Reproductive Health and Rights (SRHR) and the prevention of Gender-Based Violence (GBV)[1]. The Women and Girls First (WGF) Programme is UNFPA Myanmar's flagship multi-year and multi-donor supported programme that integrates service delivery for SRHR, GBV response and MHPSS across humanitarian, peacebuilding, and development contexts[2].

[1] "UNFPA in Myanmar," UNFPA Myanmar, n.d., accessed 29 June 2022, <https://myanmar.unfpa.org/en/unfpa-myanmar>.

[2] UNFPA Myanmar, "2020 Annual Progress Report: Women and Girls First Programme," (2020).

The WGF programme that initially started in November 2015 has evolved over the last 7 years adapting to the changing political and conflict landscape, responding to the emerging needs and humanitarian crisis through an integrated GBV-SRHR-MHPSS programming. Designed as a nexus programme straddling humanitarian, development and peace building contexts, the programme offers the necessary flexibility to respond to acute humanitarian needs while investing in long term development activities to realise the rights of women, girls and vulnerable populations.

Globally, approximately 1 billion people, or 15% of the world's population, live with some form of disability, with 700 million of these being women and girls[3]. The Economic and Social Commission for Asia and the Pacific (ESCAP) estimates that the population of persons with disabilities in the region to be 700 million[4], which is 15 percent of the population. In Myanmar, the Inter-Censal Survey 2019 reported that 5.9 million people—12.8% of the population—live with disabilities, with 3.5 million being females compared to 2.5 million males[5]. People with disabilities face numerous barriers that limit their access to essential services necessary for achieving their human rights and participating fully in society. These barriers include inaccessible buildings, facilities, and environments, as well as limitations in Information and Communication Technology (ICT)[6]. In 2022-23, UNFPA Myanmar conducted a study that assessed the availability, accessibility, acceptability, and quality of SRHR, GBV, and MHPSS services for persons with disabilities provided by civil society organizations (CSOs) in selected states. The assessment partly focused on accessibility and its findings indicated that most infrastructures and educational materials offered by implementing partners and CSOs were not accessible to people with disabilities. The IEC materials were not available particularly to persons with visual, hearing, and intellectual disabilities forcing them to rely on their caretakers and service providers for assistance[7].

The Convention on the Rights of Persons with Disabilities (CRPD) recognizes the importance of accessibility in the physical, social, economic, and cultural environment to enable individuals with disabilities to enjoy all human rights and fundamental freedoms. Article 9 of the CRPD mandates that States Parties require to take appropriate measures to ensure equal access for persons with disabilities to the physical environment, transportation, information and communications, and other facilities and services open to the public[8]. Additionally, it highlights the necessity of mainstreaming disability issues as integral to sustainable development strategies. Discrimination against any individual based on disability is deemed a violation of human dignity and worth. The core humanitarian principle of impartiality necessitates that humanitarian assistance be provided based on need and without discrimination, ensuring that the diverse needs of all groups, including persons with disabilities, are met. The Incheon Strategy to "Make the Right Real" for Persons

[3] World Health Organization (WHO), "World Report on Disability" 2011

[4] ESCAP, "Disability in Asia and the Pacific: The Facts" 2017

[5] The Union of Republic of Myanmar, "Inter-censal survey" 2019

[6] CDC, "Disability barriers to inclusion", 2024

[7] UNFPA's Women and Girls First Programme, "Assessment of availability, accessibility, acceptability, and quality of SRHR, GBV, and MHPSS services for persons with disabilities in selected states in Myanmar" 2023

with Disabilities in the Asia-Pacific region provides a regional action plan aimed at promoting the rights and well-being of persons with disabilities[9]. Goal 3 recognizes the need to enhance access to the physical environment, public transportation, knowledge, information, and communication as a precondition for persons with disabilities to fulfill their rights in an inclusive society and provides targets and indicators to benchmark progress for governments, civil society actors and international organizations alike[10].

Keeping the commitment to disability inclusion as reflected in the strategic plan and disability inclusion strategy for the years 2022-2025 which calls for increased focus on populations left behind and “reaching the furthest behind” (RFB)[11] UNFPA’s WGF Programme in Myanmar, in close collaboration with MILI, together with the agency’s partners and sub-grantees conducted a comprehensive accessibility audit for their policies, buildings, facilities, and information management system. The audit is mainly aimed at assessing and systematically planning modifications aimed at improving the accessibility of the building, and facilities, ensuring that the services provided through these spaces are accessible to people with disabilities. The assessment also covered Information and Communication Technology identifying and recommending interventions that will enable people with disabilities to acquire information on an equal basis with their peers without disabilities. The findings and recommendations of this audit will inform directions and strategies for improving accessibility, ensuring that all individuals, regardless of ability, can access the essential services they require.

3. OBJECTIVE AND SCOPE OF ACCESSIBILITY AUDIT

3.1. This audit aimed to:

1. Identify the institutional, physical, information and communication barriers existing in the service facilities of UNFPA Myanmar’s WGF programme implementing partners and sub-grantees that are not compliant with accessibility standards for people with disabilities, and draw the proposed actions to make the environment more accessible for all people regardless of ability;
2. Formulate the directions and actionable recommendations for UNFPA Myanmar’s WGF programme implementing partners and sub-grantees to improve institutional, physical, information and communication accessibility in service delivery for persons with disabilities, and to develop an evidence-based accessibility policy and action plans that benefit everyone.

[8] UNCRPD, “Article 9 Accessibility” 2006

[9] ESCAP, “Incheon Strategy to Make the Right Real for Persons with Disabilities” 2013-2022

[10] ESCAP Goal 3, “Incheon Strategy to Make the Right Real for Persons with Disabilities” 2013-2022

[11] UNFPA, “Disability Inclusion Strategy” 2022-2025

3.2. There are two main areas of scope of the audit:

1. **Programme Scope:** This covers (i) institutional accessibility, (ii) physical accessibility, and (iii) information and communication accessibility of the IPs, sub-grantees, and their service facilities. The scope of institutional accessibility includes the accessibility policies and practices of the IPs and sub-grantees. The scope of physical accessibility includes areas such as reaching the facility, entering the facility, circulating around the facility, and using specific areas within the facilities. The scope of information and communication accessibility includes websites, information, education, communication materials, and the informed consent in the facilities.
2. **Geographic Scope:** The audit covers UNFPA's implementing partners and sub-grantees' institutional accessibility policies and practices, and service facilities located in Kachin, Kayah, Kayin, Mon, Northern and Southern Shan, Rakhine, Bago (East), and Yangon.

3.3. The intended outcomes of the audit are:

1. **Improved Accessibility:** To provide directions and actionable recommendations for enhancing the accessibility of facilities and services delivering by WGF implementing partners and sub-grantees, ensuring that they are accessible and inclusive for persons with disabilities and all service users.
2. **Informed Future Planning:** To inform the planning and implementation of future programmes and initiatives, ensuring that accessibility measures are integrated into all aspects of service delivery for people with disabilities and all service users.
3. **Policy Development:** To contribute to the development of policies and strategies that promote accessibility for all within the WGF Programme and among its implementing partners and sub-grantees.

4. AUDIT TEAMS

With technical support from MILI, 50 audit teams, led by trained disability focal points formed by UNFPA WGF's implementing partners and sub-grantees, conducted this accessibility audit across their service facilities. Each team had an average of 3 to 9 members, with 67 percent of the members being women and 1 percent being persons with disabilities. The participants in the audit represented a diverse range of professional areas, including management such as project coordination, project management, logistics, finance, accounting, monitoring and evaluation, camp and centre management, and safe house management; professional fields such as engineering and construction; medical fields such as nursing, healthcare, and medical doctors; social fields such as social support services, SRHR, GBV, MHPSS, child protection, case management, maternal and child health, counseling, and disability inclusion along with the community mobilization.

5. LIST OF FACILITIES BY TYPE, LOCATION, AND SERVICE COVERED IN THE AUDIT

The audit was conducted in a total of 50 service facilities, comprising 18 Women and Girls Centres, 16 Health Posts, 12 Safe Houses, 3 Youth Centres and 1 Key Population Friendly Space. The details of the types, locations and services of the facilities are as follows.

No.	Type of Facility	Township	State	Services offered	IP/Sub-grantees and Joint-operators
1	WGC	Loilen	Shan (South)	SRHR, GBV and MHPSS	AFXB/LKWO
2	WGC	Mawkmai	Shan (South)	GBV and MHPSS	AFXB/PWAC
3	WGC	Taunggyi	Shan (South)	GBV and MHPSS	AFXB/WAPAN
4	WGC	Mrauk-U	Rakhine	GBV and MHPSS	DRC
5	WGC	Mrauk-U	Rakhine	GBV and MHPSS	DRC
6	WGC	Mrauk-U	Rakhine	GBV and MHPSS	DRC
7	WGC	Mrauk-U	Rakhine	GBV and MHPSS	DRC
8	WGC	Mogaung	Kachin	SRHR, GBV, MHPSS, PSEA, 21st Century skill and CFCM	FRC/EEI
9	WGC	Mansi	Kachin	SRHR, GBV, MHPSS, PSEA, 21st Century skill and CFCM	FRC/EEI
10	WGC	Bhamo	Kachin	SRHR, GBV, MHPSS, PSEA, 21st Century skill and CFCM	FRC/EEI
11	WGC	Demoso	Kayah	SRHR, GBV, MHPSS, PSEA, 21st Century skill and CFM	FRC/ISR
12	WGC	Demoso	Kayah	SRHR, GBV, MHPSS, PSEA, 21st Century skill and CFM	FRC/ISR
13	WGC	Demoso	Kayah	SRHR, GBV, MHPSS, PSEA, 21st Century skill and CFM	FRC/ISR
14	WGC	Mansi	Kachin	SRHR, GBV and MHPSS	KMSS
15	WGC	Mansi	Kachin	SRHR, GBV and MHPSS	KMSS

16	WGC	Myebon	Rakhine	GBV, MHPSS and Vocational training	RI
17	WGC	Myebon	Rakhine	GBV, MHPSS and Vocational training	RI
18	WGC	Myebon	Rakhine	GBV, MHPSS and Vocational training	RI
19	Health Clinic	Taungoo	Bago (East)	SRHR and MHPSS	CPI/TWG
20	Health Clinic	Thandaunggyi	Kayin	SRHR and MHPSS	CPI/TWG
21	Health Clinic	Myitkyina	Kachin	SRHR and MHPSS	MMA/RH-Kachin Project
22	Health Clinic	Hpa-An	Kayin	SRHR, GBV and MHPSS	MSI
23	Health Clinic	Mawlamyine	Mon	SRHR, GBV and MHPSS	MSI
24	Health Clinic	Namsang	Shan (South)	SRHR, GBV and MHPSS	MSI
25	Health Services with Counselling Room in the Service Centre	Taunggyi	Shan (South)	SRHR	PUI
26	Health Post	Mongpan	Shan (South)	SRHR and MHPSS	RI/ Loi Tai Leng SHD
27	Health Post	Langkho	Shan (South)	SRHR and MHPSS	RI/ Loi Tai Leng SHD
28	Health Post	Mawkmai	Shan (South)	SRHR and GBV	RI/PHWC
29	Health Post	Mawkmai	Shan (South)	SRHR and GBV	RI/PHWC
30	Health Post	Mawkmai	Shan (South)	SRHR and GBV	RI/PHWC
31	Health Post	Mawkmai	Shan (South)	SRHR, GBV, MHPSS, PHC, MNCH and PSEA	RI/SSDF
32	Health Post	Mawkmai	Shan (South)	SRHR, GBV, MHPSS, PHC, MNCH and PSEA	RI/SSDF
33	Health Post	Mongpan	Shan (South)	SRHR, GBV, MHPSS, PHC, MNCH and PSEA	RI/SSDF
34	Health Post	Langkho	Shan (South)	SRHR, GBV, MHPSS, PHC, MNCH and PSEA	RI/SSDF
35	Safe House	Demoso	Kayah		ACTED/KNWO

36	Safe House	Lashio	Shan (North)	GBV and MHPSS	AFXB
37	Safe House	Taunggyi	Shan (South)	GBV and MHPSS	AFXB
38	Safe House	Sittwe	Rakhine	SRHR, GBV and MHPSS	CFSI
39	Safe House	Hpa-An	Kayin	GBV and MHPSS	CPI/TWG
40	Safe House	Thandaunggyi	Kayin	GBV and MHPSS	CPI/TWG
41	Safe House	Pekon	Shan (South)	GBV and MHPSS	FRC/ISR
42	Safe House	Bhamo	Kachin	SRHR, GBV, MHPSS and CFM	FRC/EEI
43	Safe House	Myitkyina	Kachin	SRHR, GBV and MHPSS	Metta
44	Safe House	Kyainseikkyi	Kayin	SRHR, GBV, Vocational training and Legal services	WON/MI
45	Safe House	Dagon	Yangon	GBV	WON/AWO
46	Safe House	Mayangone	Yangon	SRHR, GBV, MHPSS, Vocational training and Legal refer	WON/WFFP
47	Youth Centre	Momauk	Kachin	SRHR, GBV and MHPSS	HPA/lps
48	Youth Centre	Waingmaw	Kachin	SRHR, GBV and MHPSS	HPA/lps
49	Youth Centre	Waingmaw	Kachin	SRHR, GBV and MHPSS	HPA/lps
50	Key Population Friendly Space	Taunggyi	Shan (South)	SRHR, GBV and MHPSS	PUI/HH

6. METHODOLOGY

6.1. Pilot Testing

6.1.1. Purpose of the Pilot Testing

The pilot testing aimed to pretest the WGF's Accessibility Audit Tool for testing the audit methodology, familiarizing auditors with its application, identifying an initial sense of accessibility issues, and ensuring its effectiveness for auditing service facilities delivered by UNFPA's implementing partners and sub-grantees.

6.1.2. Process and Methodology of Pilot Testing

The pilot testing utilized an adapted accessibility audit tool of WGF Programme, designed to comply with Myanmar's Accessibility Standards followed by MILI[1]. The testing was conducted at three facilities: WGC, Safe House, and Clinic in Taunggyi, Southern Shan hosted by WAPAN, AFXB and PUI. The audit process involved interviewing the staff members from host IPs, followed by an on-site audit of the service facilities, which was conducted with their approval and cooperation. As steps of the process, the MILI audit team, in collaboration with the UNFPA WGF team, held initial meetings with the hosts of the facilities, and oriented the purpose and process of the pilot test. Each testing followed a structured schedule that included opening briefs, obtaining informed consent, auditing different sections of the facilities, and a reflection and feedback session. Senior management and auditors from the hosts actively involved in the pilot testing to enhance the accurate findings with the audit. This process allowed for a thorough review of the audit tool and ensured that all participants had the opportunity to provide input. Finally, the feedback, reactions, and recommendations from the pilot testing team and participants were collected and documented. These were then integrated into the audit tool and methodology to improve its effectiveness.

6.1.3. Key Findings and Recommendations of Pilot Testing:

Following the pilot testing, recommendations were made to further refine the audit tool and methodology:

- More examples were added to Session 1: General Information of the audit tool.
- The Myanmar translations, particularly technical terms in the audit tool, were refined to make them easier to read and understand for the auditors.
- Additional time was allocated for auditing and measurements on the ground.

[12] Myanmar Independent Living Initiative, "Myanmar Accessibility Audit Tool and Accessibility Standards" 2015

- IPs and sub-grantees were informed to include input from their senior management at the organizational level additionally from their audit team on the ground.
- The audit questionnaire tools were shared with IPs and sub-grantees ahead of time to become familiar with the tool and allow them sufficient preparation for the audit.
- IPs and sub-grantees were advised to prepare multiple copies of the checklist or sections of the checklist if there was more than one building, or if a building had multiple doors, ramps, stairs, and/or toilets.
- Input on accessibility and reasonable accommodation for different types of disabilities was provided to the IPs and sub-grantees to help them propose measures to address the identified barriers.

Overall, the pilot testing provided valuable feedback that informed the final version of the audit tool, ensuring it was user-friendly, comprehensive, and aligned with the ground auditing of the IPs and sub-grantees.

6.2. Orientation and Training for Disability Inclusion Focal Points and Auditors

To ensure effective results for the Accessibility Audit and to build understanding of key concepts related to accessibility, disability, and inclusion, a one-day Orientation and Training on Accessibility Audit was conducted twice by the Myanmar Independent Living Initiative (MILI), both in-person and online. A total of 21 participants (71% female) attended the in-person session, while 43 participants (84% female) joined the online session. Each orientation included a mini-audit exercise facilitated by persons with disabilities, ensuring that participants could apply their learning in a practical context. These orientations aimed to equip disability inclusion focal points and auditors with the necessary skills to conduct a comprehensive audit of accessibility policy and practices, physical buildings, facilities, and information and communication systems across the service facilities of UNFPA's implementing partners and sub-grantees using the approved WGF's audit tool. The inclusion of persons with disabilities in the facilitation of the orientations was a key aspect, ensuring that their lived experiences informed the audit approach and outcomes.

6.3. Quality Assurance Check

To ensure the quality and accuracy of the Accessibility Audit findings, a thorough review process was undertaken. From the beginning of the audit, the Consultant and the MILI team provided necessary information and technical support to IPs and sub-grantees based on their needs. This technical assistance was delivered through phone and email throughout the audit process to guide them in collecting accurate data and developing comprehensive reports. After IPs and sub-grantees submitted their initial Audit finding reports, the Consultant and MILI team conducted detailed reviews, providing feedback to ensure that the reports aligned with established accessibility standards, the audit framework, and the needs on the ground. The action plans developed by the IPs and sub-grantees, based on the revised audit finding reports, were reviewed again by the Consultant and MILI team and sent back with additional feedback. This iterative process aimed to refine the audit findings and action plans, ensuring they were practical and would lead to tangible improvements in accessibility. In the review and feedback process, the Consultant and MILI team drew upon the provided audit framework, relevant accessibility standards, and their extensive experience with accessibility and disability. This approach ensured that the feedback was both technically accurate and responsive to the practical challenges faced by persons with disabilities.

7. FINDINGS OF ACCESSIBILITY AUDIT

7.1. Findings on Institutional Accessibility

Institutional accessibility in Women and Girls Centres: The major findings on institutional accessibility in Women and Girls Centres reveal a varied understanding and implementation of accessibility across their organizations.

- The facilities responded that a significant portion (66.7%) of organizations understand what “accessibility” means, however, none of the organizations have formalized this understanding into an accessibility policy. Awareness of accessibility principles is somewhat present, with 44.4% familiar with these concepts, but only a minimal portion (5.6%) report having accessible public spaces, such as training halls, meeting rooms, and restrooms.
- Participation of persons with disabilities or their representative organizations in accessibility assessments or improvements is moderate, with 38.9% of facilities reporting such engagement. However, none of the organizations have made their feedback mechanisms or communication channels fully accessible to persons with disabilities, specifically for those with speech, hearing, or visual impairments.

- Only 16.7% of facilities provide sign language interpreters, captionists, or caretakers for persons with hearing or speech impairments, and only 5.6% offer written materials in formats accessible to persons with disabilities. A third (33.3%) report that they ensure full access to services for persons with disabilities, while flexibility in adapting services for this group is relatively high, with 72.2% of facilities affirming this approach.
- Regarding reasonable accommodations, 33.3% of facilities practice "asking" persons with disabilities about their needs for reasonable accommodation, such as accessible facilities and support for personal assistants. However, only 22.2% record and track these requests. Half (50%) of organizations indicate they are able to provide reasonable accommodations, though only 50% have a budget allocated specifically to support disability inclusion.
- Staff orientation on informed consent and confidentiality is relatively well-established, with 77.8% of facilities following these protocols. Training and additional information on creating accessible spaces are also in demand; 44.4% of facilities expressed a need for more information or training, and 72.2% are willing to receive training on disability and accessibility issues.

The below table shows the detailed findings of the institutional accessibility audit conducted by the implementing partners and sub-grantees at their Women and Girls Centres.

Understanding Accessibility	66.7%	Approximately two-thirds of facilities report that their organization has a basic understanding of accessibility, including CRPD Article 9 on accessibility, minimum accessibility standards, and ensuring access to services for persons with disabilities.
Accessibility Policy	0.0%	Facilities respond that none of their organizations have a formal accessibility policy, indicating a lack of institutionalized commitment to accessibility standards.

<p>Awareness of Accessibility Principles</p>	<p>44.4%</p>	<p>Less than half of the organizations are aware of accessibility principles, limiting the ability of persons with disabilities to access services and participate in the activities, and their understanding includes the role of accessibility in women's rights and gender issues.</p>
<p>Accessible Public Spaces in Organization</p>	<p>5.6%</p>	<p>Only a minimal percentage of organizations report having accessible public spaces, highlighting significant barriers for people with disabilities.</p>
<p>Involvement of Persons with Disabilities in Improving Accessibility in Organization</p>	<p>38.9%</p>	<p>Limited involvement of persons with disabilities and their organizations in assessing or improving accessibility in the organizations, and revealing a significant gap in engaging with organizations of persons with disabilities.</p>
<p>Accessible Feedback Mechanisms and Communication Channels</p>	<p>0.0%</p>	<p>No accessible feedback mechanisms or communication channels are in place, posing communication barriers for persons with disabilities, especially those with hearing, speech, or visual impairments.</p>
<p>Sign Language and Other Communication Supports</p>	<p>16.7%</p>	<p>The low provision of sign language interpreters or other support for communication with those with hearing or speech impairments limits their access to services and participation in activities, despite providing captioning and communication in writing.</p>
<p>Alternative Formats for Written Materials</p>	<p>5.6%</p>	<p>Few organizations make written materials available in accessible formats, and those include providing accessible IEC materials.</p>

Full Access to Services	33.3%	Only one-third of organizations report ensuring full access to services for people with disabilities, indicating substantial gaps in inclusive service delivery.
Flexibility in Adapting Services	72.2%	A majority of organizations are flexible in adapting services for persons with disabilities, which is a positive indication for promoting inclusiveness in service delivery.
Asking About Reasonable Accommodation Needs of Persons with Disabilities	33.3%	Limited practice of asking individual needs or reasonable accommodation needs of persons with disabilities, and this may greatly hinder the full access and participation of people with disabilities in the services and activities of the facilities.
Recording Reasonable Accommodation Requests and Provisions	22.2%	Few organizations record requests for reasonable accommodations from persons with disabilities or organization's provisions for them, and there is a lack of follow-up in addressing them.
Provision of Reasonable Accommodation	50.0%	Half of the organizations provide reasonable accommodations to people with disabilities, indicating a need for increased resource allocation.
Staff Orientation of Informed Consent and Confidentiality Protocols	77.8%	Most staff are oriented to informed consent and confidentiality protocols, which is a positive reflection of organizational responsibility.
Budget for Disability-Inclusive Programmes	50.0%	Only half of the organizations have budget allocations for disability-inclusive initiatives, limiting the sustainability of accessibility efforts.

Need for Accessibility Information or Training	44.4%	Nearly half of the organizations require additional information or training on accessibility, expecting an opportunity for capacity-building.
Willingness to Receive Accessibility Training	72.2%	Most organizations are open to receiving training on disability and accessibility, showing readiness to improve their capacity and practices.

Institutional accessibility in Health Posts/Clinics: The major findings on institutional accessibility in Health Posts/Clinics reveal a varied understanding and implementation of accessibility across their organizations.

The facilities responded that although 87.5% of respondents indicated a broad understanding of the concept of accessibility, there is no established accessibility policy in place within their organizations. While nearly half (43.8%) of the respondents were familiar with accessibility principles, implementation of accessible facilities, such as public spaces for meetings, restrooms, or transport, remains limited at 18.8%. Similarly, while 18.8% reported inviting persons with disabilities and their representative organizations to participate in accessibility assessments, a more structured approach may enhance inclusiveness in the organization's accessibility initiatives.

Regarding accessible feedback mechanisms and communication channels, 25% noted they are available, although further enhancements are needed, especially for persons with hearing, speech, or visual impairments. Similarly, only 25% of respondents confirmed that written materials are available in alternative formats for individuals with disabilities. While 56.3% confirmed efforts to ensure persons with disabilities can access organizational services, there are opportunities to expand accessibility through structural adjustments and inclusive practices.

In terms of adaptability, the organization demonstrates flexibility, with 75% indicating adjustments to service processes for beneficiaries with disabilities, including service facility adaptation and consideration of service costs. However, the practice of asking individuals with disabilities about their reasonable accommodation needs is only followed by 50% of the facilities. Additionally, only 18.8% record the requests and provisions for reasonable accommodation, highlighting an area for improvement.

A reasonable accommodation provision is available to some degree, though only 31.3% reported such support consistently. Moreover, 75% of respondents confirmed that staff are oriented to follow informed consent and confidentiality protocols, underscoring

a commitment to ethical considerations. Financial support for disability-inclusive initiatives is an area with limited availability, as only 25% reported a dedicated budget for such activities.

The findings underscore a need for training and capacity-building, with 68.8% indicating the need for further information or training on creating accessible spaces, and 62.5% expressing willingness to receive training on disability and accessibility issues.

The below table shows the detailed findings of the institutional accessibility audit conducted by the implementing partners and sub-grantees at their Health Posts/Clinics.

Understanding Accessibility	87.5%	A strong majority of organizations report an understanding of accessibility, yet this does not appear to translate into formal policies or comprehensive practices.
Accessibility Policy	0.0%	No organization reported having a formal accessibility policy, indicating a major gap in institutional commitment to accessibility.
Awareness of Accessibility Principles	43.8%	Less than half of the organizations are aware of accessibility principles, suggesting a need for increased awareness and education on these foundational guidelines.
Accessible Public Spaces in Organization	18.8%	Very few organizations have accessible public spaces, which restricts physical access for persons with disabilities in the services.
Involvement of Persons with Disabilities in Improving Accessibility in Organization	18.8%	Limited involvement of persons with disabilities or their representative organizations in accessibility planning and improvements, and this reveals a significant gap in engaging with organizations of persons with disabilities.
Accessible Feedback Mechanisms and Communication Channels	25.0%	Only a quarter of organizations have accessible feedback mechanisms and communication channels, limiting communicational engagement and feedback from persons with disabilities.
Sign Language and Other Communication Supports	0.0%	No organizations reported offering sign language or captioning services, leaving a significant barrier for those with hearing or speech impairments.

Alternative Formats for Written Materials	25.0%	A minority of organizations provide written materials in accessible formats, limiting information access for persons with visual, hearing and/or speech impairments.
Full Access to Services	56.3%	Over half of the organizations ensure full access to services, indicating some progress but with a need for improvement in service adaptation.
Flexibility in Adapting Services	75.0%	A high percentage of organizations report flexibility in adapting their services for persons with disabilities, showing a positive trend towards inclusiveness in service delivery sector.
Asking About Reasonable Accommodation Needs of Persons with Disabilities	50.0%	Only half of organizations ask about individual needs or reasonable accommodation needs of persons with disabilities, indicating that the service providers are not ready yet for inclusive services.
Recording Reasonable Accommodation Requests and Provisions	18.8%	Few organizations record requests for reasonable accommodations from persons with disabilities or organization's provisions for them, and there is a lack of follow-up in addressing them.
Provision of Reasonable Accommodation	31.3%	One-third of organizations provide reasonable accommodations for persons with disabilities, but there remains a limitation for organizations in accessing the resources needed to fulfill them.
Staff Orientation of Informed Consent and Confidentiality Protocols	75.0%	The staff in most organizations are oriented to informed consent and confidentiality protocols, and this shows organization's accountability in protecting the rights and privacy of persons with disabilities in enjoying services.
Budget for Disability-Inclusive Programmes	25.0%	One-fourth of organizations have a budget for disability-inclusive programming, with limits the scope of possible adaptations for full allocation of the budget.

Need for Accessibility Information or Training	68.8%	A significant proportion of organizations express the need for further training, highlighting a gap in current knowledge and resources on accessibility.
Willingness to Receive Accessibility Training	62.5%	More than half of the organizations are open to receiving further training on accessibility, a positive sign for future improvement for inclusive service delivery.

Institutional accessibility in Safe Houses: The major findings on institutional accessibility in Safe Houses reveal a varied understanding and implementation of accessibility across their organizations.

The findings indicate that 91.7% of respondents understand the concept of “accessibility” and 83.3% show a willingness to adapt their services for persons with disabilities. However, only 8.3% have an established accessibility policy, suggesting a gap in commitment to accessibility practices. Knowledge of accessibility principles exists but is limited (33.3%), and only a third (33.3%) have accessible public spaces, such as training halls, meeting rooms, or restrooms. Additionally, while some organizations engage with persons with disabilities or their representative organizations to assess or improve accessibility (16.7%), this practice is not widespread.

Communication channels remain largely inaccessible, particularly for users with speech, hearing, or visual impairments, as no organization reported accessible feedback mechanisms. Similarly, the availability of sign language interpreters, captionists, or caretakers for persons with hearing and speech impairments is low, with only 16.7% offering these services. Written materials in alternative formats are also lacking, with no organization reporting such resources for people with disabilities.

Organizations demonstrate a moderate commitment to ensuring full access to services for persons with disabilities (66.7%), and 58.3% of them are open to providing reasonable accommodations. However, the practice of “asking” about individual needs for reasonable accommodations is found in 58.3% of responses. Only a third (33.3%) of organizations record requests and provisions of reasonable accommodations, indicating an area for improvement in tracking and accountability.

In terms of organizational culture, 83.3% of staff are oriented in informed consent and confidentiality protocols, which shows a strong foundation in ethical service provision. Additionally, 58.3% have allocated a budget for making programmes and projects inclusive, yet this number suggests room for growth in financial commitment.

Training needs are evident, with 41.7% indicating a requirement for more information on creating accessible spaces and 75% expressing a willingness to receive training on disability and accessibility issues, highlighting a readiness to build organizational capacity in accessibility and inclusion.

The below table shows the detailed findings of the institutional accessibility audit conducted by the implementing partners and sub-grantees at their Safe Houses.

Understanding Accessibility	91.7%	A high percentage of organizations understand what “accessibility” entails, they understand that accessibility means equality, non-discrimination, and benefits for all, regardless of gender, age, ethnicity, disability, etc., and involves making infrastructures, facilities, products, equipment, services, and information accessible to everyone.
Accessibility Policy	8.3%	A few organizations have a formal accessibility policy, indicating a significant gap in institutional commitment to and accountability for accessibility for everyone.
Awareness of Accessibility Principles	33.3%	While a third of organizations are aware of accessibility principles, this shows limited exposure in learning accessibility.
Accessible Public Spaces in Organization	33.3%	Only a third of organizations provide accessible public spaces (e.g., training halls, restrooms, emergency routes), highlighting significant infrastructure barriers for persons with disabilities in accessing the services.
Involvement of Persons with Disabilities in Improving Accessibility in Organization	16.7%	A small percentage involve persons with disabilities or their representative organizations in accessibility assessments, indicating missed opportunities for meaningful participation of people with disabilities.
Accessible Feedback Mechanisms and Communication Channels	0.0%	No organizations have accessible feedback channels or communication options for users with disabilities, a critical gap that limits inclusive communication.

Sign Language and Other Communication Supports	16.7%	A limited number of organizations provide sign language or caretakers, showing limited accommodation for those with hearing and speech impairments.
Alternative Formats for Written Materials	0.0%	No organizations offer materials in accessible formats, such as Braille, large print or alternative ones, which restricts information access for persons with visual, hearing and/or speech impairment.
Full Access to Services	66.7%	While more than half of the organizations aim to provide full access of services for persons with disabilities, there may still be practical barriers, such as physical space limitations, staff training, or support services.
Flexibility in Adapting Services	83.3%	The majority of organizations report that they are flexible in adapting their services for persons with disabilities, demonstrating that service provider organizations are ready to meet the varying needs of diverse service users, which may lead to greater inclusion within the organizations.
Asking About Reasonable Accommodation Needs of Persons with Disabilities	58.3%	Over a half of organizations practice asking persons with disabilities about their reasonable accommodation needs, which respects persons with disabilities for their equal and full access in the services.
Recording Reasonable Accommodation Requests and Provisions	33.3%	Limited documentation of reasonable accommodation requests and provisions indicates a need for systematic records to ensure consistent service delivery, follow-up and evidence-based improvement.
Provision of Reasonable Accommodation	58.3%	Over half of the organizations provide the reasonable accommodation for persons with disabilities, but there remains a need to prepare the resources for fulfilling the needs of persons with disabilities consistently.
Staff Orientation of Informed Consent and Confidentiality Protocols	83.3%	Most organizations follow informed consent and confidentiality practices, a positive sign of ethical standards in mainstreaming persons with disabilities in the services and activities.

Budget for Disability-Inclusive Programmes	58.3%	Over half of organizations allocate a budget for disability inclusion, which may impact greater disability inclusion within the organizations.
Need for Accessibility Information or Training	41.7%	Nearly half of the organizations express a need for more information or training, indicating a readiness to improve accessibility if resources and guidance are provided.
Willingness to Receive Accessibility Training	75.0%	A majority are willing to engage in accessibility training, reflecting an institutional openness to enhance accessibility knowledge and implementation within the organizations.

Institutional accessibility in Youth Centers: The major findings on institutional accessibility in Youth Centres reveal a varied understanding and implementation of accessibility across their organizations.

The findings show that most facilities have a strong foundational understanding of accessibility, with all respondents affirming awareness of its meaning and principles. Similarly, all respondents confirmed the existence of accessibility policies within their organization. There is, however, a notable gap in accessible physical spaces, as none reported having universally accessible public areas, such as training halls, meeting rooms, restrooms, waiting rooms, information desks, emergency routes, or accessible transport.

Engagement with persons with disabilities in accessibility assessments or improvements remains minimal, with no organization inviting these groups or their representative organizations to participate in such initiatives. Additionally, feedback mechanisms and communication channels were not accessible for persons with different types of disabilities, including those with speech, hearing, or visual impairments. Support services like sign language interpretation, captioning, or caregiver assistance for persons with hearing and/or speech impairments were also not available.

The facilities reported limited availability of alternative formats for written materials, meaning accessibility to information remains a significant barrier. Moreover, accessibility to services for persons with disabilities is limited, with no organization ensuring full accessibility to their services. Flexibility in adapting services for people with disabilities was rated positively, with all organizations indicating flexibility in areas such as data collection, beneficiary recruitment, adaptation of facilities, and service expenses.

None of the organizations practice “asking” persons with disabilities about their needs for reasonable accommodation when accessing facilities or services, nor do they record requests or provisions of such accommodations. Despite these gaps, the facilities express a willingness to provide reasonable accommodation to persons with disabilities if the need arises, although they do not currently have protocols in place. Moreover, staff adherence to informed consent and confidentiality protocols related to persons with disabilities remains unconfirmed.

When it comes to budgetary provisions for disability inclusion, responses are positive, with all responses indicating they have funds allocated toward disability-inclusive practices in 2024. Finally, all facilities expressed an interest in additional information and training on accessibility and disability-inclusive practices and confirmed willingness to receive training on these topics. This enthusiasm for capacity building demonstrates a readiness to improve and enhance accessibility across their programmes and services.

The below table shows the detailed findings of the institutional accessibility audit conducted by the implementing partners and sub-grantees at their Youth Centres.

<p>Understanding Accessibility</p>	<p>100.0%</p>	<p>All respondents confirmed that their organization understands the concept of “accessibility.” The meaning they understand includes that accessibility means people with disabilities can engage, access and/or participate in what they need to do in a similar amount of time and effort as someone without a disability. It means that people are empowered, can be independent, and will not be frustrated by something that is poorly designed or implemented. And, accessibility is the concept of whether a product or service can be used by everyone, regardless of how they encounter it. Accessibility laws exist to support people with disabilities, but designers should aim to accommodate all potential users across various contexts of use. Doing so has significant benefits, particularly in creating better designs for everyone. This awareness indicates that the organization has a foundational understanding of the term and its importance of accessibility. However, this understanding needs to be fully translated into action in certain practical areas, such as accessible facilities and accommodations in the services.</p>
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<p>Accessibility Policy</p>	<p>100.0%</p>	<p>The presence of an accessibility policy shows a commitment to inclusion of everyone and recognition of accessibility principles, suggesting that the policy should be fully operationalized across facilities and services of the organization.</p>
<p>Awareness of Accessibility Principles</p>	<p>100.0%</p>	<p>Awareness of accessibility principles is high, which shows an understanding of the theory related to accessibility. However, practical applications of these principles seem to be limited, particularly in physical and programmatic adjustments.</p>
<p>Accessible Public Spaces in Organization</p>	<p>0.0%</p>	<p>No accessible public spaces were reported, which significantly limits physical access for persons with disabilities. The absence of features like accessible meeting rooms, restrooms, emergency routes, and car parks poses barriers to inclusion of persons with disabilities in the services.</p>
<p>Involvement of Persons with Disabilities in Improving Accessibility in Organization</p>	<p>0.0%</p>	<p>The organization does not currently engage with persons with disabilities or their representative organizations in accessibility assessments or improvements, which limits the engagement of people with disabilities in addressing their accessibility needs.</p>
<p>Accessible Feedback Mechanisms and Communication Channels</p>	<p>0.0%</p>	<p>Feedback mechanisms are not accessible, posing challenges for persons with speech, hearing, or visual impairments. This gap restricts effective and inclusive communication and service improvement opportunities accessible for everyone.</p>
<p>Sign Language and Other Communication Supports</p>	<p>0.0%</p>	<p>Lack of support services for persons with hearing and/or speech impairments creates barriers to access the information, have the effective communication and enjoy the services of the facilities.</p>
<p>Alternative Formats for Written Materials</p>	<p>0.0%</p>	<p>Written materials are not available in accessible and alternative formats (e.g., Braille, audio, large print), which creates more challenges for persons with visual, hearing and/or speech impairments.</p>

Full Access to Services	0.0%	The result shows that the organization needs to make greater planning and efforts to initiate and promote access to services for persons with disabilities.
Flexibility in Adapting Services	100.0%	The organization demonstrates flexibility in adapting services for people with disabilities, indicating a willingness to make reasonable adjustments.
Asking About Reasonable Accommodation Needs of Persons with Disabilities	0.0%	Not asking persons with disabilities on their individual or reasonable accommodation needs may leave people with disabilities behind from the services and result the challenges to prepare inclusive services in the organizations.
Recording Reasonable Accommodation Requests and Provisions	0.0%	The absence of documentation for reasonable accommodation requests may bring challenges in tracking and improving service accessibility.
Provision of Reasonable Accommodation	0.0%	The organization lacks the means to provide reasonable accommodation, which affects its ability to deliver inclusive services.
Staff Orientation of Informed Consent and Confidentiality Protocols	0.0%	The lack of staff orientation on informed consent and confidentiality protocols poses risks to respectful and ethical service delivery for people with disabilities.
Budget for Disability-Inclusive Programmes	100.0%	A dedicated budget for disability inclusion is a strong positive indicator and can facilitate the implementation of required accessibility improvements in the organizations and its services.
Need for Accessibility Information or Training	100.0%	The organization expressed a need for additional information or training on accessibility, showing a willingness to address the capacity gap on accessibility.
Willingness to Receive Accessibility Training	100.0%	High willingness for accessibility training reflects the organization's openness to improving its accessibility initiatives and practices.

Institutional accessibility in Key Population Friendly Space: The major findings on institutional accessibility in Key Population Friendly Space reveal a varied understanding and implementation of accessibility across their organization.

The findings reported a mixed level of understanding and implementation of institutional accessibility practices within the organization. While all respondents understand what "accessibility" means, only a small proportion have further policy to support accessibility. Specifically, no respondents indicated the existence of a formal accessibility policy or any familiarity with established accessibility principles, suggesting an area for organizational development.

In terms of accessible facilities, the responses show limited provision. None of the respondents reported accessible public spaces such as training halls, meeting rooms, or accessible emergency routes, parking, or transport options. Additionally, no provision exists for accessible feedback mechanisms or communication channels for people with disabilities, such as sign language interpreters, caretakers, or materials in alternative formats for people with visual or hearing impairments.

However, 100% of respondents expressed a commitment to inviting persons with disabilities and representative organizations to assess or improve accessibility within the organization. Furthermore, all respondents affirmed that the organization’s staff are oriented in informed consent and confidentiality protocols, an important step in ensuring ethical interactions with persons with disabilities.

The findings also indicate interest in improving inclusiveness: 100% of respondents noted a need for further information and training on accessibility. This interest includes a desire for training on disability and accessibility issues to build capacity and enhance accessibility in services and facilities.

The below table shows the detailed findings of the institutional accessibility audit conducted by the implementing partners and sub-grantees at their Key Population Friendly Space.

Understanding Accessibility	100.0%	This indicates the organization has a solid foundational understanding of accessibility. The organization understands accessibility as meaning that a person with a disability is afforded the opportunity to acquire the same information, engage in the same interactions, and enjoy the same services as a person without discrimination.
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Accessibility Policy	0.0%	Without a formal policy in organization, accessibility efforts may lack consistency and accountability.
Awareness of Accessibility Principles	0.0%	Lack of familiarity with accessibility principles suggests limited guidance into accessibility practices.
Accessible Public Spaces in Organization	0.0%	Inaccessible public spaces in organization restricts the meaningful engagement and participation of persons with disabilities and their organizations in the services and activities of the facilities.
Involvement of Persons with Disabilities in Improving Accessibility in Organization	100.0%	Inviting and consulting persons with disabilities in accessibility assessment promotes all-inclusiveness and provides valuable feedback for accessibility improvements in organizations.
Accessible Feedback Mechanisms and Communication Channels	100.0%	Accessibility in community feedback and complaint mechanism of organization, but not covers for all types of disabilities yet.
Sign Language and Other Communication Supports	0.0%	No support is provided by organization for persons with hearing, speech or visual impairment, creating communication barriers.
Alternative Formats for Written Materials	0.0%	Lack of accessible formats limits information access for persons with visual, hearing or speech impairments.
Full Access to Services	100.0%	A commitment to accessibility exists but need to be fully translate into practical service adaptations.
Flexibility in Adapting Services	0.0%	Inflexibility in adapting services may hinder the access of persons with disabilities in the services.
Asking About Reasonable Accommodation Needs of Persons with Disabilities	0.0%	Not asking about individual or reasonable accommodation needs of persons with disabilities is missing a first step to ensure the accessible and inclusive services for all.
Recording Reasonable Accommodation Requests and Provisions	0.0%	Lack of record-keeping on reasonable accommodation requests and provisions may face challenges for follow-up and evidence-based planning of accessible and inclusive services.

Provision of Reasonable Accommodation	0.0%	No provision of reasonable accommodations caused due to budgetary and procedural constraints.
Staff Orientation of Informed Consent and Confidentiality Protocols	100.0%	Staff of organization are fully oriented of informed consent and confidentiality protocols.
Budget for Disability-Inclusive Programmes	0.0%	Absence of budgetary provisions limits the scope of accessibility improvements.
Need for Accessibility Information or Training	100.0%	High demand for accessibility information or training.
Willingness to Receive Accessibility Training	100.0%	High interest in accessibility training reflects a proactive approach to enhancing institutional accessibility for persons with disabilities and everyone.

7.2. Findings on Physical Accessibility

Physical Accessibility in Women and Girls Centres: Physical Accessibility in Women and Girls Centres: The major findings regarding physical accessibility in Women and Girls Centres are as follows.

Reaching the Facility

- **External Signage and Pathways:** While 44.4% of facilities have signboards indicating their location, pathways around buildings are often obstructed, with only 22.2% of pathways reported as clear. Accessibility features for persons with disabilities, such as directional tactile strips, are notably absent, and only 33.3% of pathways are confirmed to have hard, slip-resistant surfaces.
- **Path Width and Safety Features:** About 88.2% of pathways meet the width requirement of at least 120 cm, but essential features such as rail bars, curbs, and accessible public transport options are completely lacking.
- **Parking and Drop-Off Zones:** Only 12.5% of facilities have designated parking spaces for persons with disabilities within the recommended distance to the entrance, and covered drop-off zones near entrances are available in just 11.1% of facilities.

Entering the Facility

- **Level Access and Pathway Width:** Only 16.7% of entrances are on the same level as the ground outside, indicating significant challenges in accessibility. Pathways leading to the entrance are more accessible, with 61.1% being clear and wide enough (minimum 120 cm).
- **Ramps:** Accessibility ramps are limited, with only 27.8% of facilities having ramps where needed. Among existing ramps, only 35.7% meet the minimum width requirement, and a mere 14.3% meet the recommended gradient. Safety features such as edges, slip-resistant surfaces, and handrails are largely missing.
- **Entrances and Doors:** Entrance doors are often not wheelchair accessible, with 41.2% being too narrow. In facilities where thresholds exceed 2 cm, sloped approaches or portable ramps are rare (11.8%). Lighting around entrances is sufficient in all facilities (100%), but the presence of accessible door handles and contrast between doorframes and handles are only partially available.

Circulating Around the Facility

- **Steps and Stairs:** Only 22.2% of stairs provide adequate accessibility, and stair width (120 cm) is maintained in just 16.7% of cases. Accessibility aids like handrails and tactile strips for persons with visual impairments are absent.
- **Ramps:** Very few ramps meet minimum accessibility standards. Handrails, non-slip surfaces, and landing space are lacking, making circulation difficult for wheelchair users.
- **Doors and Corridors:** While some entry doors are accessible, 40% are not wide enough for wheelchairs. Corridors generally do not meet minimum width standards (47.1%), and obstacles are frequently present. Lighting is sufficient in most areas, but there are few designated spaces for wheelchair users next to benches.

Using Specific Areas

- **Switches, Lighting, and Signage:** Facilities generally have adequate lighting and clear, contrasting signage (70.6%). However, accessible placements for light switches are rare and only 5.6% of accessible spaces are marked with international accessibility symbol.
- **Toilets and Bathrooms:** Accessibility in restrooms is limited, with only 43.8% of toilets meeting minimum size requirements and features like grab bars, adaptable seating, and privacy measures underdeveloped. Additionally, sliding doors and height-appropriate fixtures are rarely present.
- **Work and Office Rooms:** Entry door dimensions meet accessibility standards in 64.7% of cases. Though most tables provide sufficient space for wheelchair users (83.3%), power switches are rarely within reach for persons with limited mobility (11.8%).

- **Emergency Features:** While some facilities have emergency routes that are partially identifiable for people with visual impairments (22.2%), there are no systems in place for identifying emergencies for those with hearing or speech impairments. Emergency exits are generally available but are often obstructed (22.2%), and the location of fire escapes is not always clearly marked (5.6%). While a majority of facilities have fire extinguishers (55.6%), staff training on their use and on emergency evacuations is limited (22.2%). Additionally, no facilities have designated vehicles for emergency evacuation.

The below table shows the detailed findings of the physical accessibility audit conducted by the implementing partners and sub-grantees at their Women and Girls Centres.

Reaching the Facility	% Responded 'Yes'
External Pathways, Car parks and Public transport	
Is there a signboard to indicate the location of your place?	44.4%
Are the pathways around your building clear of all obstructions? (e.g., obstacles on the surface and hanging obstacles along the pathway)	22.2%
Do the pathways from/to the facility have any steps and stairs?	38.9%
Do the pathways from/to the facility have directional tactile strips for persons with visual impairment?	0.0%
Is the path at least 120 cm wide?	88.2%
Is the surface level hard, slip-resistant, and non-reflecting?	33.3%
Where the pathway has differences in height?	55.6%
Do pathways have any rail bars, bollards and/or curbs?	0.0%
Are rail bars at the recommended height of 70 cm to 90 cm from floor level?	0.0%
Is the diameter of the rail bars between 4-5cm?	0.0%
Is there accessible public transport to the facility?	0.0%
Is the parking designated for persons with disabilities located within a distance of 50 metres (ISO compliant) or 30 m (recommended) or less from the accessible entrance?	12.5%
Is the drop-off zone near the building's entrance covered?	11.1%
Entering the facility	
% Responded 'Yes'	
Is the ground outside on the same level as the entrance to the building?	16.7%
Is the pathway clear of all obstructions and at least 120 cm wide? Are there warning blocks around any obstruction on the pathways?	61.1%
Ramps	
If the ground outside is not on the same level as the entrance to the building, is there a ramp?	27.8%
If there is a ramp, does it have a minimum width of 120 cm?	35.7%
If there is a ramp, does it have the recommended gradient at least 1:10 feet?	14.3%

Does the ramp have edges or curbs?	0.0%
Does the ramp have a slip-resistant surface?	21.4%
Does the ramp have support handrails on both sides that are between 70 and 90 cm from floor level?	7.1%
Is the diameter of the handrails between 4-5 cm?	7.7%
Is there enough landing space (at least 150cm) before and after the ramp?	50.0%
4.4. Doors	
Is there an entrance or door threshold over 2 cm high?	29.4%
If yes, is there a sloped approach or portable ramp provided?	11.8%
Is the door wide and high enough for a wheelchair at least 90 cm X 200 cm?	41.2%
Is there enough flat space or area (at least 150 cm) before and after the door?	94.1%
Does the door open in slide door type?	5.6%
Is the door handle easy to reach (not higher than 120 cm off the ground) and easy to use?	52.9%
Is the distance between the door frame and door handle at least 4.5 cm?	52.9%
Is the door lock easy to use?	88.9%
Is there colour contrast between the door frame and handle?	66.7%
Can the entrance door be opened independently and easily by a person in a wheelchair i.e., light weight door (try opening it with one finger), low door handle...?	58.8%
Does your building have a floor plan displayed outside?	5.6%
Are the pathways leading to the building adequately lit?	100.0%
Circulating around the Facility	
% Responded 'Yes'	
Stairs, doors, ramps, and corridors	
Steps and Stairs	
Are there steps or stairs to access the important rooms inside the building?	22.2%
Is the minimum width of the stairs 120 cm?	16.7%
Is there a flat landing 150 cm at the top and bottom of the stairs?	21.4%
Do the stair treads have an anti-slip surface?	15.4%
Do the stair treads have an appropriate depth (30cm) and height (15 cm)?	7.7%
Do the stairs have a nosing or stair edges?	15.4%
Are the steps or stairs adequately lit?	61.5%
Are there handrails available on both sides?	8.3%
Are there handrails available along the full length of the step and stairs?	7.7%
Are rail bars at the recommended height of 70 cm to 90 cm from floor level?	16.7%
Is the diameter of the rail bars in between 4-5 cm?	7.1%
Are there any directional tactile strips for persons with visual impairment inside the building to guide them from entrance to information desk/lobby/restroom, etc.?	0.0%
Ramps	
If there is a ramp, does it have the recommended gradient at least 1:10 feet?	0.0%
If there is a ramp, does it have a minimum width of 120 cm.	0.0%
If there is a ramp, is there enough flat landing space (at least 150 cm) before and after the ramp?	0.0%
Does the ramp have an anti-slip surface?	0.0%
Are the ramps adequately lit?	7.7%

Are there handrails available on both sides?	0.0%
Are there handrails available along the full length of the ramps?	0.0%
Are handrails at the recommended height of 70 cm to 90 cm from floor level?	0.0%
Is the diameter of the handrails between 4-5 cm?	0.0%
Is the space between the handrails and the wall more than 4.5 cm?	0.0%
Are the handrails painted in contrasting colours to ensure easy visibility?	0.0%
Doors	
Is there an entrance or door threshold over 2 cm high?	29.4%
If yes, is there a sloped approach or portable ramp provided?	0.0%
Is the door wide and high enough for a wheelchair at least 90 cm X 200 cm?	40.0%
Is there enough flat space or area (at least 150 cm) before and after the door?	88.2%
Does the door open in slide door type?	0.0%
Is the door handle easy to reach (not higher than 120 cm off the ground) and easy to use?	62.5%
Is the distance between the doorframe and door handle at least 4.5 cm?	37.5%
Is the door lock easy to use?	76.5%
Is there colour contrast between doorframe and handle?	52.9%
Can the entrance door be opened independently and easily by a person in a wheelchair?	58.8%
Corridors	
Do the corridors have a minimum width 120 cm?	47.1%
Are different levels connected by ramps?	50.0%
Are all over hanging obstructions mounted above minimum height of 210 cm?	12.5%
Are the surfaces of the corridors anti-slip?	57.1%
Are the corridors free of all obstacles (i.e., boxes, tables, chairs)?	16.7%
Is there an adjoining space for a wheelchair next to benches and public seats?	33.3%
Is the back of seats with a height of 70 cm to 75 cm (seat 45 cm)?	20.0%
Using Specific Areas	
% Responded 'Yes'	
Switches, Lightings and Signages	
Is there adequate lighting in the building?	100.0%
Are the light switches at a height between 90 cm to 120cm?	0.0%
Are all wall-mounted information panels and signs placed at a height between 90 cm to 180cm?	88.2%
Are the signs clear and contrast colour?	70.6%
Are accessible places clearly identified by the International Accessibility Symbol?	0.0%
Toilets and bathrooms	
Is the toilet Western latrine friendly for persons with disabilities?	0.0%
For the Asian Latrine, do the latrines have rails placed on both sides for those with difficulties squatting or standing up again?	5.6%
Do you have an adaptable seating device for any Asian squatting pans?	11.1%
Are the accessible toilets indicated by a wheelchair sign (white on blue)?	5.6%
Is the size of the toilet not less than 150 cm x 150 cm?	43.8%
Is there a clear space of 150 cm x 150 cm in front of the toilet?	31.3%

For a western latrine, is there a drop-down grab bar at a height of 48 cm and 70 cm beside the toilet?	0.0%
Do grab bars have a diameter of 4-5 cm?	0.0%
Are the grab bars in the toilet solidly attached to the wall and able to hold the weight of an adult person?	7.1%
Is there a washbasin inside or near the toilet?	22.2%
Is the washbasin at the height of 80 cm to 85 cm?	46.7%
Does the water tap have long lever handles that are easy to operate?	6.3%
Is there clear knee space between the sink and floor?	81.3%
Do toilets ensure privacy?	94.4%
The toilet door/s open in slide door type.	0.0%
Are door handles at an easy-to-reach height of between 85 cm to 120 cm?	68.8%
Can doors be easily locked from the inside and be released from outside under emergency situations?	88.2%
Is the floor material non-slip, well drained and waterproof?	100.0%
Is the toilet bowl height between 45-50 cm?	16.7%
Work and/or office rooms	
Do the room's entry doors comply with specific prescriptions (minimum door width 90 cm and height of 200 cm)?	64.7%
Are chairs back of seats with a height of 70 cm to 75 cm (seat = 45cm)?	22.2%
Are the tops of the table between 75 cm and 80 cm height?	83.3%
Is there enough space between table/working benches for persons using a wheelchair to move around (at least 120 cm)?	83.3%
Are the power switches between 90 cm to 120 cm from the floor level?	11.8%
Are the power switches in a colour that contrasts with the surrounding wall or are highlighted by a different strip of colour for people with low vision?	31.3%
Is the room well lit, with a combination of natural and electric light?	77.8%
Emergency features	
Are the emergency routes identifiable by persons with disabilities (including people with visual impairments)?	22.2%
Can an emergency be identified by hearing or speech impaired persons?	0.0%
Does the facility or establishment have emergency exits?	22.2%
Is the location of emergency (fire escape) clearly identifiable?	5.6%
Does the facility/establishment have fire extinguishers?	55.6%
Are staff trained on "Firefighting Training" or "Emergency Evacuations"?	22.2%
Does the facility have transportation/vehicle in place for emergency evacuation?	0.0%

Physical Accessibility in Health Posts/Clinics: The major findings regarding physical accessibility in Health Posts/Clinics are as follows.

Reaching the Facility:

- **External Signage and Pathways:** Only 40% of facilities had signage indicating their location. While 73.3% of pathways were clear of obstructions, only 40% of pathways were free of steps, and none had tactile strips for persons with visual impairment.
- **Surface and Structure:** Although 80% of paths met the minimum width, only 66.7% had hard, slip-resistant surfaces. Moreover, just 40% addressed height variations with necessary features, and no pathways included required rail bars or curbs.
- **Transport and Parking:** Public transport access was limited (31.3%), and only 25% of facilities provided designated parking within 50 meters of the entrance.

Entering the Facility:

- **Level Access:** Only 18.75% of facilities had level access at the entrance. For ramps, while 42.9% had them, fewer had adequate width (50%) or curbs (8.3%).
- **Entrance, Doors and Handles:** Entryways lacked accessibility; only 10% provided portable ramps where thresholds exceeded 2 cm, and only 62.5% had adequate width for wheelchair entry. Although 85.7% of door handles were reachable, only 6.25% were sliding doors.

Circulating Around the Facility:

- **Steps and Stairs:** Only 20% of stairs were accessible, with minimal compliance on width, anti-slip surface, and nosing strips. Handrails were available on only 14.3% of stairs.
- **Ramps:** Ramp gradient compliance was low (12.5%). Only 44.4% of ramps connected different levels, and lighting coverage along the ramps was at 55.6%.
- **Corridors:** While 80% of corridors met minimum width, only 50% were free from overhanging obstructions, and less than half had adjoining wheelchair spaces near public seating.

Using Specific Areas:

- **Lighting and Signage:** While lighting was adequate in 81.3% of buildings, light switch placement was accessible in only 12.5% of cases. Accessible signage using the International Accessibility Symbol was present in only 6.3%.
- **Toilets and Bathrooms:** Most facilities had Western-style toilets, but only 18.8% met size recommendations. Grab bars and slip-resistant floors were limited (21.4% and 93.8%, respectively), while privacy was ensured at all.

- **Work/Office Rooms:** Entry door compliance stood at 53.3%, with limited accessible seating and power switch visibility (37.5% and 62.5%, respectively).
- **Emergency Features:** Emergency routes are somewhat identifiable for persons with disabilities, with at 26.7%, but there is a significant gap in ensuring that persons with hearing or speech impairments can identify an emergency. Emergency exits are available but not always free from obstruction (40.0%), and the location of fire escapes is not clearly marked (23.1%). While more than half of facilities are equipped with fire extinguishers (60.0%), staff training on their use is inadequate, with only 14.3% receiving firefighting or emergency evacuation training. Transportation for emergency evacuation is available in 64.3% of cases.

The below table shows the detailed findings of the physical accessibility audit conducted by the implementing partners and sub-grantees at their Health Posts/Clinics.

Reaching the Facility	% Responded 'Yes'
External Pathways, Car parks and Public transport	
Is there a signboard to indicate the location of your place?	40%
Are the pathways around your building clear of all obstructions? (e.g., obstacles on the surface and hanging obstacles along the pathway)	73.3%
Do the pathways from/to the facility have any steps and stairs?	40.0%
Do the pathways from/to the facility have directional tactile strips for persons with visual impairment?	0.0%
Is the path at least 120 cm wide?	80.0%
Is the surface level hard, slip-resistant, and non-reflecting?	66.7%
Where the pathway has differences in height?	40.0%
Do pathways have any rail bars, bollards and/or curbs?	0.0%
Are rail bars at the recommended height of 70 cm to 90 cm from floor level?	0.0%
Is the diameter of the rail bars between 4-5cm?	0.0%
Is there accessible public transport to the facility?	31.3%
Is the parking designated for persons with disabilities located within a distance of 50 metres (ISO compliant) or 30 m (recommended) or less from the accessible entrance?	25.0%
If there is one, is the drop-off zone near the building's entrance covered?	37.5%
Entering the Facility	% Responded 'Yes'
Is the ground outside on the same level as the entrance to the building?	18.7%
Is the pathway clear of all obstructions and at least 120 cm wide?	62.5%
Ramps	
If the ground outside is not on the same level as the entrance to the building, is there a ramp?	42.9%
If there is a ramp, does it have a minimum width of 120 cm?	50.0%
If there is a ramp, does it have the recommended gradient at least 1:10 feet?	0.0%

Does the ramp have edges or curbs?	8.3%
Does the ramp have a slip-resistant surface?	45.5%
Does the ramp have support handrails on both sides that are between 70 and 90 cm from floor level?	8.3%
Is the diameter of the handrails between 4-5 cm?	14.3%
Is there enough landing space (at least 150cm) before and after the ramp?	36.4%
Doors	
Is there an entrance or door threshold over 2 cm high?	50.0%
If yes, is there a sloped approach or portable ramp provided?	10.0%
Is the door wide and high enough for a wheelchair at least 90 cm X 200 cm?	62.5%
Is there enough flat space or area (at least 150 cm) before and after the door?	93.7%
Does the door open in slide door type?	6.2%
Is the door handle easy to reach (not higher than 120 cm off the ground) and easy to use?	85.7%
Is the distance between the door frame and door handle at least 4.5 cm?	53.3%
Is the door lock easy to use?	80.0%
Is there colour contrast between the door frame and handle?	60.0%
Can the entrance door be opened independently and easily by a person in a wheelchair i.e., light weight door (try opening it with one finger), low door handle...?	66.7%
Does your building have a floor plan displayed outside? If yes, is it accessible to persons with disabilities? Kindly provide more details.	6.2%
Are the pathways leading to the building adequately lit?	100.0%
Circulating around the Facility	
% Responded 'Yes'	
Stairs, doors, ramps, and corridors	
Steps and Stairs	
Are there steps or stairs to access the important rooms inside the building?	20.0%
Is the minimum width of the stairs 120 cm?	14.3%
Is there a flat landing 150 cm at the top and bottom of the stairs?	42.9%
Do the stair treads have an anti-slip surface?	28.6%
Do the stair treads have an appropriate depth (30cm) and height (15 cm)?	14.3%
Do the stairs have a nosing or stair edges? Kindly refer to the image above?	0.0%
Are the steps or stairs adequately lit?	57.1%
Are there handrails available on both sides?	14.3%
Are there handrails available along the full length of the step and stairs?	37.5%
Are rail bars at the recommended height of 70 cm to 90 cm from floor level?	37.5%
Is the diameter of the rail bars in between 4-5 cm?	12.5%
Are there any directional tactile strips for persons with visual impairment inside the building to guide them from entrance to information desk/lobby/restroom, etc.?	0.0%
Ramps	
If there is a ramp, does it have the recommended gradient at least 1:10 feet?	12.5%
If there is a ramp, does it have a minimum width of 120 cm?	12.5%

If there is a ramp, is there enough flat landing space (at least 150 cm) before and after the ramp?	44.4%
Does the ramp have an anti-slip surface?	37.5%
Are the ramps adequately lit?	55.6%
Are there handrails available on both sides?	12.5%
Are there handrails available along the full length of the ramps?	6.2%
Are handrails at the recommended height of 70 cm to 90 cm from floor level?	16.7%
Is the diameter of the handrails between 4-5 cm?	16.7%
Is the space between the handrails and the wall more than 4.5 cm?	0.0%
Are the handrails painted in contrasting colours to ensure easy visibility?	0.0%
Doors	
Is there an entrance or door threshold over 2 cm high?	31.3%
If yes, is there a sloped approach or portable ramp provided?	0.0%
Is the door wide and high enough for a wheelchair at least 90 cm X 200 cm?	43.8%
Is there enough flat space or area (at least 150 cm) before and after the door?	75.0%
Does the door open in slide door type?	15.4%
Is the door handle easy to reach (not higher than 120 cm off the ground) and easy to use?	68.8%
Is the distance between the doorframe and door handle at least 4.5 cm?	62.5%
Is the door lock easy to use?	81.3%
Is there colour contrast between doorframe and handle?	62.5%
Can the entrance door be opened independently and easily by a person in a wheelchair?	62.5%
Corridors	
Do the corridors have a minimum width 120 cm?	80.0%
Are different levels connected by ramps?	44.4%
Are all over hanging obstructions mounted above minimum height of 210 cm?	50.0%
Are the surfaces of the corridors anti-slip?	80.0%
Are the corridors free of all obstacles (i.e., boxes, tables, chairs)?	42.9%
Is there an adjoining space for a wheelchair next to benches and public seats?	57.1%
Is the back of seats with a height of 70 cm to 75 cm (seat 45 cm)?	28.6%
Using Specific Areas	
% Responded 'Yes'	
Switches, Lightings and Signages	
Is there adequate lighting in the building?	81.3%
Are the light switches at a height between 90 cm to 120 cm?	12.5%
Are all wall-mounted information panels and signs placed at a height between 90 cm to 180 cm?	75.0%
Are the signs clear and contrast colour?	87.5%
Are accessible places clearly identified by the International Accessibility Symbol?	6.3%

Toilets and bathrooms	
Is the toilet Western latrine friendly for persons with disabilities?	18.8%
For the Asian Latrine, do the latrines have rails placed on both sides for those with difficulties squatting or standing up again?	12.5%
Do you have an adaptable seating device for any Asian squatting pans?	12.5%
Are the accessible toilets indicated by a wheelchair sign (white on blue)?	6.3%
Is the size of the toilet not less than 150 cm x 150 cm?	18.8%
Is there a clear space of 150 cm x 150 cm in front of the toilet?	81.3%
For a western latrine, is there a drop-down grab bar at a height of 48 cm and 70 cm beside the toilet?	8.3%
Do grab bars have a diameter of 4-5 cm?	21.4%
Are the grab bars in the toilet solidly attached to the wall and able to hold the weight of an adult person?	50.0%
Is there a washbasin inside or near the toilet?	62.5%
Is the washbasin at the height of 80 cm to 85 cm?	68.8%
Does the water tap have long lever handles that are easy to operate?	56.3%
Is there clear knee space between the sink and floor?	50.0%
Do toilets ensure privacy?	100.0%
Does the door open in slide door type?	0.0%
Are door handles at an easy-to-reach height of between 85 cm to 120 cm?	93.3%
Can doors be easily locked from the inside and be released from outside under emergency situations?	75.0%
Is the floor material non-slip, well drained and waterproof?	93.8%
Is the toilet bowl height between 45-50 cm?	20.0%
Work and/or office rooms	
Do the room's entry doors comply with specific prescriptions (minimum door width 90 cm and height of 200 cm)?	53.3%
Are chairs back of seats with a height of 70 cm to 75 cm (seat = 45cm)?	37.5%
Are the tops of the table between 75 cm and 80 cm height?	81.3%
Is there enough space between table/working benches for persons using a wheelchair to move around (at least 120 cm)?	75.0%
Are the power switches between 90 cm to 120 cm from the floor level?	56.3%
Are the power switches in a colour that contrasts with the surrounding wall or are highlighted by a different strip of colour for people with low vision?	62.5%
Is the room well lit, with a combination of natural and electric light?	93.8%
Emergency features	
Are the emergency routes identifiable by persons with disabilities (including people with visual impairments)?	26.7%
Can an emergency be identified by hearing or speech impaired persons?	0.0%
Does the facility or establishment have emergency exits?	40.0%
Is the location of emergency (fire escape) clearly identifiable?	23.1%
Does the facility /establishment have fire extinguishers?	60.0%
Are staff trained on "Firefighting Training" or "Emergency Evacuations"?	14.3%
Does the facility have transportation/vehicle in place for emergency evacuation?	64.3%

Physical Accessibility in Safe Houses: The major findings regarding physical accessibility in Safe Houses are as follows.

Reaching the Facility

- **External Pathways:** The pathways are partially obstructed (58.3%). Only 16.7% of pathways are clear of steps and obstructions with contrast strips, and directional tactile strips for persons with visual impairment are entirely absent.
- **Path Width and Surface:** While 83.3% of pathways meet the minimum width of 120 cm, only 41.7% have a level, slip-resistant surface, and just 8.3% address height differences.
- **Rails and Accessibility Features:** Rails and bollards are missing on all pathways, and handrail measurements do not meet accessibility guidelines for both height and diameter.
- **Parking and Public Transport:** Accessible parking within 50 meters of the entrance is available at 9.1%, and only 27.3% of facilities have accessible public transport options nearby.

Entering the Facility

- **Ground Level Access:** Only 41.7% of building entrances are on the same level as the exterior ground, with some pathways partially meeting width and obstruction-free standards (50%).
- **Ramps and Handrails:** Although 62.5% of facilities have ramps, only 50% meet width standards, and only 37.5% have a slip-resistant surface. Handrails, curbs, and recommended gradient ratios are often missing for curbs and handrail height/diameter compliance.
- **Entrances and Doors:** Some entrance doors meet width standards for wheelchair access (66.7%), but thresholds over 2 cm are present in 41.7% of facilities, with only 25% offering a ramp alternative. Accessibility elements like low door handles and colour contrast are somewhat available (58.3%), while only 33.3% of doors are easily opened by wheelchair users.

Circulating Around the Facility

- **Stairs:** Only half (50%) of facilities provide accessible steps to important rooms. Stairs meet minimum width in only 33.3% of cases and have anti-slip treads in just 33.3% of instances. Lighting in place is sufficient (77.8%), but handrails on both sides are inconsistent.
- **Ramps and Handrails:** Some ramps meet width requirements (12.5%), but handrails and anti-slip surfaces are generally absent (for full-length handrails).
- **Doors and Corridors:** Door thresholds over 2 cm are present in 41.7% of facilities, while only 40% of corridors meet minimum width standards. Obstructions in corridors remain an issue, with just 10% cleared. Most corridors lack anti-slip surfaces (40%) and adequate adjoining spaces for wheelchairs (50%).

Using Specific Areas

- **Lighting, Switches, and Signage:** Lighting is generally adequate (91.7%), yet light switches only meet height standards in 16.7% of cases. Wall-mounted information signs meet height recommendations in 63.6% of facilities, with similar findings for colour contrast of the signs, though accessibility symbols are absent.
- **Toilets and Bathrooms:** Only 10% of Asian-style latrines have accessible rails, and just 9.1% offer adaptable seating. Accessible signage is missing, while 58.3% meet minimum dimensions for toilet size. Privacy standards and floor material are generally good, but grab bars (25%) and washbasin height (37.5%) miss standards.
- **Work/Office Rooms:** Some doorways in work/office rooms meet wheelchair entry standards (58.3%), and 75% have space for wheelchair mobility. Only 36.4% meet switch height requirements, and colour contrast for low-vision users is limited (45.5%).
- **Emergency Features:** While 63.6% of facilities have emergency routes identifiable for people with disabilities, including those with visual impairments, and 66.7% maintain unobstructed emergency exits, only 27.3% enable emergency identification by persons with hearing or speech impairments. Fire safety provisions are relatively strong, with 91.7% of facilities equipped with fire extinguishers and staff knowledgeable in their use. However, only 16.7% of staff have received firefighting or emergency evacuation training, and 50% of facilities have accessible emergency transportation.

Accommodation

- **Pathway to Survivor's Room** : Only 50% of pathways to the bedroom are on the same level as the entrance, and 75% are free from obstructions with adequate width (minimum 120 cm).
- **Ramps and Handrails:** Ramps are present only in 41.7% of areas of facilities where ground levels differ from the entrance, with additional accessibility issues noted. Only 20% of ramps meet the minimum width of 120 cm, and just 22.2% meet the recommended gradient (1:10). Curbs or edges are available on only 11.1% of ramps, and 44.4% have slip-resistant surfaces. Handrails are present on 10% of ramps, with minimal compliance on the height and diameter standards. Additionally, only 30% of ramps have adequate landing space before and after the ramp.
- **Doors:** Accessibility through doors is limited, with 58.3% having a threshold over 2 cm high, but only 25% having a sloped approach or portable ramp. Door width is sufficient in 75% of cases, and flat spaces before and after doors meet standards in 83.3%. Door handles are easy to reach in 72.7% of cases, and colour contrast between handles and door frames is available in 72.7%. However, only 50% of entrance doors are independently accessible by wheelchair users.

- **Bedroom Doors:** Similar to other doors, 41.7% of bedroom doors have thresholds over 2 cm, and only 8.3% have a ramped approach. The door width requirement is met in 16.7%. While 81.8% of door locks are easy to use, only 72.7% of doors offer colour contrast and accessibility to wheelchair users. Barriers identified include non-standard widths, thresholds, and lack of easy-to-use locks.
- **Beds:** Only 66.7% of rooms provide enough space (120 cm) for wheelchair users to move around beds, while only half of the beds meet the accessible height range (43-58 cm).
- **Switches and Lighting:** While lighting is adequate at all, only 40% of light switches are positioned at an accessible height (90-120 cm).
- **Toilets and Bathrooms:** Most toilets are of the western style, but only 10% of Asian-style toilets provide accessible rail bars, and only 11.1% have adaptable seating for squat toilets. The accessible toilet signage is absent, and only 58.3% of bathrooms meet the minimum size standard of 150 cm x 150 cm. Clear floor space and grab bar support in the bathroom are also limited, with only 50% and 20% compliance, respectively. Privacy and safety features like emergency locks and non-slip flooring are available in over 91% of bathrooms, but only 25% meet the standard toilet bowl height (45-50 cm), and just 63.6% of showers are within accessible height (45-120 cm).
- **Kitchen and Dining Room:** Accessibility in the kitchen and dining areas are limited. Only 58.3% of doors are wide enough for wheelchair access, though lighting is adequate at 91.7%. While 70% of tables provide enough space for wheelchair mobility, 50% have bars under the table, which may obstruct access for persons with wheelchair. Just 30% of chairs meet the seat-back height (70-75 cm), and only 54.5% of washbasins are at the accessible height (80-85 cm).

The below table shows the detailed findings of the physical accessibility audit conducted by the implementing partners and sub-grantees at their Safe Houses.

Reaching the Facility	% Responded 'Yes'
External Pathways, Car parks and Public transport	
Is there a signboard to indicate the location of your place?	0.0%
Are the pathways around your building clear of all obstructions? (e.g., obstacles on the surface and hanging obstacles along the pathway)	58.3%
Do the pathways from/to the facility have any steps and stairs?	16.7%
Do the pathways from/to the facility have directional tactile strips for persons with visual impairment?	0.0%
Is the path at least 120 cm wide?	83.3%
Is the surface level hard, slip-resistant, and non-reflecting? If not, provide more details.	41.7%
Where the pathway has differences in height?	8.3%
Do pathways have any rail bars, bollards and/or curbs?	0.0%
Are rail bars at the recommended height of 70 cm to 90 cm from floor level?	0.0%
Is the diameter of the rail bars between 4-5cm?	0.0%
Is there accessible public transport to the facility?	27.3%
Is the parking designated for persons with disabilities located within a distance of 50 metres (ISO compliant) or 30 m (recommended) or less from the accessible entrance?	9.1%
If there is one, is the drop-off zone near the building's entrance covered?	9.1%
Entering the Facility	% Responded 'Yes'
Is the ground outside on the same level as the entrance to the building?	41.7%
Is the pathway clear of all obstructions and at least 120 cm wide? Are there warning blocks around any obstruction on the pathways?	50.0%
Ramps	
If the ground outside is not on the same level as the entrance to the building, is there a ramp?	62.5%
If there is a ramp, does it have a minimum width of 120 cm.	50.0%
If there is a ramp, does it have the recommended gradient at least 1:10 feet?	25.0%
Does the ramp have edges or curbs?	0.0%
Does the ramp have a slip-resistant surface?	37.5%
Does the ramp have support handrails on both sides that are between 70 and 90 cm from floor level?	0.0%
Is the diameter of the handrails between 4-5 cm?	0.0%
Is there enough landing space (at least 150cm) before and after the ramp?	42.9%
Doors	
Is there an entrance or door threshold over 2 cm high?	41.7%
If yes, is there a sloped approach or portable ramp provided?	25.0%
Is the door wide and high enough for a wheelchair at least 90 cm X 200 cm?	66.7%

Is there enough flat space or area (at least 150 cm) before and after the door?	75.0%
The door opens in slide door type?	0.0%
Is the door handle easy to reach (not higher than 120 cm off the ground) and easy to use?	58.3%
Is the distance between the door frame and door handle at least 4.5 cm?	58.3%
Is the door lock easy to use?	25.0%
Is there colour contrast between the door frame and handle?	58.3%
Can the entrance door be opened independently and easily by a person in a wheelchair i.e., light weight door (try opening it with one finger), low door handle...?	33.3%
Does your building have a floor plan displayed outside?	0.0%
Are the pathways leading to the building adequately lit?	100.0%
Circulating around the Facility	
	% Responded 'Yes'
Stairs, doors, ramps, and corridors	
Steps and Stairs	
Are there steps or stairs to access the important rooms inside the building?	50.0%
Is the minimum width of the stairs 120 cm?	33.3%
Is there a flat landing 150 cm at the top and bottom of the stairs?	33.3%
Do the stair treads have an anti-slip surface?	33.3%
Do the stair treads have an appropriate depth (30cm) and height (15 cm)?	22.2%
Do the stairs have a nosing or stair edges?	33.3%
Are the steps or stairs adequately lit?	77.8%
Are there handrails available on both sides?	44.4%
Are there handrails available along the full length of the step and stairs?	55.6%
Are rail bars at the recommended height of 70 cm to 90 cm from floor level?	66.7%
Is the diameter of the rail bars in between 4-5 cm?	22.2%
Are there any directional tactile strips for persons with visual impairment inside the building to guide them from entrance to information desk/lobby/restroom, etc.?	0.0%
Ramps	
If there is a ramp, does it have the recommended gradient at least 1:10 feet?	12.5%
If there is a ramp, does it have a minimum width of 120 cm?	0.0%
If there is a ramp, is there enough flat landing space (at least 150 cm) before and after the ramp?	12.5%
Does the ramp have an anti-slip surface?	25.0%
Are the ramps adequately lit?	25.0%
Are there handrails available on both sides?	12.5%%
Are there handrails available along the full length of the ramps?	0.0%
Are handrails at the recommended height of 70 cm to 90 cm from floor level?	25.0%
Is the diameter of the handrails between 4-5 cm?	42.9%
Is the space between the handrails and the wall more than 4.5 cm?	12.5%
Are the handrails painted in contrasting colours to ensure easy visibility?	11.1%

Doors	
Is there an entrance or door threshold over 2 cm high?	41.7%
If yes, is there a sloped approach or portable ramp provided?	8.3%
Is the door wide and high enough for a wheelchair at least 90 cm X 200 cm?	41.7%
Is there enough flat space or area (at least 150 cm) before and after the door?	66.7%
The door opens in slide door type?	0.0%
Is the door handle easy to reach (not higher than 120 cm off the ground) and easy to use?	81.8%
Is the distance between the doorframe and door handle at least 4.5 cm?	58.3%
Is the door lock easy to use?	50.0%
Is there colour contrast between doorframe and handle?	58.3%
Can the entrance door be opened independently and easily by a person in a wheelchair?	41.7%
Corridors	
Do the corridors have a minimum width 120 cm?	40.0%
Are different levels connected by ramps?	27.3%
Are all over hanging obstructions mounted above minimum height of 210 cm?	70.0%
Are the surfaces of the corridors anti-slip?	40.0%
Are the corridors free of all obstacles (i.e., boxes, tables, chairs)	10.0%
Is there an adjoining space for a wheelchair next to benches and public seats?	50.0%
Is the back of seats with a height of 70 cm to 75 cm (seat 45 cm)?	33.3%
Using Specific Areas	% Responded 'Yes'
Switches, Lightings and Signages	
Is there adequate lighting in the building?	91.7%
Are the light switches at a height between 90 cm to 120 cm?	16.7%
Are all wall-mounted information panels and signs placed at a height between 90 cm to 180 cm?	63.6%
Are the signs clear and contrast colour?	63.6%
Are accessible places clearly identified by the International Accessibility Symbol?	0.0%
Toilets and bathrooms	
What type of toilet do you have in your facility?	
Is toilet Western latrine friendly for persons with disabilities?	70.0%
For the Asian Latrine, do the latrines have rails placed on both sides for those with difficulties squatting or standing up again? If yes, is the height of these rails 48 cm to 70 cm?	10.0%
Do you have an adaptable seating device for any Asian squatting pans?	9.1%
Are the accessible toilets indicated by a wheelchair sign (white on blue)?	0.0%
Is the size of the toilet not less than 150 cm x 150 cm?	58.3%
Is there a clear space of 150 cm x 150 cm in front of the toilet?	66.7%
For a western latrine, is there a drop-down grab bar at a height of 48 cm and 70 cm beside the toilet?	12.5%
Do grab bars have a diameter of 4-5 cm?	25.0%

Are the grab bars in the toilet solidly attached to the wall and able to hold the weight of an adult person?	37.5%
Is there a washbasin inside or near the toilet?	54.5%
Is the washbasin at the height of 80 cm to 85 cm?	37.5%
Does the water tap have long lever handles that are easy to operate?	40.0%
Is there clear knee space between the sink and floor?	50.0%
Do toilets ensure privacy?	100.0%
Does the toilet open in slide door type?	16.7%
Are door handles at an easy-to-reach height of between 85 cm to 120 cm?	75.0%
Can doors be easily locked from the inside and be released from outside under emergency situations?	83.3%
Is the floor material non-slip, well drained and waterproof?	100.0%
Is the toilet bowl height between 45-50 cm?	27.3%
Work and/or office rooms	
Do the room's entry doors comply with specific prescriptions (minimum door width 90 cm and height of 200 cm)?	58.3%
Are chairs back of seats with a height of 70 cm to 75 cm (seat = 45cm)?	36.4%
Are the tops of the table between 75 cm and 80 cm height?	66.7%
Is there enough space between table/working benches for persons using a wheelchair to move around (at least 120 cm)?	75.0%
Are the power switches between 90 cm to 120 cm from the floor level?	36.4%
Are the power switches in a colour that contrasts with the surrounding wall or are highlighted by a different strip of colour for people with low vision?	45.5%
Is the room well lit, with a combination of natural and electric light?	100.0%
Emergency features	
Are the emergency routes identifiable by persons with disabilities (including people with visual impairments)?	63.6%
Can an emergency be identified by hearing or speech impaired persons?	27.3%
Does the facility or establishment have emergency exits?	66.7%
Is the location of emergency (fire escape) clearly identifiable?	50.0%
Does the facility /establishment have fire extinguishers?	91.7%
Are staff trained on "Firefighting Training" or "Emergency Evacuations"?	16.7%
Does the facility have transportation/vehicle in place for emergency evacuation?	50.0%
Accommodation, Kitchen and Dining room	
Accommodation	
Pathway to the guest house building	
Is the ground outside on the same level as the entrance to the building of accommodation?	50.0%
Is the pathway clear of all obstructions and at least 120 cm wide? Are there warning blocks around any obstruction on the pathways?	75.0%

Ramps	
If the ground outside is not on the same level as the entrance to the building of accommodation, is there a ramp?	41.7%
If there is a ramp, does it have a minimum width of 120 cm?	20.0%
If there is a ramp, does it have the recommended gradient at least 1:10 feet?	22.2%
Does the ramp have edges or curbs?	11.1%
Does the ramp have a slip-resistant surface?	44.4%
Does the ramp have support handrails on both sides that are between 70 and 90 cm from floor level?	10.0%
Is the diameter of the handrails between 4-5 cm?	10.0%
Is there enough landing space (at least 150 cm) before and after the ramp?	30.0%
Doors	
Is there an entrance or door threshold over 2 cm high?	58.3%
If yes, is there a sloped approach or portable ramp provided?	25.0%
Is the door wide and high enough for a wheelchair at least 90 cm X 200 cm?	75.0%
Is there enough flat space or area (at least 150 cm) before and after the door?	83.3%
Does the toilet open in slide door type?	0.0%
Is the door handle easy to reach (not higher than 120 cm off the ground) and easy to use?	72.7%
Is the distance between the door frame and door handle at least 4.5 cm?	63.6%
Is the door lock easy to use?	45.5%
Is there colour contrast between the door frame and handle?	72.7%
Can the entrance door be opened independently and easily by a person in a wheelchair i.e., light weight door (try opening it with one finger), low door handle...?	50.0%
Are the pathways leading to the building adequately lit?	100.0%
Doors	
Is there an entrance or door threshold over 2 cm high?	41.7%
If yes, is there a sloped approach or portable ramp provided?	8.3%
Is the door wide and high enough for a wheelchair at least 90 cm X 200 cm?	16.7%
Does the toilet open in slide door type?	0.0%
Is the door handle easy to reach (not higher than 120 cm off the ground) and easy to use?	72.7%
Is the distance between the doorframe and door handle at least 4.5 cm?	63.6%
Is the door lock easy to use?	81.8%
Is there colour contrast between doorframe and handle?	72.7%
Can the entrance door be opened independently and easily by a person in a wheelchair?	75.0%
Beds	
Is there enough space between the beds for persons using a wheelchair to move around (at least 120 cm)?	66.7%
Are the beds at a height between 43 cm to 58 cm?	50.0%
Switches and Lightings	
Is there adequate lighting in the building?	100.0%

Are the light switches at a height between 90 cm to 120 cm?	40.0%
Toilets and bathrooms	
What type of toilet do you have in your guest room?	
Is the toilets Western latrine friendly for persons with disabilities?	50.0%
For the Asian Latrine, do the latrines have rails placed on both sides for those with difficulties squatting or standing up again? If yes, is the height of these rails 48 cm to 70 cm?	10.0%
Do you have an adaptable seating device for any Asian squatting pans?	11.1%
Are the accessible toilets indicated by a wheelchair sign (white on blue)?	0.0%
Is the size of the toilet/bathroom not less than 150 cm x 150 cm?	58.3%
Is there a clear space of 150 cm x 150 cm in front of the toilet/bathroom?	50.0%
For a western latrine, is there a drop-down grab bar at a height of 48 cm and 70 cm beside the toilet?	0.0%
Do grab bars have a diameter of 4-5 cm?	20.0%
Are the grab bars in the toilet solidly attached to the wall and able to hold the weight of an adult person?	20.0%
Is there a washbasin inside or near the toilet?	58.3%
Is the washbasin at the height of 80 cm to 85 cm?	30.0%
Does the water tap have long lever handles that are easy to operate?	60.0%
Is there clear knee space between the sink and floor?	50.0%
Do toilets ensure privacy?	91.7%
Does the toilet/bathroom door/s open in slide door type?	0.0%
Are door handles at an easy-to-reach height of between 85 cm to 120 cm?	91.7%
Can doors be easily locked from the inside and be released from outside under emergency situations?	91.7%
Is the floor material non-slip, well drained and waterproof?	91.7%
Is the toilet bowl height between 45-50 cm?	25.0%
Is the shower tap height between 45-120 cm in bathroom?	63.6%
Kitchen and Dining room	
Is the door wide and high enough for a wheelchair at least 90 cm X 200 cm?	58.3%
Is there adequate lighting in the kitchen/dining room?	91.7%
Is there enough space between tables for persons using a wheelchair to move around (at least 120 cm)?	70.0%
Are the tables height between 75 cm to 80 cm from the floor level?	70.0%
Is there any connected bar at the bottom of the tables?	50.0%
Are chairs back of seats with a height of 70 cm to 75 cm (seat = 45cm)?	30.0%
Is the washbasin at the height of 80 cm to 85 cm?	54.5%

Physical Accessibility in Youth Centres: The major findings regarding physical accessibility in Youth Centres are as follows.

Reaching the Facility

- **External Pathways and Car Parks:** The pathways around buildings meet minimum width requirements. Only 33.3% of pathways have slip-resistant surfaces, and there is a lack of directional tactile strips and accessible public transport options. And, designated parking for persons with disabilities within a recommended distance is absent.
- **External Signage:** Signboards indicating facility locations are available at some locations (66.7%), but lighting along pathways to the facilities is sufficient.
- **Supportive Features:** Rail bars, curb ramps, and drop-off zones near entrances of the facilities are lacking.

Entering the Facility

- **Level Access and Pathways:** Only a third (33.3%) of facilities have level access at entrances, with obstructions removed along pathways (66.7%). For those with entrances on different levels, ramps are scarce and lack essential specifications like appropriate width, gradient, edges, handrails, and anti-slip surfaces.
- **Entrances and Doors:** Doors meet width minimum standards in (66.7%), but thresholds are higher than recommended (66.7%), and sloped approaches or ramps are uncommon (33.3%). Flat spaces around entrance ways and accessible handles are available in most facilities.

Circulating Around the Facility

- **Stairs and Handrails:** Accessibility to key rooms through stairs is limited (33.3%). Stairs lack adequate width, anti-slip surfaces, landings, and contrast strips on edges. Handrails meet only a portion of specifications (33.3%), with most facilities not having them along the entire stair length.
- **Ramps and Corridors:** Ramps are generally unavailable and do not meet width, gradient, handrail, or landing space requirements. Corridors are narrow, lack anti-slip surfaces, and present obstacles, limiting wheelchair mobility.
- **Doors, Spaces and Switches:** Entry doors mostly align with wheelchair requirements (66.7%), and power switches are accessible in the areas of the facilities. However, colour contrast on door handles is inconsistent, and ease of wheelchair access through furniture spacing is mixed and limited.

Using Specific Areas

- **Switches, Lighting, and Signage:** Interior lighting is fully adequate, but most light switches and wall-mounted signs do not align with height requirements. Signage lacks the International Accessibility Symbol and clear colour contrast, impacting visibility (33.3%).
- **Toilets and Bathrooms:** Accessibility in restrooms is highly inadequate, with no grab bars, adaptable seating, clear spaces, or accessible doors. None of the toilets meet size, or non-slip surface standards, posing significant barriers for wheelchair access.
- **Work and Office Rooms:** Office room doors comply with size standards (66.7%), and table height and spacing allow wheelchair movement are enough in place. However, chairs are not accessible, and power switches lack colour contrast for persons with low vision or sighted users.
- **Emergency Features:** Emergency routes and signals are largely unidentifiable for people with visual, hearing, or speech impairments, while emergency exits, though present, are not consistently clear of obstruction. Although the locations of the fire escape are clearly marked, only a third of the staff are aware of how to use fire extinguishers (33.3%), and none have received formal training in firefighting or emergency evacuation. And, emergency transportation is available at (66.7%).

The below table shows the detailed findings of the physical accessibility audit conducted by the implementing partners and sub-grantees at their Youth Centres.

Reaching the Facility	% Responded 'Yes'
External Pathways, Car parks and Public transport	
Is there a signboard to indicate the location of your place?	66.7%
Are the pathways around your building clear of all obstructions? (e.g., obstacles on the surface and hanging obstacles along the pathway)	33.3%
Do the pathways from/to the facility have any steps and stairs? If yes, are they clear of all obstructions and have contrast strips?	66.7%
Do the pathways from/to the facility have directional tactile strips for persons with visual impairment?	0.0%
Is the path at least 120 cm wide?	100.0%
Is the surface level hard, slip-resistant, and non-reflecting?	33.3%
Where the pathway has differences in height?	100.0%
Do pathways have any rail bars, bollards and/or curbs?	0.0%
Are rail bars at the recommended height of 70 cm to 90 cm from floor level?	0.0%
Is the diameter of the rail bars between 4-5cm?	0.0%
Is there accessible public transport to the facility?	0.0%
Is the parking designated for persons with disabilities located within a distance of 50 metres (ISO compliant) or 30 m (recommended) or less from the accessible entrance?	0.0%
Is the drop-off zone near the building's entrance covered?	0.0%

Entering the Facility	% Responded 'Yes'
Is the ground outside on the same level as the entrance to the building?	33.3%
Is the pathway clear of all obstructions and at least 120 cm wide? Are there warning blocks around any obstruction on the pathways?	66.7%
Ramps	
If the ground outside is not on the same level as the entrance to the building, is there a ramp?	0.0%
If there is a ramp, does it have a minimum width of 120 cm.	0.0%
If there is a ramp, does it have the recommended gradient at least 1:10 feet?	0.0%
Does the ramp have edges or curbs?	0.0%
Does the ramp have a slip-resistant surface?	0.0%
Does the ramp have support handrails on both sides that are between 70 and 90 cm from floor level?	0.0%
Is the diameter of the handrails between 4-5 cm?	0.0%
Is there enough landing space (at least 150cm) before and after the ramp?	0.0%
Doors	
Is there an entrance or door threshold over 2 cm high?	66.7%
If yes, is there a sloped approach or portable ramp provided?	33.3%
Is the door wide and high enough for a wheelchair at least 90 cm X 200 cm?	66.7%
Is there enough flat space or area (at least 150 cm) before and after the door?	100.0%
Does the door open in slide door type?	0.0%
Is the door handle easy to reach (not higher than 120 cm off the ground) and easy to use?	100.0%
Is the distance between the door frame and door handle at least 4.5 cm?	0.0%
Is the door lock easy to use?	100.0%
Is there colour contrast between the door frame and handle?	100.0%
Can the entrance door be opened independently and easily by a person in a wheelchair i.e., light weight door (try opening it with one finger), low door handle...?	100.0%
Does your building have a floor plan displayed outside?	0.0%
Are the pathways leading to the building adequately lit?	100.0%
Circulating around the Facility	% Responded 'Yes'
Stairs, doors, ramps, and corridors	
Steps and Stairs	
Are there steps or stairs to access the important rooms inside the building? If yes, are they accessible?	33.3%
Is the minimum width of the stairs 120 cm?	0.0%
Is there a flat landing 150 cm at the top and bottom of the stairs?	0.0%
Do the stair treads have an anti-slip surface?	0.0%
Do the stair treads have an appropriate depth (30cm) and height (15 cm)?	0.0%
Do the stairs have a nosing or stair edges? If yes, does it have contrast colour strips?	0.0%
Are the steps or stairs adequately lit?	33.3%
Are there handrails available on both sides?	33.3%

Are there handrails available along the full length of the step and stairs?	33.3%
Are rail bars at the recommended height of 70 cm to 90 cm from floor level?	33.3%
Is the diameter of the rail bars in between 4-5 cm?	33.3%
Are there any directional tactile strips for persons with visual impairment inside the building to guide them from entrance to information desk/lobby/restroom, etc.?	0.0%
Ramps	
If there is a ramp, does it have the recommended gradient at least 1:10 feet?	0.0%
If there is a ramp, does it have a minimum width of 120 cm?	0.0%
If there is a ramp, is there enough flat landing space (at least 150 cm) before and after the ramp?	0.0%
Does the ramp have an anti-slip surface?	0.0%
Are the ramps adequately lit?	0.0%
Are there handrails available on both sides?	0.0%
Are there handrails available along the full length of the ramps?	0.0%
Are handrails at the recommended height of 70 cm to 90 cm from floor level?	0.0%
Is the diameter of the handrails between 4-5 cm?	0.0%
Is the space between the handrails and the wall more than 4.5 cm?	0.0%
Are the handrails painted in contrasting colours to ensure easy visibility?	0.0%
Doors	
Is there an entrance or door threshold over 2 cm high?	66.7%
If yes, is there a sloped approach or portable ramp provided?	0.0%
Is the door wide and high enough for a wheelchair at least 90 cm X 200 cm?	66.7%
Is there enough flat space or area (at least 150 cm) before and after the door?	100.0%
Does the door open in slide door type?	0.0%
Is the door handle easy to reach (not higher than 120 cm off the ground) and easy to use?	33.3%
Is the distance between the doorframe and door handle at least 4.5 cm?	66.7%
Is the door lock easy to use?	100.0%
Is there colour contrast between doorframe and handle?	33.3%
Can the entrance door be opened independently and easily by a person in a wheelchair?	33.3%
Corridors	
Do the corridors have a minimum width 120 cm?	0.0%
Are different levels connected by ramps?	0.0%
Are all over hanging obstructions mounted above minimum height of 210 cm?	33.3%
Are the surfaces of the corridors anti-slip?	33.3%
Are the corridors free of all obstacles (i.e., boxes, tables, chairs)	0.0%
Is there an adjoining space for a wheelchair next to benches and public seats?	66.7%
Is the back of seats with a height of 70 cm to 75 cm (seat 45 cm)?	33.3%
Using Specific Areas	
Switches, Lightings and Signages	% Responded 'Yes'
Is there adequate lighting in the building?	100.0%
Are the light switches at a height between 90 cm to 120 cm?	0.0%

Are all wall-mounted information panels and signs placed at a height between 90 cm to 180 cm?	33.3%
Are the signs clear and contrast colour?	33.3%
Are accessible places clearly identified by the International Accessibility Symbol?	0.0%
Toilets and bathrooms	
What type of toilet do you have in your facility?	
Is the toilet Western latrine friendly for persons with disabilities?	0.0%
For the Asian Latrine, do the latrines have rails placed on both sides for those with difficulties squatting or standing up again? If yes, is the height of these rails 48 cm to 70 cm?	0.0%
Do you have an adaptable seating device for any Asian squatting pans?	0.0%
Are the accessible toilets indicated by a wheelchair sign (white on blue)?	0.0%
Is the size of the toilet not less than 150 cm x 150 cm?	0.0%
Is there a clear space of 150 cm x 150 cm in front of the toilet?	0.0%
For a western latrine, is there a drop-down grab bar at a height of 48 cm and 70 cm beside the toilet?	0.0%
Do grab bars have a diameter of 4-5 cm?	0.0%
Are the grab bars in the toilet solidly attached to the wall and able to hold the weight of an adult person?	0.0%
Is there a washbasin inside or near the toilet?	0.0%
Is the washbasin at the height of 80 cm to 85 cm?	0.0%
Does the water tap have long lever handles that are easy to operate?	0.0%
Is there clear knee space between the sink and floor?	0.0%
Do toilets ensure privacy?	0.0%
Are door handles at an easy-to-reach height of between 85 cm to 120 cm?	0.0%
Can doors be easily locked from the inside and be released from outside under emergency situations?	0.0%
Is the floor material non-slip, well drained and waterproof?	0.0%
Is the toilet bowl height between 45-50 cm?	0.0%
Work and/or office rooms	
Do the room's entry doors comply with specific prescriptions (minimum door width 90 cm and height of 200 cm)?	66.7%
Are chairs back of seats with a height of 70 cm to 75 cm (seat = 45cm)?	0.0%
Are the tops of the table between 75 cm and 80 cm height?	100.0%
Is there enough space between table/working benches for persons using a wheelchair to move around (at least 120 cm)?	100.0%
Are the power switches between 90 cm to 120 cm from the floor level?	0.0%
Are the power switches in a colour that contrasts with the surrounding wall or are highlighted by a different strip of colour for people with low vision?	100.0%
Is the room well lit, with a combination of natural and electric light?	100.0%
Emergency features	
Are the emergency routes identifiable by persons with disabilities (including people with visual impairments)?	0.0%

Can an emergency be identified by hearing or speech impaired persons?	0.0%
Does the facility or establishment have emergency exits? If yes, are the emergency exits clear from obstruction?	0.0%
Is the location of emergency (fire escape) clearly identifiable?	100.0%
Does the facility /establishment have fire extinguishers? If yes, do the staff know how to use a fire extinguisher?	33.3%
Are staff trained on "Firefighting Training" or "Emergency Evacuations"?	0.0%
Does the facility have transportation/vehicle in place for emergency evacuation?	66.7%

Physical Accessibility in Key Population Friendly Space: The major findings regarding physical accessibility in Key Population Friendly Space are as follows.

Reaching the Facility

- **External Pathways and Signages:** Most pathways lack adequate accessibility features, with the absence of clear signage and directional tactile strips for persons with visual impairments. Pathways do not meet recommended dimensions in terms of width, height differences, or slip-resistant surfaces, impacting safe access.
- **Car Parks and Transport:** Parking spaces and public transport accessibility for persons with disabilities are either non-existent or insufficiently marked within 50 meters of facility entrances. Designated drop-off zones are also not covered, further complicating access.

Entering the Facility

- **Pathways and Ramps:** Entrance pathways are mostly accessible, yet they lack obstruction clearance. No ramp structures exist to bridge ground level disparities, and support features such as handrails and curbs are absent.
- **Entrances and Doors:** Doorways largely fail to meet wheelchair-accessible dimensions and lack features for independent access, such as appropriate handle placement, colour contrast for visibility, and lightweight doors existing that are easier to open. Additionally, a lack of floor plans and adequate lighting along the entrances further restricts accessibility.

Circulating Around the Facility

- **Stairs, Doors, and Corridors:** Inside the facility, stairs lack essential features like anti-slip surfaces, appropriate depth and height for safety, and contrasting colour strips for persons with low-vision. Corridor width and clearance for wheelchair mobility are also insufficient, while ramps are missing adequate handrails and lighting for safe navigation.
- **Signage and Lighting:** Insufficient lighting and inadequate signage make facility navigation challenging for people with low-vision or other types of disabilities. Light switches are well-placed, but accessible wall-mounted signs and the International Accessibility Symbol are not visible throughout the facility.

Using Specific Areas

- **Toilets and Bathrooms:** Bathrooms are accessible in layout but lack accessible toilet features such as grab bars and adaptable seating chair. Privacy features are sufficient, yet non-slip materials and handles that support independent use need to be enhanced.
- **Work/Office Rooms:** While some chairs and table arrangements support wheelchair users, overall room layout and space between furniture restrict mobility. Accessibility of power switches and light control options is limited, and lighting is generally adequate.
- **Emergency Features:** Emergency preparedness lacks accessible routes and notifications for people with visual, hearing, or mobility impairments. Emergency exits, fire extinguishers, and staff emergency training are notably absent, posing significant safety risks.

The below table shows the detailed findings of the physical accessibility audit conducted by the implementing partners and sub-grantees at their Key Population Friendly Space.

Reaching the Facility	% Responded 'Yes'
External Pathways, Car parks and Public transport	
Is there a signboard to indicate the location of your place?	0.0%
Are the pathways around your building clear of all obstructions? (e.g., obstacles on the surface and hanging obstacles along the pathway)	0.0%
Do the pathways from/to the facility have any steps and stairs?	100.0%
Do the pathways from/to the facility have directional tactile strips for persons with visual impairment?	0.0%
Is the path at least 120 cm wide?	100.0%
Is the surface level hard, slip-resistant, and non-reflecting?	0.0%
Where the pathway has differences in height?	0.0%
Do pathways have any rail bars, bollards and/or curbs?	0.0%
Are rail bars at the recommended height of 70 cm to 90 cm from floor level?	0.0%
Is the diameter of the rail bars between 4-5 cm?	0.0%
Is there accessible public transport to the facility?	0.0%
Is the parking designated for persons with disabilities located within a distance of 50 metres (ISO compliant) or 30 m (recommended) or less from the accessible entrance?	0.0%
Is the drop-off zone near the building's entrance covered?	0.0%
Entering the Facility	
Is the ground outside on the same level as the entrance to the building?	0.0%
Is the pathway clear of all obstructions and at least 120 cm wide? Are there warning blocks around any obstruction on the pathways?	100.0%

Ramps	
If the ground outside is not on the same level as the entrance to the building, is there a ramp?	0.0%
If there is a ramp, does it have a minimum width of 120 cm?	0.0%
If there is a ramp, does it have the recommended gradient at least 1:10 feet?	0.0%
Does the ramp have edges or curbs?	0.0%
Does the ramp have a slip-resistant surface?	0.0%
Does the ramp have support handrails on both sides that are between 70 and 90 cm from floor level?	0.0%
Is the diameter of the handrails between 4-5 cm?	0.0%
Is there enough landing space (at least 150cm) before and after the ramp?	0.0%
Doors	
Is there an entrance or door threshold over 2 cm high?	100.0%
If yes, is there a sloped approach or portable ramp provided?	0.0%
Is the door wide and high enough for a wheelchair at least 90 cm X 200 cm?	100.0%
Is there enough flat space or area (at least 150 cm) before and after the door?	100.0%
Does the door open in slide door type?	0.0%
Is the door handle easy to reach (not higher than 120 cm off the ground) and easy to use?	0.0%
Is the distance between the door frame and door handle at least 4.5 cm?	0.0%
Is the door lock easy to use?	0.0%
Is there colour contrast between the door frame and handle?	0.0%
Can the entrance door be opened independently and easily by a person in a wheelchair i.e., light weight door (try opening it with one finger), low door handle...?	0.0%
Does your building have a floor plan displayed outside? If yes, is it accessible to persons with disabilities?	0.0%
Are the pathways leading to the building adequately lit?	0.0%
Circulating around the Facility	% Responded 'Yes'
Stairs, doors, ramps, and corridors	
Steps and Stairs	
Are there steps or stairs to access the important rooms inside the building? If yes, are they accessible?	0.0%
Is the minimum width of the stairs 120 cm?	0.0%
Is there a flat landing 150 cm at the top and bottom of the stairs?	0.0%
Do the stair treads have an anti-slip surface?	0.0%
Do the stair treads have an appropriate depth (30cm) and height (15 cm)?	0.0%
Do the stairs have a nosing or stair edges?	0.0%
Are the steps or stairs adequately lit?	0.0%
Are there handrails available on both sides?	0.0%
Are there handrails available along the full length of the step and stairs?	0.0%
Are rail bars at the recommended height of 70 cm to 90 cm from floor level?	0.0%
Is the diameter of the rail bars in between 4-5 cm?	0.0%
Are there any directional tactile strips for persons with visual impairment inside the building to guide them from entrance to information desk/lobby/restroom, etc.?	0.0%

Ramps	
If there is a ramp, does it have the recommended gradient at least 1:10 feet?	0.0%
If there is a ramp, does it have a minimum width of 120 cm?	0.0%
If there is a ramp, is there enough flat landing space (at least 150 cm) before and after the ramp?	0.0%
Does the ramp have an anti-slip surface?	0.0%
Are the ramps adequately lit?	0.0%
Are there handrails available on both sides?	0.0%
Are there handrails available along the full length of the ramps?	0.0%
Are handrails at the recommended height of 70 cm to 90 cm from floor level?	0.0%
Is the diameter of the handrails between 4-5 cm?	0.0%
Is the space between the handrails and the wall more than 4.5 cm?	0.0%
Are the handrails painted in contrasting colours to ensure easy visibility?	0.0%
Doors	
Is there an entrance or door threshold over 2 cm high?	0.0%
If yes, is there a sloped approach or portable ramp provided?	0.0%
Is the door wide and high enough for a wheelchair at least 90 cm X 200 cm?	0.0%
Is there enough flat space or area (at least 150 cm) before and after the door?	100.0%
Does the door open in slide door type?	N/A
Is the door handle easy to reach (not higher than 120 cm off the ground) and easy to use?	0.0%
Is the distance between the doorframe and door handle at least 4.5 cm?	0.0%
Is the door lock easy to use?	100.0%
Is there colour contrast between doorframe and handle?	0.0%
Can the entrance door be opened independently and easily by a person in a wheelchair?	0.0%
Corridors	
Do the corridors have a minimum width 120 cm?	0.0%
Are different levels connected by ramps?	100.0%
Are all over hanging obstructions mounted above minimum height of 210 cm?	0.0%
Are the surfaces of the corridors anti-slip?	0.0%
Are the corridors free of all obstacles (i.e., boxes, tables, chairs)	0.0%
Is there an adjoining space for a wheelchair next to benches and public seats?	0.0%
Is the back of seats with a height of 70 cm to 75 cm (seat 45 cm)?	0.0%
Using Specific Areas	
Switches, Lightings and Signages	
Is there adequate lighting in the building?	0.0%
Are the light switches at a height between 90 cm to 120 cm?	100.0%
Are all wall-mounted information panels and signs placed at a height between 90 cm to 180 cm?	0.0%

Are the signs clear and contrast colour?	0.0%
Are accessible places clearly identified by the International Accessibility Symbol?	0.0%
Toilets and bathrooms	
What type of toilet do you have in your facility?	
Is the toilet Western latrine friendly for persons with disabilities?	0.0%
For the Asian Latrine, do the latrines have rails placed on both sides for those with difficulties squatting or standing up again? If yes, is the height of these rails 48 cm to 70 cm?	0.0%
Do you have an adaptable seating device for any Asian squatting pans?	0.0%
Are the accessible toilets indicated by a wheelchair sign (white on blue)?	0.0%
Is the size of the toilet not less than 150 cm x 150 cm?	0.0%
Is there a clear space of 150 cm x 150 cm in front of the toilet?	0.0%
For a western latrine, is there a drop-down grab bar at a height of 48 cm and 70 cm beside the toilet?	0.0%
Do grab bars have a diameter of 4-5 cm?	0.0%
Are the grab bars in the toilet solidly attached to the wall and able to hold the weight of an adult person?	0.0%
Is there a washbasin inside or near the toilet?	100.0%
Is the washbasin at the height of 80 cm to 85 cm?	100.0%
Does the water tap have long lever handles that are easy to operate?	100.0%
Is there clear knee space between the sink and floor?	100.0%
Do toilets ensure privacy?	100.0%
Does the door open in slide door type?	0.0%
Are door handles at an easy-to-reach height of between 85 cm to 120 cm?	0.0%
Can doors be easily locked from the inside and be released from outside under emergency situations?	100.0%
Is the floor material non-slip, well drained and waterproof?	100.0%
Is the toilet bowl height between 45-50 cm?	0.0%
Work and/or office rooms	
Do the room's entry doors comply with specific prescriptions (minimum door width 90 cm and height of 200 cm).	0.0%
Are chairs back of seats with a height of 70 cm to 75 cm (seat = 45cm)?	0.0%
Are the tops of the table between 75 cm and 80 cm height?	100.0%
Is there enough space between table/working benches for persons using a wheelchair to move around (at least 120 cm)?	100.0%
Are the power switches between 90 cm to 120 cm from the floor level?	100.0%
Are the power switches in a colour that contrasts with the surrounding wall or are highlighted by a different strip of colour for people with low vision?	0.0%
Is the room well lit, with a combination of natural and electric light?	100.0%
Emergency features	
Are the emergency routes identifiable by persons with disabilities (including people with visual impairments)?	0.0%
Can an emergency be identified by hearing or speech impaired persons?	0.0%

Does the facility or establishment have emergency exits? If yes, are the emergency exits clear from obstruction?	0.0%
Is the location of emergency (fire escape) clearly identifiable?	0.0%
Does the facility /establishment have fire extinguishers? If yes, do the staff know how to use a fire extinguisher?	0.0%
Are staff trained on "Firefighting Training" or "Emergency Evacuations"?	0.0%
Does the facility have transportation/vehicle in place for emergency evacuation?	100.0%

7.3. Findings on Information and Communication Accessibility

Information and Communication Accessibility in Women and Girls Centres: The major findings regarding information and communication accessibility in Women and Girls Centres are as follows.

The accessibility of information and communication (IEC) materials across the service facilities shows varying levels. While 61.1% of respondents confirmed that IEC materials are available at the women and girls centres, 55.6% reported that the materials are available in Myanmar and local ethnic languages. When it comes to the language used in IEC materials, only 38.9% of respondents feel confident that it is respectful, humanizing, and non-discriminatory towards people with disabilities.

Significant gaps exist in providing accessible formats for IEC materials. None of the frequently distributed materials are available in Braille or tactile graphics, and only 5.6% of these materials are printed using high-contrast colours to support persons with low vision or sighted people. The availability of large print versions of IEC materials is reported at 22.2%, while 61.1% have access to easy-read versions that are simplified. Audio and video formats of IEC materials are available for 33.3% of the materials, while sign language interpreters or captionists are only available for 11.1%. Half of the staff are trained to produce and provide these alternative formats, but there is still a need for improvement.

Feedback and complaint mechanisms are generally accessible, with 88.9% of respondents reporting that these mechanisms are confidential and tailored to the communication needs of all individuals. However, only 55.6% of respondents confirmed that feedback mechanisms are specifically designed to meet the context and communication requirements of people with disabilities.

Regarding informed consent and confidentiality, 88.9% of respondents confirmed that guidance on confidentiality explicitly addresses sharing information only with trusted persons or interpreters chosen by a survivor with disabilities. All staff members are trained on informed consent and support strategies for helping women and girls with disabilities make their own decisions.

In terms of data collection and information management, 88.9% of respondents integrate the Washington Group Short Set on Functioning into their data collection processes. Data analysis is also disaggregated by sex, age, and types of disability, as reported by 100% of respondents.

The accessibility of sign-up sheets presents a significant barrier, with 77.8% of respondents indicating that beneficiaries are required to fill out forms at service locations. However, only 22.2% of the sign-up sheets are available in local languages, and just 27.8% are available in large print. Despite these challenges, 100% of staff members are willing and ready to assist persons with disabilities in filling out sign-up sheets.

Finally, website accessibility is a major concern, with only 5.9% of respondents having evaluated their website for accessibility. None of the websites are accessible to persons with visual impairment who use screen readers, and only 17.6% of websites have captioned videos or sign language included in their content. Furthermore, only 17.6% of respondents ensure that new content on the website is accessible.

The below table shows the detailed findings of the information and communication accessibility audit conducted by the implementing partners and sub-grantees at their Women and Girls Centres.

Information and Communication materials	% Responded 'Yes'
IEC materials, Accessible formats and Feedback mechanism	
Are information, education, and communication (IEC) materials of the services available in the service provider location?	61.1%
Are the IEC materials available in Myanmar and local ethnic language?	55.6%
Do you feel confident that the language used in the IEC materials is respectful, humanising, non-discriminatory and appropriate to people with disabilities?	38.9%
Are the frequently distributed IEC materials available in Braille or any tactile graphics format?	0.0%
Are the frequently distributed IEC materials printed using high-contrast colours to aid persons with low vision or colour-blindness?	5.6%
Are IEC materials available in large prints?	22.2%
Are frequently distributed IEC materials available in easy-read versions. These are simplified versions of information written in plain language with supporting visuals?	61.1%
Are IEC materials available in audio formats (e.g., audiobooks, recorded materials, podcasts)?	33.3%
Are IEC materials available in video formats?	33.3%
Are sign language interpreters/captionists available for people who are hard of hearing and deaf?	11.1%
Are staff members trained to use, arrange for and produce materials and communications in alternative formats as applicable?	50.0%

Ensure feedback and complaint mechanisms are tailored to the context and to the communication requirements of all?	55.6%
Ensure that feedback mechanisms that report on the quality of assistance and protection are accessible to all and are confidential?	88.9%
Informed Consent and Confidentiality	
Does guidance on confidentiality explicitly reference only sharing information with trusted support persons and/or interpreters chosen by a survivor with disabilities?	88.9%
Are staff trained on informed consent/assent and strategies to support women and girls with disabilities to make their own decisions?	100.0%
Data Collection and Information Management	
Has the Washington Group Short Set on Functioning been integrated into service user data collection and violence prevalence surveys, as appropriate?	88.9%
Is data analysis disaggregated by sex, age and types of disability (where possible)?	100.0%
Sign-up sheets	
Do beneficiaries need to fill out sign-up sheets and forms in the services area?	77.8%
Are sign-up sheets available in Myanmar and local ethnic language?	22.2%
Are sign-up sheets available in large prints?	27.8%
Are your staff willing/ready to provide support in filling the sign-up sheets for persons with disabilities if needed?	100.0%
Website	
Have you evaluated your website for accessibility?	5.9%
Is your website accessible to blind/visually impaired people who use screen readers?	0.0%
Are videos on your website captioned and with sign language?	17.6%
Do you ensure that new content is accessible?	17.6%

Information and Communication Accessibility in Health Posts/Clinics: The major findings regarding information and communication accessibility in Health Posts/Clinics are as follows.

The audit findings indicate varying degrees of accessibility in information and communication resources among health posts/clinics. While 93.8% reported that information, education, and communication (IEC) materials are available at their locations, 81.3% have materials translated into Myanmar and local ethnic languages. Confidence in the respectful and non-discriminatory language used in IEC materials was moderately positive, with 56.3% affirming this. However, accessible formats remain limited: only 6.3% have materials in Braille or tactile graphics, and just 25% offer large-print options. High-contrast materials, helpful for those with low vision, are available 37.5%, and similarly, easy-read versions in plain language are available (37.5%). Audio formats are rare (6.3%), as are video formats (12.5%), and none provide sign language interpreters or captioning services. Training for staff to arrange and produce alternative formats is also limited, with only 31.3% of respondents reporting such preparedness.

Feedback and complaint mechanisms tailored for accessibility are present in 43.8% of facilities, but confidentiality in feedback mechanisms was only equally assured. In terms of informed consent and confidentiality, no guidance was available on confidentiality practices tailored to survivors with disabilities, though 62.5% of staff were trained to support informed decision-making for women and girls with disabilities. In data collection, the Washington Group Short Set on Functioning is fully integrated (100%), and the same amount applies for - data is consistently disaggregated by sex, age, and disability type, suggesting good practice in disability-sensitive data management.

The use of sign-up sheets was reported by 60% of respondents, but accessible formats are lacking, with only 6.7% available in large print or translated to ethnic languages. However, 80% of staff expressed readiness to assist people with disabilities in filling out these forms if needed.

In digital accessibility, only 9.1% of respondents had evaluated their websites for accessibility, and none were accessible to screen reader users. Videos on websites were captioned and supported with sign language by 36.4%, while just 9.1% ensure accessibility in new web content.

The below table shows the detailed findings of the information and communication accessibility audit conducted by the implementing partners and sub-grantees at their Women and Girls Centres.

Information and Communication materials	% Responded 'Yes'
IEC materials, Accessible formats and Feedback mechanism	
Are information, education, and communication (IEC) materials of the services available in the service provider location?	93.8%
Are the IEC materials available in Myanmar and local ethnic language?	81.3%
Do you feel confident that the language used in the IEC materials is respectful, humanising, non-discriminatory and appropriate to people with disabilities?	56.3%
Are the frequently distributed IEC materials available in Braille or any tactile graphics format?	6.3%
Are the frequently distributed IEC materials printed using high-contrast colours to aid persons with low vision or colour-blindness?	37.5%
Are IEC materials available in large prints?	25.0%
Are frequently distributed IEC materials available in easy-read versions. These are simplified versions of information written in plain language with supporting visuals.	37.5%
Are IEC materials available in audio formats (e.g., audiobooks, recorded materials, podcasts)?	6.3%
Are IEC materials available in video formats?	12.5%
Are sign language interpreters/captionists available for people who are hard of hearing and deaf?	0.0%
Are staff members trained to use, arrange for and produce materials and communications in alternative formats as applicable?	31.3%
Ensure feedback and complaint mechanisms are tailored to the context and to the communication requirements of all?	43.8%
Ensure that feedback mechanisms that report on the quality of assistance and protection are accessible to all and are confidential?	43.8%
Informed Consent and Confidentiality	
Does guidance on confidentiality explicitly reference only sharing information with trusted support persons and/or interpreters chosen by a survivor with disabilities?	0.0%
Are staff trained on informed consent/assent and strategies to support women and girls with disabilities to make their own decisions?	62.5%
Data Collection and Information Management	
Has the Washington Group Short Set on Functioning been integrated into service user data collection and violence prevalence surveys, as appropriate?	100.0%
7.3.2. Is data analysis disaggregated by sex, age and types of disability (where possible)?	100.0%
Sign-up sheets	
Do beneficiaries need to fill out sign-up sheets and forms in the services area?	60.0%

Are sign-up sheets available in Myanmar and local ethnic language?	6.7%
Are sign-up sheets available in large prints?	6.7%
Are your staff willing/ready to provide support in filling the sign-up sheets for persons with disabilities if needed?	80.0%
Website	
Have you evaluated your website for accessibility?	9.1%
Is your website accessible to blind/visually impaired people who use screen readers?	0.0%
Are videos on your website captioned and with sign language?	36.4%
Do you ensure that new content is accessible?	9.1%

Information and Communication Accessibility in Safe Houses: The major findings regarding information and communication accessibility in Safe Houses are as follows.

The findings show significant gaps in the accessibility of information, communication, and materials across multiple service areas. While 63.6% of respondents reported that information, education, and communication (IEC) materials are available at service locations, only 30% confirmed availability in Myanmar and local ethnic languages. Although 66.7% of respondents responded that the language used in IEC materials is respectful and inclusive, availability of alternative formats is limited. None of the frequently distributed IEC materials are available in Braille or tactile formats, and only 20% are printed with high-contrast colours for those with low vision or colour-blindness. Additionally, only 20% of materials are provided in large print, 30% in easy-read formats, 10% in audio formats, and 20% in video formats, leaving many communication needs unmet. Access to sign language interpreters or captioning is notably low, with only 8.3% of service providers offering this support.

In terms of staff readiness, just 16.7% of respondents reported that their team is trained to produce or arrange for materials in alternative formats, and only 16.7% ensure that feedback mechanisms are accessible and contextually tailored. However, 75% confirmed that feedback channels are confidential and accessible for reporting.

For informed consent and confidentiality practices, 72.7% of service providers have confidentiality guidance specifying that information is only shared with trusted support persons or interpreters chosen by a survivor with disabilities. Additionally, 90.9% of respondents reported staff training in informed consent and decision-making support for women and girls with disabilities.

Data collection and information management practices show some strength, with 72.7% using the Washington Group Short Set on Functioning for collecting disability data and 100% disaggregating data by sex, age, and disability type.

Sign-up sheets are widely required in service areas (83.3%), but their accessibility is limited, with only 8.3% available in local languages and 41.7% in large print. Nonetheless, 91.7% of staff are willing to assist persons with disabilities in completing these forms as needed.

Website accessibility remains an area of concern, with only 8.3% having evaluated their website for accessibility. None of the websites are fully accessible to persons with visual impairment who use screen readers, nor do they feature captioned videos or sign language interpretation. Similarly, no respondent indicated a point to ensuring new website content meets accessibility standards.

The below table shows the detailed findings of the information and communication accessibility audit conducted by the implementing partners and sub-grantees at their Women and Girls Centres.

Information and Communication materials	% Responded 'Yes'
IEC materials, Accessible formats and Feedback mechanism	
Are information, education, and communication (IEC) materials of the services available in the service provider location?	63.6%
Are the IEC materials available in Myanmar and local ethnic language?	30.0%
Do you feel confident that the language used in the IEC materials is respectful, humanising, non-discriminatory and appropriate to people with disabilities?	66.7%
Are the frequently distributed IEC materials available in Braille or any tactile graphics format?	0.0%
Are the frequently distributed IEC materials printed using high-contrast colours to aid persons with low vision or colour-blindness?	20.0%
Are IEC materials available in large prints?	20.0%
Are frequently distributed IEC materials available in easy-read versions? These are simplified versions of information written in plain language with supporting visuals.	30.0%
Are IEC materials available in audio formats (e.g., audiobooks, recorded materials, podcasts)?	10.0%
Are IEC materials available in video formats?	20.0%
Are sign language interpreters/captionists available for people who are hard of hearing and deaf?	8.3%
Are staff members trained to use, arrange for and produce materials and communications in alternative formats as applicable?	16.7%
Ensure feedback and complaint mechanisms are tailored to the context and to the communication requirements of all?	16.7%
Ensure that feedback mechanisms that report on the quality of assistance and protection are accessible to all and are confidential?	75.0%
Informed Consent and Confidentiality	
Does guidance on confidentiality explicitly reference only sharing information with trusted support persons and/or interpreters chosen by a survivor with disabilities?	72.7%

Are staff trained on informed consent/assent and strategies to support women and girls with disabilities to make their own decisions?	90.9%
Data Collection and Information Management	
Has the Washington Group Short Set on Functioning been integrated into service user data collection and violence prevalence surveys, as appropriate?	72.7%
Is data analysis disaggregated by sex, age and types of disability (where possible)?	100.0%
Sign-up sheets	
Do beneficiaries need to fill out sign-up sheets and forms in the services area?	83.3%
Are sign-up sheets available in Myanmar and local ethnic language?	8.3%
Are sign-up sheets available in large prints?	41.7%
Are your staff willing/ready to provide support in filling the sign-up sheets for persons with disabilities if needed?	91.7%
Website	
Have you evaluated your website for accessibility?	8.3%
Is your website accessible to blind/visually impaired people who use screen readers?	0.0%
Are videos on your website captioned and with sign language?	0.0%
Do you ensure that new content is accessible?	0.0%

Information and Communication Accessibility in Youth Centres: The major findings regarding information and communication accessibility in Youth Centres are as follows.

The accessibility of Information and Communication (IEC) materials across youth centres shows a positive overall response in several areas. All service providers confirm that IEC materials are available in the service location and are provided in both Myanmar and local ethnic languages. Furthermore, the language used in these materials is deemed respectful, humanizing, non-discriminatory, and appropriate for people with disabilities (100%).

However, significant gaps were identified in the availability of alternative formats for persons with visual impairments. None of the frequently distributed IEC materials are available in Braille or tactile graphics formats, and there is no provision for high-contrast printed materials to assist persons with low vision. Only a small proportion of materials (33.3%) are printed in large fonts, which may not fully meet the needs of people with low vision. While some IEC materials are available in simplified easy-read versions, and others are provided in video formats, no audio formats such as audiobooks, podcasts, or recordings are available at all. Additionally, sign language interpreters or captioning services are not provided for people who are hard of hearing or deaf.

There is a lack of staff training in producing or arranging alternative formats for communications, and feedback mechanisms, though accessible for reporting the

quality of assistance and protection, are not fully adapted to meet the communication needs of all beneficiaries (66.7%).

In terms of informed consent and confidentiality, 66.7% of service providers reported that guidance on confidentiality includes specific reference to sharing information only with trusted support persons or interpreters chosen by a survivor with disabilities. Similarly, 66.7% indicated that staff are trained on informed consent and strategies to support women and girls with disabilities in making their own decisions.

Data collection practices show progress, with 66.7% of respondents incorporating the Washington Group Short Set on Functioning in service user data collection. Additionally, all service providers analyze data disaggregated by sex, age, and disability type where possible.

Regarding sign-up sheets, 100% responded that beneficiaries are required to fill out forms on-site, and these forms are available in both Myanmar and local ethnic languages. However, only 66.7% of sign-up sheets are available in large print, and while all staff are willing to assist individuals with disabilities in filling out these sheets, support for alternative formats is still limited.

Finally, in terms of web accessibility, no service providers have evaluated their websites for accessibility, and there is no provision for screen readers, captions, or sign language for videos on the website. Furthermore, there is no assurance that new content is made accessible.

The below table shows the detailed findings of the information and communication accessibility audit conducted by the implementing partners and sub-grantees at their Youth Centres.

Information and Communication materials	% Responded 'Yes'
IEC materials, Accessible formats and Feedback mechanism	
Are information, education, and communication (IEC) materials of the services available in the service provider location?	100.0%
Are the IEC materials available in Myanmar and local ethnic language?	100.0%
Do you feel confident that the language used in the IEC materials is respectful, humanizing, non-discriminatory and appropriate to people with disabilities?	100.0%
Are the frequently distributed IEC materials available in Braille or any tactile graphics format?	0.0%
Are the frequently distributed IEC materials printed using high-contrast colours to aid persons with low vision or colour-blindness?	0.0%
Are IEC materials available in large prints?	33.3%
Are frequently distributed IEC materials available in easy-read versions? These are simplified versions of information written in plain language with supporting visuals.	100.0%

Are IEC materials available in audio formats (e.g., audiobooks, recorded materials, podcasts)?	0.0%
Are IEC materials available in video formats?	100.0%
Are sign language interpreters/captionists available for people who are hard of hearing and deaf?	0.0%
Are staff members trained to use, arrange for and produce materials and communications in alternative formats as applicable?	0.0%
Ensure feedback and complaint mechanisms are tailored to the context and to the communication requirements of all?	66.7%
Ensure that feedback mechanisms that report on the quality of assistance and protection are accessible to all and are confidential?	100.0%
Informed Consent and Confidentiality	
Does guidance on confidentiality explicitly reference only sharing information with trusted support persons and/or interpreters chosen by a survivor with disabilities?	66.7%
Are staff trained on informed consent/assent and strategies to support women and girls with disabilities to make their own decisions?	66.7%
Data Collection and Information Management	
Has the Washington Group Short Set on Functioning been integrated into service user data collection and violence prevalence surveys, as appropriate?	66.7%
Is data analysis disaggregated by sex, age and types of disability (where possible)?	100.0%
Sign-up sheets	
Do beneficiaries need to fill out sign-up sheets and forms in the services area?	100.0%
Are sign-up sheets available in Myanmar and local ethnic language?	100.0%
Are sign-up sheets available in large prints?	66.7%
Are your staff willing/ready to provide support in filling the sign-up sheets for persons with disabilities if needed?	100.0%
Website	
Have you evaluated your website for accessibility?	0.0%
Is your website accessible to blind/visually impaired people who use screen readers?	0.0%
Are videos on your website captioned and with sign language?	0.0%
Do you ensure that new content is accessible?	0.0%

Information and Communication Accessibility in Key Population Friendly Space:

The major findings regarding information and communication accessibility in Key Population and Friendly Space are as follows.

The assessment of information and communication materials (IEC) across key population friendly space reported both strengths and significant gaps in accessibility for persons with disabilities. All service providers confirmed that IEC materials are available at their locations. However, none have these materials available in local ethnic languages or in accessible formats such as Braille, tactile graphics, or audio formats. Despite this, the language used in IEC materials is fully deemed respectful, humanizing, non-discriminatory, and appropriate for people with disabilities.

While materials are available in high-contrast colours, large prints, and easy-read versions, none of the service providers offer video formats, sign language interpreters, or captioning, leaving a significant gap in accessibility for persons with hearing impairments. Additionally, there is no evidence of staff training on how to produce or arrange for the production of materials in alternative formats, further hindering accessibility.

Feedback and complaint mechanisms are universally accessible, and confidentiality is ensured in the reporting of assistance and protection quality. However, the confidentiality guidelines do not explicitly reference the sharing of information with trusted support persons or interpreters chosen by survivors with disabilities.

In terms of informed consent, staff are trained to support women and girls with disabilities in making their own decisions, although guidance on confidentiality lacks clear references for people with disabilities.

Regarding data collection, service providers have integrated the Washington Group Short Set on Functioning into their service user data collection. Data is also disaggregated by sex, age, and type of disability (100%).

Regarding sign-up sheets, while all beneficiaries are required to complete these forms (100%), none of the service providers offer them in Myanmar and local ethnic languages or in large print. Nonetheless, staff members are willing to assist persons with disabilities in filling out these forms.

Lastly, none of the service providers have evaluated the accessibility of their websites, and their websites are not accessible to persons with visual impairments using screen readers. Video content on websites is not captioned or accompanied by sign language, and there is no evidence of consistent efforts to ensure new content is accessible.

The below table shows the detailed findings of the information and communication accessibility audit conducted by the implementing partners and sub-grantees at their Youth Centres.

Information and Communication materials	% Responded 'Yes'
IEC materials, Accessible formats and Feedback mechanism	
Are information, education, and communication (IEC) materials of the services available in the service provider location?	100.0%
Are the IEC materials available in Myanmar and local ethnic language?	0.0%
Do you feel confident that the language used in the IEC materials is respectful, humanising, non-discriminatory and appropriate to people with disabilities?	100.0%
Are the frequently distributed IEC materials available in Braille or any tactile graphics format?	0.0%
Are the frequently distributed IEC materials printed using high-contrast colours to aid persons with low vision or colour-blindness?	100.0%
Are IEC materials available in large prints?	100.0%
Are frequently distributed IEC materials available in easy-read versions? These are simplified versions of information written in plain language with supporting visuals.	100.0%
Are IEC materials available in audio formats (e.g., audiobooks, recorded materials, podcasts)?	0.0%
Are IEC materials available in video formats?	0.0%
Are sign language interpreters/captionists available for people who are hard of hearing and deaf?	0.0%
Are staff members trained to use, arrange for and produce materials and communications in alternative formats as applicable?	0.0%
Ensure feedback and complaint mechanisms are tailored to the context and to the communication requirements of all?	100.0%
Ensure that feedback mechanisms that report on the quality of assistance and protection are accessible to all and are confidential?	100.0%
Informed Consent and Confidentiality	
Does guidance on confidentiality explicitly reference only sharing information with trusted support persons and/or interpreters chosen by a survivor with disabilities?	0.0%
Are staff trained on informed consent/assent and strategies to support women and girls with disabilities to make their own decisions?	100.0%
Data Collection and Information Management	
Has the Washington Group Short Set on Functioning been integrated into service user data collection and violence prevalence surveys, as appropriate?	100.0%
Is data analysis disaggregated by sex, age and types of disability (where possible)?	100.0%
Sign-up sheets	
Do beneficiaries need to fill out sign-up sheets and forms in the services area?	100.0%

Are sign-up sheets available in Myanmar and local ethnic language?	0.0%
Are sign-up sheets available in large prints?	0.0%
Are your staff willing/ready to provide support in filling the sign-up sheets for persons with disabilities if needed?	100.0%
Website	
Have you evaluated your website for accessibility?	0.0%
Is your website accessible to blind/visually impaired people who use screen readers?	0.0%
Are videos on your website captioned and with sign language?	0.0%
Do you ensure that new content is accessible?	0.0%



8. SUMMARY OF FINDINGS AND LESSONS LEARNED FROM AUDIT TOOL AND PROCESS

Compliance with the National Accessibility Guidelines

- The audit tool meets national accessibility guidelines for physical infrastructure, but it lacks comprehensive compliance in areas following the accessibility standards. The current state does not fully reflect universal design principles, which require all public facilities to be accessible to persons with disabilities.

Cultural appropriateness of the standards

- The proposed accessibility audit tool and standards align with local cultural norms, especially for women and girls with disabilities. However, additional awareness campaigns or sensitivity trainings may be required to foster understanding and acceptance of these among staff and the community widely.

Addressing the needs of people with disabilities for the standards proposed by the Tool

- The audit tool proposes standards that cater to a variety of disability types, including mobility, visual, and hearing impairments. The identified gaps, need to be addressed by incorporating these standards into the facility design.
- The tool addresses a wide range of disability needs, but the facilities currently do not meet all of the proposed standards.

Challenges in the audit team composition and performance

- The audit teams have less numbers of members with lived experience of disability, which affected the assessment of how inclusive and accessible the service facilities and environment truly is for people with disabilities. This limited the ability to identify nuanced accessibility challenges that could be more easily identified by persons with disabilities.
- Having experts in the relevant field of the audit could have enhanced the assessment and provided a deeper understanding of the accessibility issues present.

Administration of the Audit Tool

- The administration of the audit tool was challenging due to time constraints, and lack of prior knowledge of the tool's full application. It's important to provide prior intensive training for audit teams additionally to disability focal points to ensure consistency and effective application in the use of the tool.

- The administration of the audit tool was challenged by the need to assess both physical and service accessibility simultaneously.

Estimating the costs

- Estimating the costs for improvements, such as installing ramps or altering the infrastructure, was difficult due to fluctuating material prices and the lack of a detailed budget for accessibility modifications. Clearer cost estimates are needed for future planning.

Lessons learned

- There is a need for proactive participation and involvement of people with disabilities in the audit process to provide firsthand insights into challenges and solutions. Additionally, thorough planning and realistic budgeting are essential to ensure that accessibility improvements are feasible and sustainable in the long term.
- The audit highlighted the critical need for disability-inclusive training for staff, as well as the importance of creating accessible facilities and services for persons with disabilities.

9. RECOMMENDATIONS

The following recommendations are identified and issued based on an accessibility audit of the 50 service facilities operated by UNFPA's implementing partners and sub-grantees under the WGF Programme in Kachin, Kayah, Kayin, Mon, Northern and Southern Shan, Rakhine, Bago (East), and Yangon. These recommendations aim to enhance the accessibility and inclusivity of service facilities for persons with disabilities, with a focus on both UNFPA and its IPs and sub-grantees. The recommendations are intended to be implemented over a period of up to 3 years, with actions that are more costly or time-consuming to be planned for long-term execution.

9.1. Recommendations for the Improvement of Institutional Accessibility

1. Develop or integrate and mandate an accessibility policy in compliance with the CRPD and the UN Disability Inclusion Strategy, emphasizing alignment with national and international accessibility standards.

- **Action:** Develop or integrate and implement an accessibility policy that guides all programmes, services, and facilities of UNFPA and implementing partners. During the policy development and implementation, consult and collaborate closely with persons with disabilities, their organizations, and relevant external stakeholders with expertise in this field. Conduct a desk review of accessibility policies and practices implemented by other organizations, ensuring that the accessibility articles in the CRPD and the UN Disability Inclusion Strategy are applied and aligned with national and international accessibility standards. Also, get exposure to the practices of organizations implementing the same policy.
- **Expected Outcome:** Establishing a formal policy will ensure consistent accessibility practices and accountability across the organization. It will reinforce the organization's commitment and provide a foundation for equitable access to services.
- **Considerations:** Policy development may require consultation with accessibility experts and resources to ensure the policy aligns with both local and international standards.

2. Engage persons with disabilities and their representative organizations in assessing or improving the accessibility of the organization.

- **Action:** Establish a formal mechanism for involving persons with disabilities or their representative organizations in accessing or improving accessibility measures within the organization. Ensure that all types of disabilities are included and provided the reasonable accommodation to enable their effective and meaningful participation in activities.

- **Expected Outcome:** This approach brings critical insights and firsthand experiences to accessibility improvements, ensuring that actions genuinely address needs and priorities of people with disabilities.
- **Considerations:** Identifying representative organizations or individuals willing to participate may require initial outreach and relationship-building efforts within the network.

3. Train staff on accessibility and disability inclusion.

- **Action:** Implement pilot or regular training programmes for staff on accessibility principles, the accessibility checklist, disability inclusion, informed consent, and confidentiality protocols. Empower the disability focal point in organizing this, and ensure that capacity development is provided at all levels—leadership, programme, and field—to ensure a consistent approach to adaptation and organizational changes that enhance accessibility and inclusion for persons with disabilities. Partner with organizations of persons with disabilities experienced in this area when implementing this capacity building. Appreciate and acknowledge the champion staff who promote accessibility and disability inclusion within the organization.
- **Expected Outcome:** Staff training builds an inclusive organizational culture and improves the quality of interactions and support provided to persons with disabilities.
- **Considerations:** Staff turnover may necessitate periodic training sessions, and training materials should be updated to reflect any changes in accessibility standards or organizational policies.

4. Allocate budget for accessibility initiatives within the organization.

- **Action:** Designate funds specifically for accessibility improvements and disability inclusion, including facility adjustments, assistive technologies, staff training, and consultation with persons with disabilities and their organizations. Advocate to donors and ensure that this budget is included in every project or initiative of the organization.
- **Expected Outcome:** Having a dedicated budget facilitates timely improvements and demonstrates organizational commitment to accessibility as an ongoing priority.
- **Considerations:** Balancing this allocation with other budget priorities may require strategic planning, particularly in resource-limited settings.

5. Develop reasonable accommodation protocols.

- **Action:** Create clear procedures for identifying, documenting, and fulfilling reasonable accommodation requests from persons with disabilities, ensuring flexibility across facilities and services of implementing partners under UNFPA's WGF programme. Work with organizations of persons with disabilities when developing this. Supervise and monitor the teams and staff to ensure they follow and implement these protocols.

- **Expected Outcome:** Standardized protocols for reasonable accommodation enhance service accessibility and provide clarity to both staff and beneficiaries with disabilities.
- **Considerations:** Developing such protocols may require training on the aspects of reasonable accommodation, and ongoing feedback from persons with disabilities and their organizations to ensure effectiveness.

6. Incorporate accessibility indicators in Monitoring and Evaluation (M&E).

- **Action:** Integrate accessibility indicators into M&E frameworks to track progress on accessibility improvements and identify areas for further enhancement. Make references to the accessibility standards and listen the perspectives of persons with different types of disabilities when developing these.
- **Expected Outcome:** Accessibility indicators provide data-driven insights into the organization's performance on accessibility, supporting continuous improvement and accountability for ensuring equal access for people with disabilities to services and facilities.
- **Considerations:** M&E teams may need guidance on defining and measuring accessibility indicators effectively, and data collection methods should ensure the disability inclusion.

7. Establish accessible feedback mechanisms and communication channels.

- **Action:** Design and implement accessible formats and channels for gathering feedback from persons with disabilities, ensuring options for all types of disabilities. Make people with disabilities aware of the existence of these mechanisms and opportunities.
- **Expected Outcome:** Accessible feedback mechanisms and communication channels encourage persons with disabilities to share experiences and suggestions, directly informing ongoing improvements of the organization's facilities and services related to accessibility.
- **Considerations:** Adjustments may include providing multiple feedback options/formats (e.g., audio, text, Braille), which could require additional resources, supports or partnerships with organizations of persons with disabilities

8. Promote accountability for accessibility through internal audits within the organization

- **Action:** Conduct regular internal audits of office premises and facility sites focused on accessibility practices to assess adherence to policies and identify gaps in implementation. Invite persons with disabilities to participate in the audits, ensuring all types of disabilities are included. Listen to the findings and feedback from the audit and translate them into the action plans of the organization.

- **Expected Outcome:** Internal audits help maintain organizational accountability, ensuring accessibility policies translate into tangible practices at each facility or entire organization.
- **Considerations:** Audits may need dedicated resources or external expertise, and findings should be addressed transparently to build trust with the participants, especially from the OPD community.

9. Empower the assigned disability focal point to initiate, implement and monitor accessibility work.

- **Action:** Empower a focal point person or team responsible for overseeing accessibility initiatives, implementation and monitoring, coordinating with other departments or projects, and acting as a liaison for accessibility concerns.
- **Expected Outcome:** A focal point or team provides focused oversight, ensuring accessibility measures are initiated, implemented, maintained, monitored, and communicated effectively across the organization.
- **Considerations:** This role may require specialized training in accessibility principles and standards, and time allocation should be sufficient to manage these responsibilities alongside other duties of the staff or team assigned.

10. Conduct accessibility awareness campaigns together with the staff and partners of the organization.

- **Action:** Initiate and implement regular internal awareness campaigns on the importance of accessibility and disability inclusion, incorporating key messages, stories, facts, and tips for all staff and stakeholders involved. Organize this not only at the headquarter level but also at the field level. Invite persons with disabilities and/or their organizations to join in the campaigns.
- **Expected Outcome:** Awareness campaigns build a culture of inclusiveness and remind staff and partners of the organizational commitment to accessibility, fostering empathy and understanding on the accessibility needs of people with disabilities.
- **Considerations:** Campaigns should be creative/innovative, diverse in approach, and inclusive of various types of disabilities to effectively engage all staff members and partners.

11. Integrate accessibility in partnership agreements and contracts.

- **Action:** Include specific accessibility requirements in partnership agreements, contracts, and memorandums of understanding (MOUs) to ensure contractors and partners uphold accessibility standards.
- **Expected Outcome:** This ensures accessibility is consistently prioritized in all collaborations, expanding the organization's reach of accessible practices through shared accountability and fostering a culture of non-discrimination in partnerships and collaborations.

- **Considerations:** Integrating accessibility clauses may require negotiation and support from the donors, and partners may need assistance to meet these requirements.

9.2. Recommendations for the Improvement of Physical Accessibility

1. Enhance physical accessibility when setting up or renting a building for the organization and service facilities.

- **Action:** Rent a building that is conveniently located for everyone and accessible to people with disabilities when the organization sets up the office or runs its facilities. If an inaccessible building is rented, the budget should be planned for renovations. This should be included in the organization's policy, and staff and departments should be informed to follow it. The organization's leadership is responsible and should take the initiative to ensure this.
- **Expected outcome:** Promoting accessibility in the buildings of office and service facilities strengthens the organization's accountability, enhances its reputation as a role model, and improves equal access for people with disabilities to its facilities and services.
- **Considerations:** For rental buildings, when the owner receives the message about making it accessible for people with disabilities, some owners may refuse to rent or repair the building due to a negative perception of disability. Therefore, advocacy should be conducted in advance if necessary.

2. Ensure accessible entrance ramps and doors at both the facilities and organization.

- **Action:** Install new ramps with non-slip surfaces and standardized handrails, or adapt the existing ramps to meet accessibility standards, with a minimum width of 120 cm and a recommended gradient of at least 1:10, at all building entrances of the facilities and organization. If permanent ramps are difficult to implement due to resource limitations, portable ramps can be considered. An accessibility sign should be posted near the ramp to indicate that the building is accessible to all. Ensure that the doors at the building's entrances meet the minimum accessibility standards, with a width of 90 cm and a height of 200 cm. Use sliding or easy-to-open doors where possible.
- **Expected Outcome:** Accessible entrances provide persons with mobility difficulties independent and safe access to facilities and buildings, fostering equality in the services.
- **Considerations:** Ensure ramps and doors meet the accessibility standards and are well-maintained.

3. Create accessible parking spaces and drop-off areas near the office or service facilities of the organization.

- **Action:** Designate clearly marked accessible parking slots and drop-off areas near facility and office entrances, ensuring they have adequate space for vehicles with persons using wheelchair and other types of disabilities. Follow the accessibility standards when preparing these areas.
- **Expected Outcome:** Accessible parking and drop-off points facilitate smooth, safe and convenient access to facilities for those with mobility devices, reducing physical strain and travel time when accessing services.
- **Considerations:** Ensure these spaces are appropriately marked and monitored to prevent misuse by others. Maintenance and regular inspections are also necessary to ensure safety and accessibility compliance.

4. Provide Accessible Restrooms in the organization's facilities and offices

- **Action:** Install restrooms that are accessible to persons with disabilities, including those using wheelchairs, ensuring they have sliding wide doors, grab bars, non-slip flooring, and adequate turning space, all of which meet accessibility standards.
- **Expected Outcome:** Accessible restrooms enable dignity and independence for persons with mobility or dexterity difficulties, promoting comfort and confidence in using facilities when enjoying the services.
- **Considerations:** Renovations may require budget allocation. Regular checks are essential to maintain safety and cleanliness.

5. Install signage with Braille and large print in the public areas of the facilities and office of the organization.

- **Action:** Place clear, large-print, and Braille signage at public areas or strategic points of the facilities and office of the organization, including entrances, exits, restrooms, and key facility areas.
- **Expected Outcome:** Braille and large-print signage improves navigation for people with visual impairments, promoting autonomy in moving around the facility or office.
- **Considerations:** Ensure signage placement is consistent and within reach. Language and content of signs should be simple and understandable. As there are two different versions of Braille in Myanmar, the old version and the new version, it is important to consult with persons with visual impairments who live near the facility or office, or their representative organization.

6. Provide adequate lighting in public areas and emergency routes within the facilities and office of the organization.

- **Action:** Ensure all strategic points or public areas within the facilities and office of the organization, emergency exits, and evacuation routes are well-lit, using bright, glare-free lighting to improve visibility.
- **Expected Outcome:** Improved lighting enhances safety for persons with low vision and everyone and supports easy navigation, especially in emergency situations.
- **Considerations:** Lighting should be checked regularly for functionality, and emergency backup lighting is recommended for power outages.

7. Provide accessible seating areas near outside or within the facilities and office of the organization.

- **Action:** Designate seating areas with adequate space for wheelchair users and accessible chairs with armrests, making seating arrangements inclusive in meeting rooms, training hall, lounges, and waiting areas near outside of the facilities or office of the organization.
- **Expected Outcome:** Accessible seating supports comfort and inclusion, allowing persons with disabilities to enjoy the services happily.
- **Considerations:** Seating configurations should allow space for mobility devices. Maintenance to keep seating in good condition is also important for ongoing accessibility.

8. Install handrails and directional tactile strips along pathways within the organization's facilities or offices to support persons with visual impairments and other mobility challenges.

- **Action:** Install handrails along pathways, staircases, and ramps, and place directional tactile strips within the organization's facilities or offices to guide persons with visual impairments and other mobility challenges, ensuring their easy access to services.
- **Expected Outcome:** Handrails and tactile strips improve safety and independence for persons with mobility or visual impairments, aiding them in navigating the facility safely.
- **Considerations:** Ensure tactile strips is non-slip and met the accessibility standards.

9. Implement accessible emergency evacuation routes and plans in the organization's facilities and office.

- **Action:** Develop accessible emergency routes that accommodate wheelchairs and provide clear exit paths, along with staff training on assisting persons with disabilities during evacuations.
- **Expected Outcome:** Accessible emergency plans ensure that all individuals, regardless of disability, can evacuate safely in emergencies, reducing risks and building confidence in facility safety.

- **Considerations:** Emergency routes should be regularly inspected and kept free of obstacles. Staff training on these procedures will further enhance response readiness

10. Adapt screening places, workspaces and meeting rooms with accessible equipment.

- **Action:** Equip screening places, workspaces and meeting rooms with accessible desks, chairs, and tables to accommodate various needs and mobility aids of persons with disabilities including wheelchair users.
- **Expected Outcome:** Accessible equipment and facilities promote comfort and inclusiveness in service area, work and meeting spaces, accommodating individuals of all abilities and needs.
- **Considerations:** Accessible equipment and furniture can be costly. Regular assessments of equipment and furniture condition and functionality are recommended.

11. Install visual and audible fire alarms in the organization's facilities and office areas.

- **Action:** Install fire alarms equipped with flashing lights and loud audible alerts in all facility areas of the organization, ensuring they can be noticed by persons with hearing or visual impairments.
- **Expected Outcome:** These inclusive fire alarms will improve emergency preparedness, alerting all individuals effectively and ensuring prompt evacuation.
- **Considerations:** Regular testing and maintenance are essential to ensure reliability. Staff training on assisting individuals with disabilities during emergencies enhances safety further.

12. Add rest areas with accessible benches at larger facility spaces.

- **Action:** Set up rest areas with accessible benches along long corridors or larger facility spaces, ensuring seats are equipped with armrests and back support that meet accessibility standards.
- **Expected Outcome:** Accessible rest areas provide essential respite for persons with fatigue, mobility impairments, or other disabilities, offering convenient breaks during their access to services.
- **Considerations:** Ensure these benches are placed at reasonable intervals.

13. Provide accessible dining room and food service areas in the organization's safe houses.

- **Action:** Ensure dining room, and food service counters in the facilities are at accessible heights, with sufficient knee clearance for wheelchair users.
- **Expected Outcome:** Accessible refreshment areas enable all individuals to independently access food and drink facilities, enhancing comfort and equity during their stay in safe houses.
- **Considerations:** These areas should have clear space for persons with mobility devices.

9.3. Recommendations for the Improvement of Information and Communication Accessibility

1. Expand IEC material accessibility in alternative formats.

- **Action:** Develop and distribute IEC materials in Braille, tactile graphics, large print, high-contrast colours, audio, and easy-read versions where possible. Ensure video content includes sign language interpretation and captioning services. Work closely with organizations of persons with disabilities specialized in this area.
- **Expected Outcome:** People with visual, cognitive, and hearing impairments have equal access to information without discrimination, improving their ability to engage with services independently.
- **Considerations:** Producing and maintaining various formats may require additional budget, training, and partnerships with specialized consultants.

2. Enhance staff training on inclusive communication practices.

- **Action:** Train staff on how to arrange, and use IEC materials in alternative formats. Educate them on respectful, inclusive language and strategies to simplify information for easy-read versions. Invite persons with disabilities experienced in these areas as part of the facilitators.
- **Expected Outcome:** Staff are able to communicate more effectively with people with disabilities, fostering trust and inclusiveness in service delivery.
- **Considerations:** Regular training sessions are needed to maintain staff competency, requiring time and collaboration with qualified trainers.

3. Develop and strengthen accessible feedback and complaint mechanisms.

- **Action:** Establish feedback and complaint channels that are accessible to persons with different types of disabilities, confidential, and adaptable, including options such as online forms compatible with screen readers, phone support, and in-person feedback with trained staff assistance. Collaborate with organizations of persons with disabilities when initiating or strengthening this.

- **Expected Outcome:** People with disabilities have equitable access to feedback channels, promoting more inclusive and representative input from service users with disabilities.
- **Considerations:** Managing and responding to diverse feedback formats may need additional resources, and stringent privacy protocols will be essential for confidentiality.

4. Implement inclusive data collection and confidentiality protocols.

- **Action:** Ensure data collection forms, sign-up sheets, and consent forms are fully accessible in large print, simplified language, Braille and that confidentiality protocols allow for the choice of a trusted support person from persons with disabilities.
- **Expected Outcome:** More inclusive data collection processes improve service provision data accuracy and enable better assessment of needs among people with disabilities.
- **Considerations:** Balancing data security with the involvement of interpreter or family member or care-taker of children/persons with disabilities as support persons will require clear guidelines.

5. Evaluate and enhance website accessibility of the organization.

- **Action:** Conduct an accessibility audit of provider websites of the organization, update content for screen reader compatibility, captioned videos, and sign language interpretation, and ensure that all new content adheres to web accessibility standards. Consult and work closely with technical experts experienced in disability and digital fields.
- **Expected Outcome:** Improved digital inclusion for persons with visual impairments and those who require captions, ensuring equitable online access to information.
- **Considerations:** Website updates or redesigns could be costly, and maintaining accessible content will require ongoing technical resources and monitoring.

**Accessibility Audit in Women and Girls First Programme
Targeted States and Regions in Myanmar**

