



Resettlement Assessment Tool: Refugees with Disabilities

The *Resettlement Assessment Tool: Refugees with Disabilities* has been developed to enhance UNHCR's effectiveness and harmonize procedures for assessing refugees with disabilities for resettlement.

Refugees with disabilities risk "invisibility" and exclusion from support, services and durable solutions. A disability is only one aspect of the attributes of any human being, and persons with disabilities should be considered for durable solutions, including resettlement, on an equal footing with other refugees. It is important for UNHCR staff to develop a thorough understanding of the circumstances of refugees with disabilities, and to ensure that refugees with disabilities have fair access to the resettlement process and that their resettlement needs are assessed on a non-discriminatory basis.

Part One, the *User Guide* accompanying this tool, provides information related to each part of the process of resettling refugees with disabilities, from the identification of individuals in need of resettlement to reception and integration considerations in the country of resettlement.

Part Two, the *Resettlement Assessment Tool: Refugees with Disabilities*, provides a step-by-step guide for conducting an assessment of refugees with disabilities to determine whether resettlement is the most appropriate durable solution and to identify the resettlement needs of individual refugees with disabilities.

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User Guide

Introduction

Refugees with disabilities have specific needs and face particular forms of discrimination. This **Resettlement Assessment Tool: Refugees with Disabilities** is designed to assist UNHCR staff:

- to assess the resettlement needs of refugees with disabilities
- to prepare resettlement submissions using appropriate terminology and reflecting the specific protection and resettlement needs of refugees with disabilities

Who are persons with disabilities? What challenges do they face?

The United Nations *Convention on the Rights of Persons with Disabilities* defines **persons with disabilities** as:

“those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others.”¹

The Convention also recognizes that “disability” is an evolving concept, and stresses that a disability results from the **interaction** between persons with impairments and attitudinal and environmental barriers to their full participation in society. Persons with disabilities are not a homogeneous group; they have **different capacities and needs**, and **contribute in different ways to their communities**. They may experience difficulty in moving, hearing, seeing, communicating or learning. These factors, which may be compounded by social, cultural, physical, economic, and political discrimination, can hinder their participation in society.

Women, children, and older persons with disabilities, persons who are housebound, and persons who are “hidden” (and possibly even restrained) due to cultural stigma may be **especially vulnerable to sexual and other forms of exploitation and abuse**. However, these persons are often unable to access sexual and gender-based violence (SGBV) prevention and response programmes. SGBV also increases vulnerability to HIV/AIDS. Persons with disabilities often have difficulty accessing legal, HIV/AIDS, and reproductive health services, and many available services do not take their needs into account.²

According to World Health Organization (WHO) estimates, about 15 per cent of the world’s population has a disability.³ Although no global figures are available, this suggests that there are several million persons with disabilities among the world’s displaced. Persons with disabilities have the same basic needs as other displaced persons, and in addition, specific needs related to their disability. During crises and displacement, discrimination is often magnified, and persons with disabilities are at **increased risk of exploitation and violence**. In displacement they may also encounter serious **barriers in accessing essential protection services**.

¹ UN General Assembly, *Convention on the Rights of Persons with Disabilities: resolution / adopted by the General Assembly, 24 January 2007, A/RES/61/106, Article 1(2), preamble (e)*, <http://www.unhcr.org/refworld/docid/45f973632.html>

² See UNHCR, *Working with Persons with Disabilities in Forced Displacement*, 2011, <http://www.unhcr.org/refworld/docid/4e6072b22.html>

³ See WHO/ World Bank, *World Report on Disability Summary*, 2011, p. 7 <http://www.unhcr.org/refworld/docid/50854a322.html>

Persons with disabilities may be forced to flee their country of origin due to severe discrimination and harassment constituting persecution. Persons with disabilities face increased risk of harm, and may suffer disproportionate harm from actions that would not amount to persecution when inflicted on persons without impairments.⁴

Refugees with disabilities rank among the world’s most vulnerable persons – their experience of forced migration is compounded by the multiple and diverse challenges that flow from impairment. Refugees with disabilities risk “invisibility” and exclusion from support, services and durable solutions. They may also be perceived as a burden to their community, thereby increasing the sense of stigma and isolation in displacement, especially if there are no social services available to provide support. Misunderstandings about the implications of a disability on the assessment of resettlement needs may also lead families to hide relatives with disabilities.

Refugees with disabilities may face challenges in mobility, understanding written and verbal information, registering for documentation and support, or recalling and recounting with accuracy relevant details during interviews. Children with disabilities are also at a greater risk of abuse, neglect, abandonment, exploitation, health concerns, exposure to the risk of longer term psychosocial disturbances, family separation and denial of the right to education.⁵

Many persons with disabilities depend on caregivers for personal support, interaction or communications. Separation from these caregivers in displacement can severely affect the physical and psychosocial well-being and independence of persons with disabilities, and increase the risk of abuse, discrimination or neglect.

UNHCR’s considerations

Refugees with disabilities include those who fled their country of origin due to the severe discrimination they faced on account of their disability, as well as those whose refugee claim is based on other grounds, and have a disability acquired before or after their refugee flight.

Refugees with disabilities should have the same opportunity as other displaced persons to enjoy the full range of their human rights and participate in relevant programmes. UNHCR offices must develop a thorough understanding of the circumstances of persons of concern with disabilities, and ensure that their human rights and refugee rights are met without discrimination. It is essential to apply an Age, Gender and Diversity approach to achieve UNHCR’s commitment to ensure that all protection activities, including durable solutions, are accessible to and include persons with disabilities. Safeguards must be put in place to prevent any action from inadvertently increasing marginalization, vulnerability, exclusion and stigmatization that may put refugees with disabilities at further risk.⁶

⁴ This guidance note does not specifically address refugee status determination issues related to persons with disabilities. For guidance on what amounts to persecution, see paras. 52-53 UNHCR, *Handbook and Guidelines on Procedures and Criteria for Determining Refugee Status under the 1951 Convention and the 1967 Protocol Relating to the Status of Refugees*, December 2011, HCR/1P/4/ENG/REV. 3, <http://www.unhcr.org/refworld/docid/4f33c8d92.html>

⁵ For further discussion see UNHCR, *The Protection of Older Persons and Persons With Disabilities*, 6 June 2007, EC/58/SC/CRP.14, <http://www.unhcr.org/refworld/docid/4693775c1c.html>

⁶ UNHCR, *Age, Gender and Diversity Policy*, 8 June 2011, available at: <http://www.unhcr.org/refworld/docid/4def34f6887.html>, see in particular paras. 5, 9, 12.

UNHCR's 2010 ExCom *Conclusion on Refugees with Disabilities and other Persons with Disabilities Protected and Assisted by UNHCR*:

- recognizes that host States, which are often developing countries, have limited resources and face various challenges in providing services and facilities for persons with disabilities;
- reaffirms the international community and UNHCR's role to assist States in fulfilling these responsibilities, in the spirit of international cooperation and responsibility sharing; and
- recommends measures such as providing training on the needs, rights and dignity of persons with disabilities, ensuring swift and systematic identification and registration of persons of concern with disabilities, ensuring programmes, services and procedures are accessible, enhancing international cooperation for improving living conditions and ensuring equal opportunities for durable solutions and appropriate support.⁷

Ensuring that protection activities, including durable solutions, are accessible to and include persons with disabilities requires consideration of their specific needs throughout the refugee process. Explicit procedures for identifying persons with disabilities are vital to ensure that they are not overlooked during identification and registration processes.

Systems to monitor and refer persons at heightened risk must be established to ensure that persons with disabilities have access to all services, including humanitarian assistance, education, livelihoods, health care, and SGBV prevention and response mechanisms. Systems to identify resettlement needs should also include partnerships with local organizations engaged with persons with disabilities.

Awareness-raising activities to emphasize the rights of persons with disabilities help to counter attitudes that may contribute to their marginalization. Include persons with disabilities, family members and caregivers in outreach activities and information campaigns to ensure that the concerns of persons with disabilities are taken into consideration. A disability is only one aspect of the attributes of any human being, and persons with disabilities should be considered for durable solutions, including resettlement, on an equal footing with other refugees.

As with other resettlement cases, eligibility and priority level of refugees with disabilities must be verified and determined through a resettlement interview. While refugees with disabilities are a vulnerable group, not all refugees with disabilities are in need of resettlement and each case needs to be evaluated on its own merits.

Resettlement of Refugees with Disabilities: Operational Considerations

Refugees with disabilities must be consulted on their wishes for durable solutions. Their dependency on support from family members and other caregivers must always be considered to ensure that family unity is preserved. However, **the choice of a durable solution for someone who has a disability should not be determined by the status or resettlement need of their caregiver(s), but on their own needs and wishes.**

Persons with disabilities may have their **case submitted under any of the resettlement submission categories.** They may be the member of the family with the strongest resettlement need, or may be dependants in the family unit. In some situations, an

⁷ UNHCR, *Conclusion on refugees with disabilities and other persons with disabilities protected and assisted by UNHCR*, No. 110 (LXI) - 2010, 12 October 2010, No. 110 (LXI) - 2010, <http://www.unhcr.org/refworld/docid/4cbeaf8c2.html>

individual's disability might expose her/him to heightened risk or severe discrimination necessitating resettlement to provide legal and physical protection. If medical needs related to disabilities seriously threaten the person's safety or quality of life, and cannot be treated locally, resettlement on grounds of medical needs may be required. Persons with disabilities may also meet the requirements for resettlement as survivors of violence and/or torture, women or girls at risk, or children at risk; may require resettlement for family reunification purposes; or may lack a foreseeable alternative durable solution.

Some resettlement States have restrictive admission policies that may exclude some persons with disabilities. However, in all instances, **individuals who are legitimately part of a family structure, including family members with disabilities, must be submitted together for resettlement.** UNHCR staff must follow the definitions and policies set out in the *Resettlement Handbook*, specifically as related to the concept of dependency in the identification of family members, despite the fact that UNHCR definitions may not always correspond with those applied by the State to which the resettlement case is submitted. The State's decision-making and departure processes must be closely monitored to ensure that dependent family members, including persons with disabilities, are resettled together. This may require withdrawing the case from a State that does not accept the entire family.

To ensure that the individual's specific needs are addressed, the resettlement submission must include detailed information about the type of assistance required by the person with disabilities in transit and after arrival, including any required medical or psychological treatment. The **level of support required will vary according to the individual's specific capacities and needs.** Some may require life-long support for their daily functions. Others are well adjusted to their disability, and may only require extra support on a short-term basis to become familiar with their new environment and to access available services.

Step 1: Identification of the resettlement need

To ensure that persons with disabilities are considered for resettlement on an equal footing with other refugees, the identification process must be accessible and non-discriminatory.

Identification of specific needs at registration, and regular updating of *proGres*

- Ideally, persons with disabilities should be identified at registration and their specific needs should be registered in *proGres*. However, some impairments are not easily identified, and individuals may choose not to discuss them during registration. Impairments identified later should be added to *proGres*.
- All colleagues including protection, RSD, community services and resettlement staff, should use *proGres* proactively, and records of specific needs, including disabilities, must be updated regularly to track individual refugees from registration until the implementation of a durable solution.
- Severe discrimination against refugees with disabilities can be persecution, and may indicate a resettlement need.

Raise awareness among staff

- Appoint a staff member to raise awareness, monitor disability issues, and ensure that team members and colleagues are sensitive to the importance of ensuring refugees with disabilities not only have access to services and supports, but are also included when assessing durable solutions. This includes establishing standard operating procedures for home visits if required to accommodate persons with disabilities.

- Develop information fact sheets regarding local terminology related and interpretations of disabilities, particularly mental health issues, to use in training.

Raise awareness among the refugee community

- Conduct awareness-raising activities to emphasize the rights of persons with disabilities and include messages about non-discriminatory access to resettlement in resettlement information materials. Include persons with disabilities, family members and caregivers in outreach activities and information campaigns.

Use appropriate information, dissemination and communication

- Use appropriate forms of communication and clear messaging to ensure that information is accessible. For example, use simple language to communicate with persons who have an intellectual disability, sign language if used by deaf persons, picture formats and visual demonstrations for those who cannot hear well, and radio and spoken communication for those with visual impairments.
- Ensure that family members and caregivers are aware that alternate arrangements can be made to interview persons with disabilities who cannot attend regular interviews.

Establish referral systems

- Establish referral partnerships with organizations that are actively engaged with persons with disabilities, and could identify refugees with disabilities who may require resettlement to meet their protection needs.
- Work with partners

Monitor the protection environment as it relates to the well being of refugees with disabilities

- Stay abreast of political, legal, social and economic developments in the country of asylum. Deterioration in the protection environment and supports available to refugees may have a disproportionate impact on refugees with disabilities, increasing their need for resettlement.

Assessing the appropriateness of other durable solutions

- Consider that persons with disabilities risk being excluded from support and services when repatriating, and from opportunities for self-reliance and local integration.

Medical assessments

- Refugees who are well adjusted to their disability and are functioning at a satisfactory level are generally not considered for submission under the medical needs category, but may still require treatment or support after resettlement. In these cases, a medical report documenting the disability may be useful for assessing treatment options for some disabilities, and also for ensuring that resettlement countries have accurate information.
- Submission under the medical needs category is appropriate only when disabilities seriously threaten the refugee's safety or quality of life, and when such disabilities cannot be treated locally or regionally. Standard medical assessments forms⁸ (MAFs) are required for submission on the grounds of medical needs.

For more information on tools and methodologies for the identification of resettlement needs, please refer to the *UNHCR Resettlement Handbook*.

⁸ UNHCR, *Revised UNHCR Medical Assessment Form (MAF) and Guidance Note*, IOM/044-FOM/044/2010, (Internal) UNHCR Intranet. English, French, Spanish and Chinese versions of the MAF are posted to the Resettlement page on the Intranet.

Step 2: Conducting the Resettlement Interview

- Information about the interview must be conveyed in an accessible form. Family members and caregivers must be informed of the option of timely alternative arrangements for persons with disabilities who are not able to attend a regular interview.
- In preparing for the interview, the specific needs of individual members should be considered to assess whether specialized interpreters or aids are required. Extra time may need to be allocated in the interview schedule to accommodate refugees who have difficulties expressing themselves, or require sign language or other interpretation.
- All accommodations must be made during the interview to enable refugees with disabilities to participate and ensure that their wishes and needs are considered fully.
- Interviewers and interpreters must be sensitive to the needs, rights and dignity of refugees with disabilities to ensure they are shown respect and understanding.
- The interview may be a useful opportunity to confirm or update details about the disability that may already have been gathered through other protection interventions. This includes information about caregivers, and level of support, if any, required to meet daily needs.

Step 3: Completion of the Resettlement Registration Form

- Detailed information on the physical or mental health conditions, specific needs, and type of assistance required must be included in the RRF. This information is crucial to ensure that appropriate support and treatment is provided in the resettlement country.
- It is important to pay attention to the language used in the RRF. Below are some examples of language to avoid and suggestions of preferred wording:

Language to avoid:	Preferred language:
the disabled, the handicapped (avoid saying 'the' anything)	people with disabilities
person who is physically challenged	person with mobility impairment
cripple, physically handicapped, wheelchair bound, or confined to a wheelchair	a person with a physical disability, or a person with a physical impairment a wheelchair user
spastic	a person with cerebral palsy
retarded	a person with learning difficulties developmentally delayed
mongoloid, Down syndrome person	a person with Down syndrome
deaf and dumb	a person with hearing and speech impairments
the deaf	deaf people, deafened people people with hearing impairment or hearing loss
the blind	blind people / visually impaired people persons with visual impairments
crazy per son, unhinged, mad, unstable, "schizoid"	person with mental health issues person diagnosed with a mental disorder person diagnosed with a psychiatric disorder <i>or: use the specific terms of the diagnosis</i>

- Ensure that dependants with disabilities are not separated from the family unit. Some resettlement countries may require the submission to be divided into several linked RRFs, but UNHCR must monitor the process closely to ensure family unity.⁹
- The disability may be part or the entire basis for the refugee claim. If the persecution of persons with disabilities is resulting from severe discrimination, the refugee claim could include an argument for cumulative discrimination rising to the level of persecution.

Step 4: Identification of the Resettlement State

- State selection criteria should be considered when identifying an appropriate resettlement country. Some States have discriminatory criteria that bar the admission of refugees with certain disabilities, or have specific quotas limiting their admission.
- The availability of supports or treatment required after arrival in a particular State must also be considered. Persons with disabilities are not homogenous, and the assistance required by an individual depends on their specific capacities and needs. As the State makes the decisions regarding final destining of resettled refugees within their territory, UNHCR ensure that there is sufficient detail included in the RRF for the State to accurately assess the refugee's disability and support and service needs.
- All members of the family must be submitted and resettled together, including persons with disabilities. Although a State may require that a family be divided into individual cases, UNHCR must carefully document the dependencies, and monitor the processing to ensure that persons with disabilities are not separated from family members and caregivers.
- If a State makes a "split decision", which threatens to separate dependent persons with disabilities, UNHCR will consider withdrawing the case, and resubmitting the entire family to a new resettlement State.¹⁰

⁹ UNHCR, *Operational Guidance Note on Resettlement Case Composition*, June 2011, (Internal) <http://swigea56.hcrnet.ch/refworld/docid/4dc7aa0d2.html>

¹⁰ For guidance on withdrawals, see UNHCR, *Guidelines on the Resubmission of Resettlement Cases*, June 2011, (Internal) <http://swigea56.hcrnet.ch/refworld/docid/49818ae73a6.html>

RESETTLEMENT ASSESSMENT TOOL: PERSONS WITH DISABILITIES

The following four steps should be followed to assess the resettlement needs of persons with disabilities, and guide the preparation of the resettlement submission. See the attached User Guide for more details.

Step 1: Identification of the resettlement need

Step 2: Conducting the resettlement interview

Step 3: Completion of the Resettlement Registration Form (RRF)

Step 4: Selection of the resettlement State

Step 1: Identification of the resettlement need

Accessibility of the process		Yes / No / N/A
1.1	Refugees with disabilities are registered, and any specific needs related to a disability are entered into <i>proGres</i> .	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
1.2	Refugees with disabilities are included in assessments of protection needs, such as participatory assessments and the application of the Heightened Risk Assessment Tool (HRIT).	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
1.3	Referral partnerships to identify refugees with resettlement needs include organizations actively engaged with persons with disabilities.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
1.4	Appropriate forms of communication and clear messaging are used to ensure resettlement information is accessible to persons with disabilities. This may include: <ul style="list-style-type: none"> <input type="checkbox"/> Radio and audio messaging for those with visual impairments <input type="checkbox"/> Picture formats, visual demonstrations, or sign language as appropriate for refugees with hearing impairments <input type="checkbox"/> Simple language to communicate with persons who have an intellectual disability 	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
1.5	Alternate arrangements have been made to access persons with disabilities who cannot attend regular interviews.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Remarks:		
Resettlement need		Yes / No / N/A
1.6	A person with a disability has a protection need or vulnerability that warrants a resettlement assessment. This may relate to their disability, or other life circumstances.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Remarks:		
1.7	A member of the family on which the person with a disability is dependent has a protection need or vulnerability that warrants a resettlement assessment.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Remarks:		

1.8	How the disability affects the refugee’s ability to repatriate in safety and dignity or locally integrate in the long-term is considered when assessing the prospects for durable solutions.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Remarks:		
1.9	Medical reports have been prepared for the refugee with the disability. A Medical Assessment Form (MAF) is prepared if a submission under the Medical Needs category is considered.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Remarks:		

Step 2: Conducting the resettlement interview

Preparing for the interview		Yes / No / N/A
2.1	<p>The specific needs of persons with disabilities should be reviewed when preparing for the interview to assess whether specialized preparation or support is required. This may include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> An accessible interview location, or home visit if required <input type="checkbox"/> Scheduling longer interview time to accommodate those who have difficulties expressing themselves, as well as the extra time required for sign language or other interpretation <input type="checkbox"/> Ensuring a trained interviewer with experience in interviewing persons with physical or mental disabilities is available <input type="checkbox"/> Arranging sign language interpretation, ensuring that it is the same version as that used by the refugee 	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Remarks:		

Conducting the interview		Yes / No / N/A
2.2	All accommodations are made during the interview to enable persons with disabilities to participate and ensure that their wishes and needs are considered fully.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Remarks:		

Step 3: Completion of the Resettlement Registration Form (RRF)

RRF		Yes / No / N/A
3.1	<p>If the resettlement State requires the submission of adult dependants on separate cases:</p> <ul style="list-style-type: none"> <input type="checkbox"/> All cases of family members/caregivers are cross-referenced and listed in Sections 1 and 3 of each RRF. <input type="checkbox"/> Dependencies are clearly explained in Section 7, particularly if the caregiver is not a blood relative <input type="checkbox"/> The need for the entire family to travel together to ensure that the person with disabilities is not separated from their caregiver(s) is stressed in Section 7. 	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

RRF (continued)		Yes / No / N/A
3.2	<p>Section 2: Individual bio-data</p> <ul style="list-style-type: none"> <input type="checkbox"/> All specialised education or skills training is listed under “Education” or “Occupation/Skill” as appropriate. <input type="checkbox"/> If the refugee speaks sign language, this is included under “Language”, noting specifically whether it is International Sign or another form of sign language. <input type="checkbox"/> The disability and any other specific needs are listed under “Specific Needs”. 	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
3.3	<p>Section 3: Relatives not included in this submission</p> <ul style="list-style-type: none"> <input type="checkbox"/> If the refugee is being submitted as a linked cross-reference case, the family members of the linked case(s) are noted. <input type="checkbox"/> If applicable, the refugee’s current and potential primary caregivers are listed, noting the relationship in the “Comments” under the caregiver’s bio-data. <input type="checkbox"/> If the refugee has a legal guardian, the legal guardian(s) is listed, noting this in the “Comments” under the guardian’s bio data. 	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
3.4	<p>Section 4: Refugee Claim</p> <ul style="list-style-type: none"> <input type="checkbox"/> If the disability is part of all of the basis for the refugee claim, this is explained in section 4.1 “<i>Summary of the Basis of the PRA’s Refugee Recognition</i>” and in section 4.2 “<i>Summary of the Legal Analysis</i>”. Relevant country of origin information (COI) is included. <input type="checkbox"/> A separate statement of the individual’s refugee claim is included for each person on the case aged 18 or over, including for persons with disabilities listed as dependants of the PRA. 	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
3.5	<p>Section 5: Need for Resettlement</p> <ul style="list-style-type: none"> <input type="checkbox"/> 5.1 <i>Lack of Prospects for voluntary repatriation or local integration</i>: How the disability affects the refugee’s ability to repatriate in safety and dignity, and impedes opportunities for self-reliance and local integration is explained. <input type="checkbox"/> 5.2 <i>Resettlement submission category and prioritization</i>: Any links between the refugee’s disability and the primary (and secondary) submission category and to the priority level are explained. <input type="checkbox"/> If the case is submitted under the “Medical Needs” category, the findings of the MAF are referenced including: <ul style="list-style-type: none"> <input type="checkbox"/> How the disability presents a serious obstacle to leading a normal life, puts the individual at heightened risk, or is worsened by the situation in the country of asylum <input type="checkbox"/> Details about the treatment, rehabilitation, or other supports required but not available <input type="checkbox"/> The prognosis for the improved health or quality of life after receiving the required treatment, rehabilitation or other supports <input type="checkbox"/> Confirmation of the individual’s consent, or the consent of their parent, caregiver or guardian. 	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

RRF (continued)		Yes / No / N/A
3.5	<p>Section 5: Need for Resettlement (continued)</p> <p><input type="checkbox"/> 5.3 <i>Emergency or Urgent submissions</i>: The need for urgent or emergency processing is justified.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
3.6	<p>Section 6: Specific Needs Assessment</p> <p><input type="checkbox"/> Information is provided about all disabilities, ensuring that:</p> <ul style="list-style-type: none"> ○ Details about any disability not sufficiently explained elsewhere are provided ○ All available medical documentation is included (a resettlement State might request a MAF even if the case is not submitted under the Medical Needs category) ○ Psychosocial or other assessments prepared by UNHCR Community Services or a partner organization are referenced and attached. ○ Details of any specific type of assistance, supports, treatment, or rehabilitation required upon resettlement are provided. Any support required during travel is highlighted. ○ Information about the individual’s caregiver arrangements is included, if applicable. 	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
3.7	<p>Section 7: Additional Remarks</p> <p><input type="checkbox"/> The dependency link between adults is explained in detail and supported with documentation, including person with disabilities over the age of 18, and caregivers or guardians, particularly if they are not blood relatives.</p> <p><input type="checkbox"/> The dependency between cross-referenced cases and the need for the family members to be processed and travel together is clearly explained.</p> <p><input type="checkbox"/> The inability of an adult with disabilities to give consent, and the name of the guardian signing the declaration on their behalf is noted.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
3.8	<p>Section 8: Declaration</p> <p><input type="checkbox"/> All individuals over the age of 18, including persons with disabilities, have signed the declaration. Fingerprints are taken from individuals who are able to give consent but are not able to provide signatures.</p> <p><input type="checkbox"/> The refugee’s guardian has signed for any person with a disability not able to give consent.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
3.9	<p>Section 9: Attachments</p> <p>The following documents are listed and attached:</p> <ul style="list-style-type: none"> <input type="checkbox"/> All medical reports or psychosocial assessments <input type="checkbox"/> A MAF, if the case is submitted under the Medical Needs submission category. <input type="checkbox"/> Documentation of any legal guardianship arrangements for an adult with disabilities <input type="checkbox"/> Other documentation required by the circumstances of the case- e.g. a Best Interests Assessment (BIA), or Best Interests Determination (BID) for a child with disabilities at risk. 	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

Step 4: Selection of the resettlement State		
State criteria and supports		Yes / No / N/A
4.1	State selection criteria, or quotas restricting the admission of persons with disabilities are reviewed.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<i>Remarks:</i>	
4.2	The specific type of assistance, support, treatment, or rehabilitation required upon resettlement is available in the selected resettlement State.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<i>Remarks:</i>	