

Inclusion of persons with disabilities and Humanitarian Action in Yemen

Persons with disabilities are among the most marginalized in crisis-affected communities.⁽¹⁾ They are disproportionately affected in situations of risk and face multiple barriers in accessing protection and humanitarian assistance. In Yemen, other groups at high risk of discrimination include women and girls, older people, internally displaced people (IDPs), and ethnic or religious groups such as the Muhumashen.⁽²⁾

The inclusion of persons with disabilities must be mainstreamed in the Yemen humanitarian response. Inclusion requires **commitment, dedicated resources, deliberate and proactive action in all phases of the intervention** from all actors to mainstream the inclusion of persons with disabilities from all constituencies.

Most of all there is a clear need for **disaggregated data** including age, gender, and disability indicators to better **understand the needs** of persons with disabilities and other groups at risk of discrimination and the **barriers to services** they experience.

Needs in Yemen

The number of persons with disabilities pre-conflict was estimated to be **three million people**.⁽³⁾ Since the conflict began more than **1 million additional people have been identified with specific needs**, including persons with disabilities, female and child heads of households, unaccompanied elderly, survivors of trauma, and other women and children at risk.⁽⁴⁾

After five years of war, the rate of **conflict-related injuries, psychological trauma, and malnutrition** have increased substantially, leading to a higher rate of persons with disabilities in the country.

Limited Resources for Inclusion

■ Yemen ratified the Convention for the Right of Person with Disabilities (CPRD) in 2009 but the National strategy on disability has achieved little in terms of meaningful participation. The impact of the conflict has further disrupted national momentum on inclusion.

■ Only 51% of Yemen's health facilities are fully functional.⁽⁵⁾ Those that are functioning do not provide sufficient services for persons with disabilities, those requiring rehabilitation, or having special needs.

Urgent Concerns

Lack of Data: Persons with disabilities are invisible in existing data. Most humanitarian actors collect data only on age and gender which does not provide enough information to assess disability or excluded groups. There is a need for both quantitative and qualitative information on the needs of persons with disabilities and the barriers to inclusion they face.

Access Restrictions: Data collection is heavily restricted in

Gaps in Humanitarian Response

Inclusive humanitarian response means ensuring that the needs of groups at risk of discrimination are taken into consideration and the risks they face are mitigated. Doing so requires deliberate actions to change the **processes of planning, delivering and monitoring humanitarian action**.

An initial assessment of forty humanitarian organizations in Yemen found that **nearly every single organization lacked dedicated resources to meet the specific needs of persons with disabilities:**

- 95% of organizations do not disaggregate beneficiaries' data by disability and do not consider the specific needs of people with disabilities in their humanitarian interventions.
- 85% of organizations have not developed any specific activity, project or policy to address the specific needs of people with disabilities and other most vulnerable.
- 73% reported that their staff lacks knowledge and skills necessary to provide a gender, age and disability sensitive humanitarian response.

In discussions with populations at risk including persons with disabilities, HI has found:

- 81% felt that they were unable to reach or use humanitarian services.
- 86% experienced problems in accessing the services due to a combination of barriers including physical access, economic, social or cultural discrimination, lack of information, and safety during travelling.
- 50% felt that the way that available services are delivered did not respect people's dignity and that their opinion was not considered by humanitarian workers.
- 17% reported they have been involved in decision-making processes about the services delivered in their community by humanitarian organizations.

Yemen. Every governorate in Yemen is considered hard to reach for direct identification of beneficiaries. Humanitarian actors are not permitted to lead in the identification of the most vulnerable including persons with disabilities, older people, women and minority groups. For example, in 58% of the districts assessed through the Integrated Food Security Phase Classification the UN must rely on beneficiary lists from other sources.⁽⁶⁾

At the same time, beneficiaries are constrained from accessing services due to long distances between communities and available services, lack of financial resources necessary to afford travel, and the impact of

1. Report of the United Nations Secretary-General for the World Humanitarian Summit. One Humanity, Shared Responsibility. 2016, 22.

2. Muhumashen are a historically ostracized community in Yemen that suffer from caste-based discrimination. The group falls outside established tribal and societal structures.

3. OHCHR. "Yemen conflict death toll nears 650, with UN rights office spotlighting the plight of 3 million disabled." 5 May 2015.

4. OCHA. Yemen Humanitarian Needs Overview. 2019. 45

5. OCHA. Yemen Humanitarian Needs Overview. 2019. 4

6. Humanity & Inclusion, Inclusion Task Force. "Rapid Response Mechanism-RRM practices analysis." 2019.

conflict on transportation routes.

Protection Risks: With a lack of data comes a heightened risk of violence and abuse against persons with disabilities whose protection risks are not adequately monitored in protection monitoring mechanisms. Without data, services may not be adapted in a way to be accessible nor developed in order to promote the autonomy and dignity of people in need.

Humanitarian Actors Knowledge of Inclusion: Disability inclusion is still not fully understood by actors in the field. It can be viewed as complex, time-consuming and expensive

in emergency programming. All organizations must invest and commit to mainstreaming inclusion by internalizing non-discriminatory assistance to ensure the protection of all population groups in line with the CRPD, humanitarian principles, and the Charter of Inclusion of Persons with Disabilities in Humanitarian Action.

Long-term Vulnerabilities: Contamination from extensive use of explosive weapons and the presence of mines across Yemen means that risks of conflict-related disabilities, including physical and psychological trauma, will remain in Yemen for decades even after the conflict ends.

Immediate Recommendations

All stakeholders: donors, States, UN agencies and other involved parties should:

- Demand increased collection, analysis, and dissemination of data on the situation of persons with disabilities and their dignified access to humanitarian services which is essential information to plan an inclusive humanitarian response.
- Ensure that all people affected by the crisis, including persons with disabilities:
 - Are identified and consulted early on and at every stage of the project cycle so that their needs and concerns are articulated and addressed in the response
 - Are included throughout the Humanitarian Planning Cycle (HPC) in each sector response plan,
 - Can be identified by sector data disaggregated by sex, age and disability.
- Ensure that local partners, who have the greatest access to beneficiaries including persons with disabilities and other at-risk groups, respond to specific indicators mandating inclusion.
- Systematically call on all parties to armed conflict to take all feasible steps to ensure the protection of all civilians, including persons with disabilities, in line with provisions of International Humanitarian Law and the UN Security Council resolutions on the protection of civilians (1894, 2175, 2286, and 2417), as well as thematic resolutions including on persons with disabilities in armed conflict (2475).
- Support the development of a strong political declaration to end human suffering caused by the use of explosive weapons. Explosive weapons used in populated areas injure large numbers of civilians and cause impairments and long-term contamination risks.

Donors Should:

- Ensure that there are dedicated resources available for humanitarian partners to engage persons with disabilities and

representative organizations, older people, and women.

- Require all humanitarian partners, including local partners, to report on indicators for inclusion to motivate all actors to internalize a commitment to inclusion. For example, in Yemen, ECHO has a specific objective for all partners to report on inclusion. Donors should make clear that an inclusive humanitarian response requires further resources, and explicit long-term commitments, alliances with specialized actors, and indicators to measure achievements.

Long-term Recommendations

All stakeholders: donors, States, UN agencies and other involved parties should:

- Commit funding that prioritizes projects and partnerships that support increased evidence on the needs of persons most at risk including persons with disabilities.
- Encourage all actors to use the UN approved Washington Group questions when collecting data on persons with disabilities. The analysis of this data will facilitate the inclusive actions toward identified persons with specific difficulties in functioning.
- Continue to support capacity strengthening initiatives for humanitarian actors to ensure that humanitarian response and policies are inclusive of persons with disabilities.
- All humanitarian actors need to take deliberate and proactive action in all phases of the humanitarian response to ensure that persons with disabilities and other groups at risk of discrimination are systematically included and can meaningfully participate in humanitarian programming well as people on the move such as IDPs are prioritized as a target for Risk Education and other support.
- Prioritize Risk Education to high-risk governorates that have experienced active conflict.



Inclusion of persons with disabilities in humanitarian action

The Charter on Inclusion of Persons with Disabilities in Humanitarian Action

Launched at the World Humanitarian Summit in 2016, the Charter provides a policy framework on the inclusion of persons with disabilities in humanitarian action. Endorsed by more than 230 stakeholders including States, UN agencies, NGOs, and organizations representative of persons with disabilities (DPOs), it is a major step forward by the humanitarian community in recognizing the need to integrate persons with disabilities into humanitarian response.

IASC Guidelines on Inclusion of Persons with Disabilities in Humanitarian Action

The recently launched IASC Guidelines, designed for use by

national, regional and international humanitarian actors, set out essential actions to take in order to effectively identify and respond to the needs and rights of persons with disabilities who are most at risk of being left behind in humanitarian settings.

UN Security Resolution 2475

Resolution 2475 is the first-ever resolution from the Security Council on the protection of persons with disabilities in armed conflict. The resolution calls on calling upon Member States and parties to armed conflict to protect persons with disabilities in conflict situations and to ensure they have access to justice, basic services and unimpeded humanitarian assistance.



This document covers humanitarian aid activities implemented with the financial assistance of the European Union. The views expressed herein should not be taken, in any way, to reflect the official opinion of the European Union, and the European Commission is not responsible for any use that may be made of the information it contains.