

Inclusive Livelihoods Programs for Early Recovery

The conflict in Syria has led to **economic devastation**, an **alarming prevalence of injuries and disabilities**, and **poor psycho-social well-being** for the majority of the Syrian population.

Households in Syria generally need **all family members to generate income**, but suffer from the fact that **persons with disabilities, women and young people** are precluded from developing the necessary skills and mindset to be able to effectively participate in the workforce. Moreover, **movement restrictions** related to the **COVID-19** pandemic further restrict people's access to livelihood opportunities.

Urgent Concerns

Before measures to mitigate and contain the effects of COVID-19 were put in place:

- **1.9 million people** were at risk of **food insecurity** and a further **7.9 million** were already food insecure, which is a **20% increase** compared to 2019;⁽¹⁾ **4 out of 5** people lived in **poverty**,⁽²⁾ and **8.7 million people** were in need of **Early Recovery and Livelihoods support**;⁽³⁾
- **6.1 million people in Syria** were neither in **employment nor any kind of education** or training, and the **unemployment rate was 78% amongst young people**.⁽⁴⁾ This has severe consequences for human capital, a mere **51% of the pre-crisis workforce** is now available,⁽⁵⁾ and will lead to a shortage of critical skills well into the future;⁽⁶⁾
- A **shortage of electricity**, the **high price of fuel**, **prohibitively high costs of transportation**, the **continuing devaluation of the Syrian pound** and limited connectedness across internal and external markets further diminish economic production and exchange.

Moreover:

- Some economic activity, like **agricultural work**, is impeded by **contamination with explosive ordnance**: between January and October **2019** there were, on average, **184 explosive incidents per day**, and **11.5 million people are at risk** of exposure to explosive

1. Food Security and Agriculture Sector, Syrian Arab Republic, 2020

2. UNICEF, Fast Facts Syria Crisis, August 2019, available online at: <https://www.unicef.org/mena/reports/syria-crisis-fast-facts>, last accessed 21 February 2020

3. Humanitarian Response Plan, Syrian Arab Republic, 2019

4. Ibid.

5. Syria Economic Sciences Society, UNDP, 'Employment and Livelihood Support in Syria', December 2018, available online at: http://www.sy.undp.org/content/syria/en/home/library/Employment_and_Livelihood_Support_in_Syria.html, last accessed 21 February 2020

6. Ibid.

hazards;⁽⁷⁾

- **In December 2019 6.1 million people**, which is approximately one third of the population, were **internally displaced**⁽⁸⁾ and more economically vulnerable due to loss of social and economic networks. The devastating economic impact of the crisis on Syrian households and communities may lead to **increased community tensions** unless both IDPs and host communities are equally supported for livelihood interventions;
- The conflict has decimated the Syrian economy and **destroyed economic systems and networks amongst communities**: cumulative losses in Syria's gross domestic product (GDP) from 2011 to end 2016 equal around four times the Syrian GDP in 2010, estimated at \$226 billion.⁽⁹⁾ This has a graver and longer-term predicted impact than even the physical destruction.

Livelihoods programming promotes **dignity and independence** for households by enabling them to again become self-reliant, instead of having to rely on humanitarian assistance to meet their basic needs.

Livelihoods programming can also have a wider impact on **revitalising communities and markets** by restoring key economic infrastructure such as marketplaces, **improving the supply** and **reducing prices** of essential items, increasing purchasing power within communities, and, thereby, reviving stagnant economic flows within local markets.

Further, supporting livelihoods is a critical element of **enhancing social cohesion** within communities, as conflict dynamics are often linked with reducing standards of living and competition over scarce meaningful economic opportunities.

Livelihoods programs remain underfunded in the Syrian response. Therefore, HI calls for an urgent review of funding for livelihoods activities in Syria.

7. UNMAS briefing to the UN Security Council, 24 October 2019

8. UNHCR, 'Operational Update Syria December 2019', available online at: <https://www.unhcr.org/sy/wp-content/uploads/sites/3/2020/02/UNHCR-Syria-Operational-Update-December-2019.pdf>, last accessed 21 February 2020

9. World Bank, 'The Toll of War: The Economic and Social Consequences of the Conflict in Syria', July 2017, available online at: <https://www.worldbank.org/en/country/syria/publication/the-toll-of-war-the-economic-and-social-consequences-of-the-conflict-in-syria>, last accessed 21 February 2020

Urgent Disability-related Concerns

- A recent study conducted by the UN Humanitarian Needs Assessment Programme for Syria shows that **27% of Syrians live with a disability**, almost **double the global average** of 15%. The percentage shoots up for **people aged 40 and above (56% live with a disability)** and **heads of households (33% live with a disability)**;⁽¹⁰⁾
- Persons with disabilities are marginalised and **disproportionately affected during disaster and conflict situations**, and they are also at increased risk in the **COVID-19** pandemic due to: the need for close contact with personal assistants/care givers; increased risk of infection and complications due to underlying health conditions; and socio-economic inequalities, including poor access to health care;
- Persons with disabilities face **attitudinal** as well as **physical** barriers from accessing skills training and employment. Moreover, there are virtually **no after-care services available** for people that have undergone treatment for an injury and since, for example, **access to prosthetics and orthotics equipment** is extremely limited, people living with injuries and disabilities often have to **depend on their families** for all of their basic needs;
- Households with a family member that has an injury or disability have **fewer family members that can work for an income and higher health-related costs**. This significantly increases their risk of poverty. A survey conducted in Syria in 2017 by a consortium of humanitarian agencies showed that:
 - 50% of households with a disabled family member suffered from **poor food consumption**, compared to 34% for households without persons with a disability;
 - households with one or more members with a disability had, on average, nearly **\$200 more debt** than other households;
 - households with one or more members with a disability were **more likely to engage in negative coping strategies**, such as parents eating less so children can eat more, and selling food to buy medicine or other essential items;

An Inclusive Response

- An inclusive humanitarian response is a **core**

10. UN H NAP, 'Disability: prevalence and impact', available online at: http://www.globalprotectioncluster.org/wp-content/uploads/Disability-Prevalence-and-Impact_FINAL-2.pdf, last accessed 21 February 2020

The IASC Guidelines on Inclusion of Persons with Disabilities in Humanitarian Action

The Guidelines on Inclusion of Persons with Disabilities in Humanitarian Action were endorsed by the Inter-Agency Standing Committee (IASC), the primary global mechanism for inter-agency coordination of humanitarian assistance, in October 2019. They provide guiding principles for better inclusion of persons with disabilities in humanitarian action and set out essential actions that all humanitarian actors must take in order to effectively identify and respond to the needs and rights of persons with disabilities. After the paradigm shift that was introduced by the Convention on the Rights of Persons with Disabilities (2006), which changed policy and policy implementation from a charitable and medical approach to one based on rights, and the Charter on Inclusion of Persons with Disabilities in Humanitarian Action (2016), the IASC Guidelines are an important step in mainstreaming and operationalizing inclusive practises.

Inter-Agency Standing Committee, 'Guidelines on Inclusion of Persons with Disabilities in Humanitarian Action', October 2019, available online at: <https://interagencystandingcommittee.org/iasc-task-team-inclusion-persons-disabilities-humanitarian-action/documents/iasc-guidelines>, last accessed 21 February 2020

component of principled and effective humanitarian action: inclusion of persons with disabilities is a cross-cutting concern that lies at the heart of a non-discriminatory and principled emergency response. It is rooted in the humanitarian principles of **humanity** and **impartiality** and the human rights principles of **equity** and **non-discrimination**;

- An inclusive humanitarian response recognises that **for every group that is marginalised or vulnerable, there are strategies to address their particular needs**, so as to overcome particular barriers in their accessing services;
- All people affected by a crisis have **the right to equal and dignified access to humanitarian assistance** based on their needs and without discrimination. They have the right to also be involved in an equitable manner in decisions that concern them.

Inclusion of persons with disabilities must be strengthened in the Syrian humanitarian response, in terms of both protection and assistance.

Account from humanitarian organisation working in the field about someone who was injured and now lives with a disability:

20 year-old Osama is a car mechanic but was unable to continue doing this work after an airstrike left him with severe injuries to his left arm and hand. As a result he was also unable to continue providing a steady income for his wife and two daughters.

Osama's passion for fixing things and the need to find an alternative source of income made him enthusiastic about learning to do mobile phone repair and maintenance, so he decided to participate in a training organised by a local NGO. At first his injury made it very difficult for Osama to use the equipment and tools to fix the devices. However, through a combination of physiotherapy and adaptations to his work environment, for example the placement of thick pads on the tools' handles to make them easier to hold, Osama was able to overcome these difficulties. Osama managed to finish the training, and opened a successful mobile phone repair and maintenance shop.

An even bigger achievement is that he now also works as a trainer in the program that taught him, and is able to pass on his skills, positive attitude and strength to others in his situation. With some support and adaptive tools Osama was able to overcome the impediments of his disability, and he is now optimistic about his professional future and that of his trainees.

Recommendations

Donors should:

- continue to provide funding for the **ongoing humanitarian response while scaling up the COVID-19 response**, and show flexibility when it comes to **program extensions** and supporting **essential staffing costs** when organizations need to suspend non-essential activities;
- make available **recovery-focused, longer-term funding** in order to enable livelihoods actors to implement more sustainable solutions to poverty alleviation and economic growth for Syria;
- prioritise funding for programs that focus on **restoring economic and social networks**, therewith increasing incentives to engage in productive economic activity with the potential to re-establish critical economic systems;
- prioritise funding for programs that strengthen the **nexus approach** in Syria by: identifying and supporting opportunities for introducing development principles into livelihoods programming; **advocating people-centered action**; and **promoting local capacity** development and ownership while respecting humanitarian principles;
- be **more adaptive** in the way they manage grants, taking into account the still **dynamic and evolving context** in Syria, and giving humanitarian actors **sufficient scope to adapt** locations, types of livelihoods activities implemented and partners supported;
- encourage all actors to **use the UN-approved Washington Group questions** when collecting data on persons with disabilities, to facilitate inclusive action toward identified persons with specific difficulties in functioning;
- ensure **considerations related to disability are taken into account** in project review and prioritization and prioritise funding for **inclusive humanitarian programs** by: **reserving a set percentage** of livelihoods funding for inclusive livelihoods activities; making **explicit long-term commitments**; supporting the formation of alliances with specialised actors in programs; including indicators to measure the inclusiveness of programs they fund.

Humanitarian actors should:

- **adopt participatory, integrated approaches** across different sectors of intervention such as health, livelihoods and civil society strengthening to **improve socio-economic impacts on households and communities**;
- assess contextual risks regarding potential land contamination by explosive remnants of war, and make **mine risk education an integral part of livelihoods programming** in areas of possible contamination;
- **address both supply and demand dynamics** within labour markets, balancing an expansion of employment opportunities and household purchasing power with approaches scaling up skills strengthening and business creation;
- **increase the application of the graduation model**, i.e. strengthening capacities of vulnerable households to progress from dependence on humanitarian assistance towards developing skills and assets, which eventually enable them to become self-reliant in

meeting their basic needs;

- generate and **share greater evidence and learning** on approaches such as market-based interventions that have the potential to amplify socio-economic impact for households and communities, specifically within the complex and protracted Syrian crisis context;
- **improve coordination** with other specialised actors within target areas to **increase the scale and impact** of programming for beneficiary households. For instance, seek specialist support to improve the **integration of persons with disabilities** into existing livelihoods programmes, increase **referrals across sectors** to address specific needs such as prosthetics and orthotics, physical rehabilitation and protection;
- **identify persons with disabilities in the communities** in which they work in order to include them in activities, and ensure **activities are accessible** for all persons with disabilities which includes physical access and diverse communication methods as well as integrated case management of the most vulnerable persons;
- **include persons with disabilities** in every stage of the project cycle by ensuring that they are identified and consulted with **throughout the Humanitarian Planning Cycle (HPC)** in each sector response plan;
- adapt project design to **make livelihoods services more inclusive**: this can be done by decentralising service sites, doing home-based beneficiary registration, providing individualised support to enhance participation and engagement through case management, and giving flexible options for participation in various activities;
- **disaggregate data** by sex, age and disability;
- work towards the **full implementation of human rights frameworks** and reaffirm the implementation of the **commitments of the Charter on Inclusion of Persons with Disabilities in Humanitarian Action** by **mainstreaming disability inclusion** through all processes and policies.

And in response to COVID-19:

- ensure that **persons with disabilities receive information** about infection mitigating tips, public restriction plans, and the services offered **in a diversity of accessible formats**, including: easy-read format; high contrast print and, where possible, braille; and use of available technologies such as subtitles in verbal messaging;
- ensure **access** for persons with disabilities to **essential services and protection on an equal basis** with others by considering specific needs such as:
 - diverse communication methods;
 - personal assistance/care provided by another person;
 - need for physical personal contact to support daily activities and independence and therefore additional hygiene considerations and supplies;
 - physical accessibility to structures (particularly WASH and health);
 - equal access to distributions through diversity and relevance of items and adapted distribution techniques;
 - equal access to financial support and adapted and safe methods of delivery.

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