



# Disability Inclusion in the Syrian Refugee Response in Lebanon

## EXECUTIVE SUMMARY

Over 1.6 million refugees have fled Syria since the conflict started two years ago, with almost one-third seeking protection in Lebanon alone. Persons with disabilities remain one of the most vulnerable and socially excluded groups in any displaced community, and they may have difficulty accessing humanitarian assistance programs, due to a variety of societal, environmental and communication barriers. This increases their risk of protection concerns, including violence, abuse and exploitation. As humanitarian agencies scale up responses to meet the ever-growing and complex needs of populations displaced by the crisis in Syria, it is critical that persons with disabilities are included in and have access to humanitarian assistance and programs.

This report presents the key findings and recommendations from a four-week field assessment conducted by the Women's Refugee Commission (WRC) in northern and eastern Lebanon in March 2013, and follow-up workshops with UNHCR staff and partners conducted in May 2013. The WRC consulted with over 80 humanitarian actors and 120 refugees during field visits. Consultations involved a combination of group discussions in community centers and visits to homes and tented settlements to conduct interviews.

### Key Findings

Most persons with disabilities living in the Lebanese communities are able to access UNHCR registration, through a combination of static registration centers, "in absentia" and mobile registration strategies. Persons with injuries and new impairments in the North, are often admitted to local hospital facilities on arrival in the country. These individuals and hospital staff in contact with them have expressed confusion about registration systems, and a lack of information about fast-track processes and services available upon registration.

Due to resource limitations and the emergency nature of the response, health partners are only able to cover the costs of urgent and life-saving procedures. In some cases, refugees are paying for surgical and rehabilitation services, depleting what limited funds they have and adding to the financial strain on them and their families. Persons with new disabilities are generally unable to access longer-term rehabilitation that might in turn support their access and inclusion in community services and programs. At present, these longer-term health and rehabilitation needs, which we can anticipate will increase as the conflict in Syria continues, are not fully reflected in response planning.

Registration and protection staff, NGO outreach workers and case managers alike often view persons with disabilities through a medical model, failing to recognize social factors that may increase their vulnerability to protection concerns, and require a more comprehensive case management approach. This is particularly the case for persons with severe intellectual impairments and new physical disabilities, who may be isolated or hidden in their shelters.

There are, however, some positive developments in integrating disability into trainings for humanitarian staff, and some agencies have started to consider ways in which they can adapt their programs to promote access and inclusion. Positive strategies noted in this assessment include:

- Discussion groups being conducted in women's centers with women who have children or husbands with disabilities to explore their challenges and concerns, and share strategies.
- Partnerships between UNHCR partners and local disabled people's organizations to improve the accessibility of community centers.

- Plans to launch vocational training for men with newly acquired disabilities.

There are also opportunities to consider both inclusive education and community centers in the longer-term planning, benefitting both Syrians and Lebanese persons with disabilities. The following recommendations address key gaps in the current humanitarian response for persons with disabilities, and we hope they will inform both near term and longer-term planning.

## Recommendations to UNHCR and Partners

Recognize the needs of persons with new impairments in longer-term response planning, particularly holistic rehabilitation that will optimize functional independence, promote community inclusion and reduce protection risks.

Pilot and evaluate guidelines for identifying risk and prioritizing the most vulnerable persons with disabilities for case management. This will ensure equitable access to assistance and services as the response and available resources change.

Integrate disability into training for registration and protection staff, outreach workers and case managers, with a focus on comprehensive assessment of risk and vulnerability, direct counseling and facilitation, targeted referral to specialized agencies for specific interventions and ongoing monitoring according to risk.

Support the Government of Lebanon to advance inclusive education for children with disabilities, through partnerships with the Ministry of Education and direct technical support to school directors and local teachers at municipal levels. Draw on the experience of local disabled people's organizations, supporting both Lebanese and Syrian children with disabilities to be integrated and included in public schools.

Promote and monitor inclusive community centers through strategies to make current activities more accessible to persons with disabilities and their families. In the longer-term, plan targeted activities that might address some unmet specific needs of persons with disabilities. As UNHCR and its partners upscale community mobilization, it is critical to consider how refugees with disabilities will be represented in committees and refugee outreach activities. This could be achieved through the following approaches:

- Support persons with disabilities and their families to form self-help groups and appoint representatives which can be involved in community-level committees.
- Link these groups to local DPOs which may be able to support their capacity development on the rights of persons with disabilities in Lebanon.
- Recruit persons with disabilities as refugee outreach volunteers, using the self-help groups to identify interested individuals.

Include indicators on inclusion of persons with disabilities as part of reporting protocols with implementing partners. Capture positive examples of inclusion and the impact on protection of persons with disabilities.

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Full report and workshop resources can be downloaded at: <http://wrc.ms/13ynujG>.

For more information, contact: Emma Pearce, Women's Refugee Commission [emmap@wrccommission.org](mailto:emmap@wrccommission.org).

Acknowledgements: This work was undertaken by the Women's Refugee Commission with the support of One Billion Strong and the Australian Agency for International Development (AusAID). Thank you to all UN agencies, NGOs, civil society organizations and Syrian refugees for their contributions during the field visit.



**WOMEN'S  
REFUGEE  
COMMISSION**

122 East 42nd Street  
New York, NY 10168-1289  
212.551.3115  
[info@wrccommission.org](mailto:info@wrccommission.org)

[womensrefugeecommission.org](http://womensrefugeecommission.org)