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# Persons with disabilities in armed conflict

July 13, 2023, Access / Analysis / Conduct of Hostilities / Disabilities / Generating Respect for IHL / Humanitarian Action / Persons with disabilities

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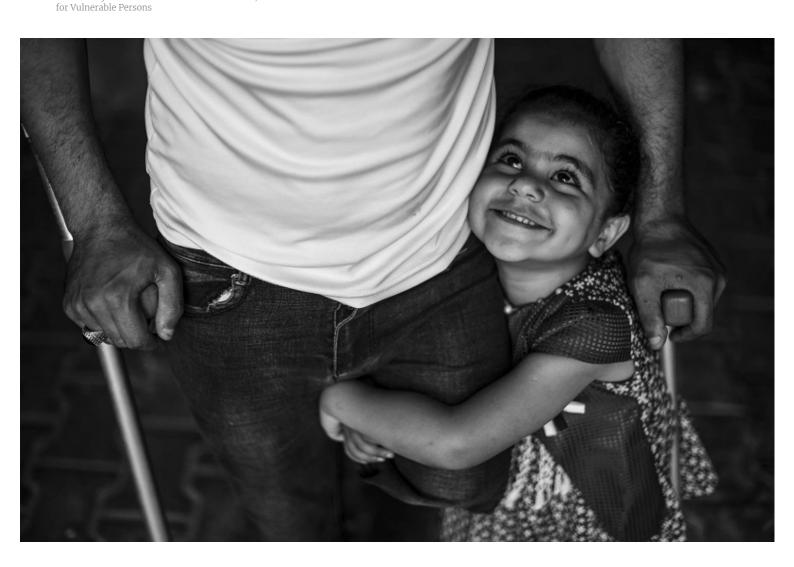
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Persons with disabilities constitute approximately fifteen percent of the global population – a figure that only rises during crises. Armed conflicts, in particular, generate new disabilities, exacerbate the existing barriers faced by persons with disabilities, and expose the whole community to greater harm. Yet, the experiences of persons with disabilities in armed conflict and the effects of armed conflict on this population are sorely understudied. In addition, discussions of the effects of armed conflicts on persons with disabilities have too often failed to include the voices and perspectives of that community.

A recent edition of the International Review of the Red Cross aimed to reshape the landscape, comprising thirty thought-provoking contributions, including many authored by persons with disabilities. In this episode of **Humanity in War**,

podcast host Elizabeth Rushing sat down with Nawaf Kabbara, Veronica Ngum Ndi and Michael Ng'aa Mwendwa to take stock of the legal protections (and lack thereof) for persons with disabilities in armed conflicts and reflect on how to move the legal and policy debates forward in the next few years.

Humanity in War · Episode 13: Persons with disabilities in armed conflict

Nawaf, I would like to begin with you. By way of a brief introduction for those who do not know, Nawaf Kabbara is the president of the National Association for the Rights of Persons with Disabilities in Lebanon, and the president of the Arab Organization of Persons with Disabilities. He is also a member of the International Disability Alliance Executive Committee and of Disabled People's International Executive Committee.

You recently spoke during the 16th session of the conference of state parties to the Convention on the Rights of Persons with Disabilities, where you are quoted as saying, "Persons with disabilities do not come at the end. We are not a checkbox to be ticked. We must be included at the beginning." Could you tell me what experience was this quote referring to and what is the reality of persons with disabilities caught up in armed conflict?

Nawaf: Thank you very much, Lizzie. Let me first start with another quote, that I said it in the opening session. I said to them that disability is not a statistic. It's not 4%, it's not 16%. It is 100% because it is a progressive phenomenon. Every one of us, in this or any other cycle of our life, has to face a certain type of disability. So, whatever we're doing now is not for a certain percentage of the population. It's not for a particular community. It's for every one of us because every one of us will need it one day or another in our everyday life cycle.

Secondly, based on that, how would we know what are the issues or concerns for persons with disabilities? Here, you must go and talk to people with chronic disability. People that have the experience, they have lived in this situation, and they know exactly what is needed to be done. In this regard, it's not a question for an expert to come and tell us how to live. It's a question of us telling them how we feel to be able to live with dignity and inclusivity in society. What are the barriers? What kind of problems? And how do we solve them? And what are our demands to make life acceptable and honorable for persons with disabilities? The solution to the issue is a total consultation, on every aspect of policies, of legislation, and of programs, strategies, and implementation of projects. Without this, we come out with an implementation that is far from perfect.

Now, let me go to the third aspect of your question. It is 'disability' that pushes you into a position, where you understand what conflict does to people, that you have lived the experience of conflicts, and that you are the result of conflicts. You either die or you come out with a disability to live with all your life. And in this situation, it is a conflict that comes out, creates all these troubles and all these problems. I also said in the opening session that if we see how much money has been spent in the last two years on wars and conflicts, if this money was spent on the development and implementation of the sustainable development goals (SDGs) or dealing with the climate change, imagine where the world would be now.

That's why the disability movement played a major role in the war, pushed for peace, and highlighted the question of human rights. That's why, you have seen many experiences, including mine, in my country — a real fight for persons with disability against continuous violence, continuous wars, and continuous conflicts.

What's resonating with me is, "Don't tell us how to live; listen to how we feel", calling for a genuine and comprehensive consultation process from start to finish and highlighting the consequences of not doing so in a very stark way. This is all wisdom that is grounded in reality. You are now globally recognized since leading the march against the war in Lebanon by persons with disabilities in 1987. Could you please tell us a little bit about that experience and how it shaped your own path?

Nawaf: Let me start by saying that the idea was started by a student at the university who in 1984 called for a meeting of civil society against the war in Lebanon. And the idea was that everyone will join in a place cross-lined between two fighting militias. One day before the event, the boss militias on both sides started to bombard the place of the meeting. That was a clear indication of how much the warriors were bothered by such kind of a civil movement. We did not give up. So, it just happened that at that time in 1984, I saw Gandhi's film, and in this film, Gandhi marched a long way to produce salt, against the British Empire. From this, I had the idea of why not have Lebanese people moving from north to south to show real civil resistance to the continuation of the war. And then, because of logistical problems with such kind of a proposal, we thought, why not have the persons with disabilities as symbols of the war. And that's how it started.

We started preparation in 1984. In 1985, we decided to do some sort of a small march in preparation for the big one. And while we were in the streets of Beirut, clashes erupted between two militias. We were in the middle when the fighting started, and I will never forget these moments of my life. And then in 1987, we were able to gather in the north of Lebanon in the city of Halba, and we marched for three days from north to south against the war. We started as a group of one hundred. We reached the south with around five thousand people walking with us and waiting for us. We were stopped in every village, in every town, in every city. And after this, other groups in civil society got the inspiration, the power, and the courage to go down and demonstrate. On the 9th of November of the same year, there were three-hundred-thousand people in Beirut saying no to the war. And that was the beginning of the end of the war, which was put to an end in 1989.

The most important of it is that persons with disabilities came out as a very active, social force, capable of playing a major role at the national level. And this was the turning point in how society saw disability. Instead of saying to them, you must go to the institution, for the first-time society was in front of a challenge of a group that told them we are much more active, productive, and capable than you are. And they had to deal with that situation and that reality.

I'd like to turn to Veronica now. Veronica Ngum Ndi is the Chief Executive Officer for the Community Association for Vulnerable Persons (CAVP), in the Santa subdivision in the northwest region of Cameroon. She has a long history of being active in local, national, and international humanitarian and community work. In her work, she focuses on the rights of women and girls with disabilities, women and girls with HIV and AIDS, including teens and single mothers. She is passionate about promoting sexual and reproductive health rights, education, and empowerment, providing information and communication technology, and positive use of the internet to avoid online and social media violence towards women and girls.

#### Based on your experience, what are the main obstacles to humanitarian assistance for girls and women with disabilities?

Veronica: The main obstacles that women and girls with disabilities face is that they are not consulted or, they don't conduct needs assessment to clearly identify their needs and prioritize them during humanitarian interventions. Humanitarian assistance policies are very rigid. They fail to take into consideration the diversity of disability, based on type and degree. Distribution sites are inaccessible and specific measures are not put in place to consider the needs of persons with disabilities. For example, those persons with disabilities that manage to reach distribution sites, face challenges with accessibility, they make them stand in the queue like every other person. They don't take into consideration the fact that they would have challenges transporting the goods back to their homes. Then, those who have no means to leave their homes because of inaccessibility, don't take into consideration, that they need to reach them at their homes.

But as a disability leader, I am very flexible. I investigate those details and those specific needs, and I can receive, or I provide assistance to those who cannot leave their homes. I take it to them in their homes, then I take some pictures, do an interview or a small video for verification. The available assistance does not reach those who need it the most. There are some women and girls with disability that are locked up in far-off communities and they have not been displaced. Assistance is so concentrated in the city area, where they are the host communities for most internally displaced persons (IDPs).

So those who are really in need and are situated in hard-to-reach areas, assistance has not reached them. Organizations of persons with disabilities or Disabled People's Organizations (DPOs) are not subcontracted nor given the opportunities to take the lead in their own interventions, thereby reducing all persons with disabilities to be at the receiving end. They are not given the opportunity to be partners. Meanwhile, if we take the lead in our own interventions as persons with disabilities, we will clearly understand the specific needs we will go through. We will be very flexible because we understand the diversity of disability based on degree and time.

I am hearing a common trend already in this conversation, which you have just echoed. What Nawaf said is the severe lack of consultation, being told needs instead of listening to what they are. I am starting to hear about the lack of flexibility and adaptation in the humanitarian sector as well. You are also starting to touch upon what you and your organization have been able to do despite these challenges. It seems you have had the strength and clarity to seek out solutions. So, could you describe some of the empowerment opportunities you have come across in your work? And I won't ask for a formula for success, but what has worked in your experience?

Veronica The empowerment opportunities that I have come across in my work is belonging to networks. I am a member of the Care Women's Actions for Better Advocacy (WABA). And it gives me the role to be a gender and disability-inclusive development advocate in my community in this humanitarian context and report back to Care monthly. So, with my role in that network, I am very conscious to be disability-specific and intentionally identifying the needs of women and girls with disabilities, and advocating for them to access humanitarian assistance, which is also giving my organization some capacities and giving my work feasibility.

My organization is also part of the gender-based violence (GBV) sub-cluster of the United Nations Population Fund (UNFPA) in the northwest region of Cameroon, and they also give us access to good opportunities. I have been assigned by the United Nations High Commissioner for Refugees (UNHCR) in 2022 to identify and submit names of women and girls with disabilities that will benefit from direct cash assistance and a good number of them were supported. So, several times over the years since the crisis, UNFPA has provided us with dignity kits specifically targeting women and girls with disabilities. We have been partners with the Martin Luther King Foundation in Cameroon in a recent project in that we provided eight women with startup micro-grants, but all this is not enough. Such a project can only provide eight women the opportunity to have micro-grants; it's not enough because it will not reach many.

I would say disability is very diversified and progresses over time due to age, and sometimes health situations. So, I don't think there is any specific formula to meet the needs of persons with disabilities and women with disabilities, but if they apply flexibility and the concept of universal design for interventions and take into consideration that policies of humanitarian interventions should be flexible – they should bring in persons with disabilities from the identification to monitoring and evaluation stages in the project cycle – for it will work well.

What has worked for us is advocacy with service providers and humanitarian actors has enabled them to understand that when they are doing humanitarian interventions, there are specific needs that persons with disabilities have, that are not just generalized as they always do. Through our advocacy, women with disabilities have had access to mental hygiene and dignity kits. They have had access to food and non-food items assistance, and some of them have had access to justice, but the challenges are still enormous. Access to justice is expensive, it is slow.

Turning to you now, Michael. Michael Ng'aa Mwendwa is the Disability Inclusion Advisor here at the ICRC's headquarters in Geneva. He has over 15 years of experience in disability inclusion, having worked with local and international disability inclusion organizations in Kenya prior to joining the ICRC in June 2020.

I'd like to talk a little bit about your experience before joining the ICRC. Does the situation that Nawaf and Veronica laid out for us resonate with you with your own work and what you experienced during your time with local disability inclusion organizations in Kenya?

Michael: Thank you so much for that question. Before joining the ICRC in June 2020, I worked with local and international organizations of disabilities in Kenya, and what Nawaf has shared together with Veronica resonates with my experiences, both as a person with a disability in situations of armed conflict, as well as a humanitarian worker.

Now, first, I would like to agree with Nawaf that persons with disabilities in situations of conflict are not just a statistic, but a reality of the situation. For me, and I've been reflecting on this even for a very long time is that not including persons with disabilities in conflict, or when we are addressing

situations of conflict, means that we are potentially leaving out about 1/3 of the population affected by conflict. Of course, which goes against the principle of humanity, it goes against the principle of impartiality, in armed conflict and other situations of violence.

Now the situations that Veronica and Nawaf have presented are very close to my experience, therefore, to my heart, because without generalizing them, I have experienced them either as a person or in my work. They have sighted physical accessibility challenges of persons with disabilities, and this is something that is actually very common, especially in situations of conflict, because what happens in such situations is that infrastructure is destabilized or destroyed. At times, we think about infrastructure just as infrastructure, but on the other side, we can actually think about how an impairment becomes an accessibility challenge during the conflict.

I'll give my own example whereby once we had, I found myself in a situation of a bit of conflict, when we had some internal skirmishes and therefore the policemen were chasing us all over, trying to contain the situation; and me, being a person with visual impairment due to albinism, of course, just like the other population, I was forced to run about amidst the trenches. As my visual acuity was being restrained as well as my visual field, I could not see these trenches, and I remember, I stumbled several times before the police got hold of me and beat me thoroughly. I got serious injuries at that time, and I was hospitalized for quite a few weeks.

This means that when persons with disabilities are fleeing conflict or fleeing attacks, they are susceptible to injuries. That is another way of looking at physical accessibility barriers. When I was working in Kenya, in an area where we were intervening with some of the local organizations for persons with disabilities, we heard of a situation, whereby one of the families that had a girl child with an intellectual impairment, was tied to some sort of a structure to restrain her.

This method of constraining persons with intellectual impairments, especially in the global South, is a very common issue. And of course, it goes against all the laws of humanity, and it's not right. So, when the bandits came attacking, everybody fled. But this girl who was tied in inside the house somewhere was not able to, seek refuge and therefore, when the bandits came, they subjected her to sexual violence.

These are just two of the examples that I can give, and this is the reality. So, when we say that persons with disabilities are not just a statistic in situations of conflict, but it's a reality that should be considered by each and everybody. That means that persons with disabilities in situations of conflict face lots of challenges in terms of accessibility, lack of information, or improper information. Some, we have had Nawaf and Veronica talking about empowerment of organizations, of persons with disabilities. Most people have an attitude against persons with disabilities that, we are not allowed to make our own decisions – because disability in some cases is associated with some sort of deficiency, which is not true. So, what Nawaf and Veronica said, I state this again resonates with my own experiences, both as a person with a disability as well as a humanitarian worker.

Fast forwarding from that past experience to the last few years here, could you please talk about your role and what the ICRC is doing to respond better to the barriers that we have talked about today by face by persons with disabilities in armed conflict?

Michael: My role at the ICRC as the Disability Inclusion Advisor is to coordinate the organizational strategy on disability inclusion, inspired by many years of interventions in situations of conflict. The ICRC has packaged lots of evidence, including the statistics that we have just mentioned and other forms of evidence of exclusion of persons with disabilities, and therefore when we ask ourselves, what the ICRC is doing to better respond to the barriers that we have just mentioned. There are quite a number of interventions, and I will list just a few.

I will try to group these interventions both as external as well as internal interventions within the ICRC. Now externally, we as an organization are continuously advocating, networking as well as promoting the participation of all the parties, including persons with disabilities, that have an interest or in one way or another, are related to the conflict. Now that we have this, we are aligned with the international best practice standards and laws and this is the purpose of our advocacy and networking.

Firstly, just to give an example, my colleagues and I are in constant discussions, considerations, and awareness raising of the interrelationship between the Convention of the Rights of Persons with Disabilities (CRPD), and the international humanitarian law (IHL).

The ICRC, externally, is a signatory to the Charter on Inclusion of Persons with Disabilities, and here in Geneva, we are part of the group that, we call ourselves the group of friends on the Charter on Inclusion of Persons with Disabilities to promote the aspirations of this particular Charter.

Then, on the same length externally, the ICRC is a member of the Inter-Agency Standing Committee (IASC) on the guidelines of inclusion, of persons with disabilities. And under this, we have the Disability Reference Group that we are part of, and we have also made various other commitments, for example in the Global Disability Summit of 2018 and 2022, just last year, on persons with disabilities.

Now, why am I saying this? I'm saying this because as an organization, we are holding ourselves accountable to all these commitments. As an organization, we are not an island on our own, in issues of disability and disability inclusion, and therefore this is important because continuously, externally and also internally we hold ourselves accountable to these particular commitments.

I am clinging to what you are saying is that all these commitments, everything from the Charter on Inclusion to the IASC guidelines is about holding ourselves accountable to these commitments.

With regards to the ICRC strategic orientation to disability inclusion and keeping in mind the challenges that Nawaf and Veronica outlined earlier, can you tell us frankly what's worked so far and what really needs readjusting in your opinion?

Michael: Good question. First of all, the ICRC orientation to disability inclusion, when we talk about this strategic orientation, has been a long journey for the ICRC, because it didn't start yesterday, but many years ago in the history of the ICRC. Perhaps not very prominent then, but of course the current strategy on disability brings it into focus. Historically, before the year 1979 and I will tell you why I'm referring to the year 1979, the ICRC has been

offering assistance to persons affected by conflict. Then, in 1979, the ICRC put in place what we call the Physical Rehabilitation Program (PRP) and the purpose of this program was and still is to rehabilitate victims of war.

This was a very important step in those early years to disability inclusion, albeit the fact that this particular intervention then was just based on the medical approach to disability inclusion. Over the years, what happened is that the ICRC has continued together with the Movement. The breaking point on disability inclusion for the ICRC was in June 2020 when the ICRC was able to develop and ratify Vision 2030 on Disability. Vision 2030 on Disability is an organizational strategy that seeks to transform the way the ICRC addresses disability inclusion in situations of conflict.

This institutional strategy has four pillars. The first pillar is focusing on disability-inclusive programming. The second pillar focuses on the inclusive physical rehabilitation program that I just mentioned that was started in 1979. The third pillar focuses on internal processes; you know, inclusive human resources. And the fourth pillar focuses on IHL and disability inclusion. That is how this strategy is conceptualized, and we are implementing this strategy in three phases.

The first phase which ended between 2021 and 2022 last year, is based on raising awareness as well as developing guidelines for the organization on disability inclusion. We are now in the second phase, 2023 to 2025, where we are seeking to influence practices and policy within the organization. And then, of course, in the third phase, 2026 to 2030, we will be able to consolidate learnings and solidify all these policies that we have developed.

On the last part, we still have some challenges, just to be honest. But we are cognizant of the fact that we are learning from these challenges and that the learning is continuous. First of all, the challenge is putting these guidelines and the learnings from capacity building into practice, because some of our colleagues still see disability inclusion as a "new initiative", therefore out of the workload that our colleagues have, they say that perhaps it is "too much work".

It's a very rich response and one that is really useful to know, Michael, because I don't think a lot of people really have access to a look under the hood of what we do at the ICRC. So, thank you for so eloquently outlining what we do and for being honest about how we could do better.

I'd like to take that part specifically back to the group, back to Nawaf and Veronica, and ultimately with a question about international humanitarian law because what we are talking about today is the situation of persons with disabilities in the context of armed conflict. And of course, that's where international humanitarian law applies.

IHL, as you know, has rules governing armed conflicts and the protection of civilians, which includes, persons with disabilities. The fundamental principles of IHL, regulating the conduct of hostilities, which are notably distinction, proportionality, and precaution remain important in the protection of persons with disabilities and armed conflict, including using a disability lens when analyzing and respecting these principles.

This means that parties to conflict have to avoid attacking hospitals and institutions that house and care for persons with disabilities. It means that combatants and fighters must distinguish between fighters and civilians and must not attack persons with disabilities for not understanding or obeying orders, which has been seen in past conflicts, unfortunately. And then the proportionality assessment of every attack must take persons with preexisting disabilities into account, as well as consider the new physical and mental disabilities such attacks may cause.

Military commanders must also consider that 15% of any given population in an area are persons with disabilities before ordering attacks. And that's just a statistic, as Nawaf and Michael both pointed out fluctuates with any given context.

With that in mind, my question is how can we do better? How can humanitarian organizations like the ICRC who are really the guardian of international humanitarian law, how can we better support organizations of persons with disabilities in boosting their own capacity on international humanitarian law and dialogue with the military?

Nawaf: Let me say first that in addition to international humanitarian law, there is also Article 11 of the CRPD that clearly states the responsibility of states to deal with disability in the situation of crisis and conflicts. Now, if you look at the actual experience on the ground now, we have the recent Ukrainian crisis, and this situation, if we look at the report that was produced by the International Disability Alliance (IDA) and the European Disability Forum (EDF) on the situation of persons with disabilities in Ukraine. If we look at what happened after the earthquake in Turkey and Syria and if we look at the report coming from Amnesty International, we do not get a good image of the implementation of Article 11 and international humanitarian law.

At this point, it seems that humanitarian programs are not inclusive of persons with disabilities. That's why when they start from, for example, in the Syrian conflict, when we had lots of refugees coming, one of the major problems was that when they were where they were organizing camps for them, the camps were not accessible, and imagine a person with a physical disability with the wheelchair — they don't have access to a toilet, they do not have access a good accommodation in that area and not even a place where they can move around. It was really a disaster and still is a disaster situation.

With a temperature of -4 degrees during the night in both Syria and Turkey, they could not go to a shelter because the shelters were not accessible; the humanitarian support was mostly food, tents, clothes, and covers, but nothing very important for a person with disabilities, like a wheelchair, cushion, and other necessary stuff for their everyday life. There is this gap that we have to work out and that has to be done *a priori*, it should be organized, thought of *a priori*, that then if you introduce it to the system, everyone knows ahead of time what is to be done in case of any crisis that may erupt. So yes, we have to work on these very important laws in situations of crisis, war, and conflict. We must see how these are implemented practically on the ground.

#### Veronica, do you have anything to add to that advice?

Veronica: The problem with Cameroon is that we have policies that are well written on paper. Cameroon will say they have ratified the CRPD and then the policies that are promoting the rights of persons with disabilities, but they don't put it into practice.

They need to give feedback to the international community if they are really promoting their policies to favor persons with disabilities as it is needed. However, they will tell lies, and give fake reports, and persons with disabilities do not know that they can do shadow reports and fake presentations because persons with disabilities have limited access to information. The opportunities come first to the government's top-ranking officials and offices in Cameroon so that they will be the ones to disseminate it to communities of people in need. However, these officers choose to manage this aid in their own way, creating their own new community-based organizations (CBO), instead of redirecting it to the already existing networks and CBOs.

We also don't have enough information on international humanitarian law. How we should go about it, who to meet to receive support, to ensure that we advocate for the proper things to be done for us, and our right to respect it. There is no information dissemination for us in Cameroon and there are a lot of administrative bottlenecks that make us feel limited in our access to the right information.

#### See also:

- Alexander Breitegger, "Towards a disability-inclusive IHL: ICRC views and recommendations", July 6, 2023
- Victoria Riello, "Nothing about us without us": including civilians with disabilities in the aftermath", November 15, 2022
- Helen Durham, Gerard Quinn, "Lifting the cloak of invisibility: civilians with disabilities in armed conflict", April 21, 2022

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