

2024 Legal Needs Assessment: Persons with Disabilities in Northwest Syria

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Cover photo: *A view from a special education centre prepared for children with disabilities on July 27, 2022 in Idlib, Syria. © Muhammed Said / Anadolu Agency via AFP.*

Please note that the research for this report was gathered before the fall of the prior Syrian government on 8 December 2024. Despite the changes in context since, the contents regarding persons with disabilities' legal needs remain relevant.

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Introduction

An estimated one in every four individuals in Syria has a disability, as per a 2021 Humanitarian Needs Assessment.¹ This is almost double the global average.² In northwest Syria, an estimated 28% of people are living with a disability due to war-related injuries, among other causes, and the absence of cohesive strategies, resources, and services to address their needs.³

This assessment examines obstacles and challenges persons with disabilities face related to obtaining civil and housing, land and property (HLP) documents in northwest Syria to better understand existing needs and effective responses.

Background

Globally, persons with disabilities face discrimination and barriers in accessing basic rights and essential services. These hurdles become more pronounced during times of upheaval and unrest. **In Syria, the conflict and economic crisis have increased the burdens persons with disabilities face,⁴ and increased the prevalence of disabilities due to war-related injuries and/or mental health trauma.⁵** In 2015, four years into the war, UNICEF reported more than 1.5 million adults and children in Syria had acquired a disability due to the conflict.⁶ A July 2024 assessment from the Northwest Syria Protection Cluster, which centred on older persons (ages 60 +), stated that 53% of the 988 survey participants reported having some form of disability, including mobility impairments, visual disabilities, limitations in self-care, hearing loss, and communication difficulties.⁷

Additionally, the collapse of infrastructure throughout the conflict increased the lack of access to essential services and thus Syrians' ability to meet their basic needs.⁸ Destruction or loss of public transportation limiting movement options particularly posed a challenge for displaced populations living in remote camp settings.⁹ A March – April 2024 assessment from the Northwest Syria Protection Cluster found that a significant number of the 53 respondents with disabilities faced challenges in accessing basic services such as healthcare, education, and sanitation, with 47% reporting inaccessibility, and only 16% confirming equal access to services.¹⁰

The conflict also magnified the burden on healthcare services as many medical facilities and equipment were destroyed;¹¹ leaving the healthcare system in northwest Syria fragmented, under resourced, and understaffed.¹² A 2023 report from the Syrian American Medical Society found that the top barriers faced by persons with disabilities in accessing health services in northwest Syria included transportation; specifically, financial difficulties in covering the cost of transportation, medicine, and medical services, and lack of access to information on available and free services.¹³

Persons with disabilities also commonly face social stigmas, exclusion, and/or discrimination,¹⁴ which further impedes their ability to exercise key social and economic rights, such as obtaining education and/or employment, and contributes to their further denial of services.¹⁵

Intersectionality reveals how overlapping identities shape distinct experiences of discrimination as women and children with disabilities are particularly affected by compounded discrimination, exploitation, and violence, including sexual and gender-based violence (SGBV) or gender-based violence (GBV).¹⁶ Women with disabilities face heightened risks due to cultural norms that limit their marriage prospects and reinforce their social exclusion, while children with disabilities are often excluded from education and play, in addition to facing neglect more often than their peers.¹⁷ Children with disabilities further face large hurdles in accessing education, as formal schools are generally not adapted to them.¹⁸ Even if a child does not have a disability themselves, if they share a household with someone who does, they are more likely to engage in labour to help provide for the family's needs.¹⁹ Girls with disabilities face compounded risks and experience a double burden of discrimination — both as children and as females with disabilities — placing them at greater risk of early marriage, trafficking, and GBV. Furthermore, older women with disabilities face unique challenges including caregiving burdens, financial dependency, and heightened protection risks such as psychological and emotional abuse.²⁰

Legal Protections

In July 2024, the former government of Syria introduced Legislative Decree no. 19, which aimed to improve the conditions of persons with disabilities; protect them from discrimination, abuse, or exploitation; and ensure their full integration into society.²¹ The decree includes a range of rights including the right to life, right to freedom of movement, access to healthcare, equal opportunities to education, participation in political life, and other legal protections.²² It also lists measures such as tasking the Ministry of Health with ensuring accessible healthcare and tasking the Ministry of Education with guaranteeing free and inclusive education for children with disabilities.²³

Despite these promises, the decree faced criticism due to a lack of implementation mechanisms and accountability measures to hold public institutions accountable if they did not meet their obligations.²⁴ Previously, the former government had law no. 34 of 2004 though they amended this law to Decree no. 19 which was more in line with the International Convention on the Rights of Persons with Disabilities, to which Syria is a party.²⁵

The new transitional government is in the process of reviewing prior legislation, so it is not completely clear if Legislative Decree no. 19 will remain in place or if it will be amended. However, it is critical that any new legislation includes specific and actionable legal and institutional protections for persons with disabilities.

Methodology

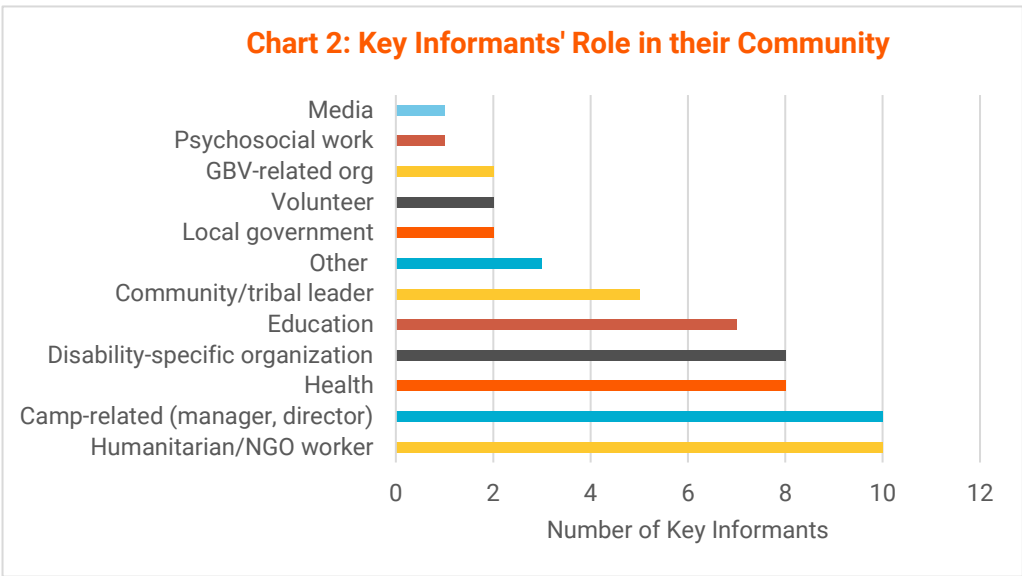
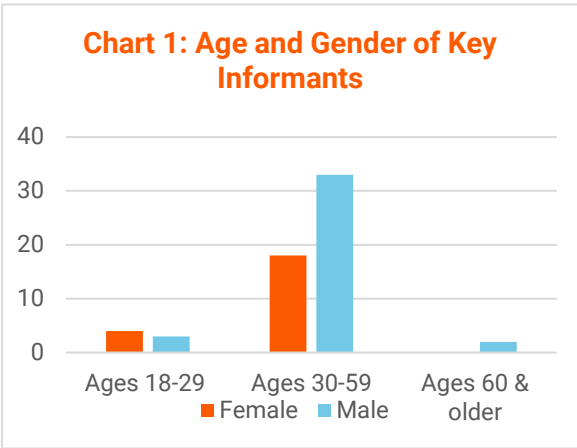
Data Collection

In October 2024, NRC conducted data collection for this assessment in Idlib and Aleppo, Syria. Data collection had two components: (1) surveys with key informants, including community leaders and key sector leaders in northwest Syria, and (2) surveys with households (HHs) of persons with disabilities. Data collated from both sources was analysed using the weighted average.

1. Key Informants Survey

A total of 60 key informants were surveyed, 51 in-person and the remaining nine via phone. All key informants surveyed play a key role in their community, including camp management/directors; humanitarian workers, healthcare workers; education sector employees; employees in organizations that work with persons with disabilities; or other critical sectors (*see Chart 2*). **All key informants surveyed were aware of persons with different types of disabilities in their community, and twelve of the 60 key informants (20%) surveyed were persons with disabilities themselves, with reported disabilities such as** difficulties with vision, hearing, walking, and/or memory and concentration. Roughly 52% of key informants were host community members, while 48% were internally displaced persons (IDPs).

63% of key informants were male, while 37% were female (*see Chart 1*). 82% of key informants live across various areas and villages of Idlib, including Harim, Idlib District, and Jisr-Ash-Shugur, while the remaining 18% of key informants are from Jebel Saman, Aleppo.



2. Households (HH) Survey

In addition to the 60 key informant interviews, 104 household (HH) surveys were conducted; 78 in-person and 26 via phone. 41% of households were members of the host community, while the remaining 59% of households were IDPs or returnee IDPs. Out of the 104 households surveyed:

- **46 surveys** → were done **directly with a person with disabilities**;
- **34 surveys** → were done **directly with individuals who are part of a HH** with 1-3 family members **under 18** with a disability;
- **11 surveys** → were done **directly with individuals who are part of a HH** that has 1-2 family members **above 18** with a disability;
- **9 surveys** → were done **directly with an individual with a disability who also has 1-2 individuals in their HHs above 18** with a disability;
- **4 surveys** → were done **directly with an individual with a disability who also has 1-2 individuals in their HHs under 18** with a disability.

Similar to the key informants, 83% of the surveyed households were from Ariha, Jisr Ash Shugur, Harim, or Idlib in the Idlib governorate, while the remaining 17% were from Jebel-Saman, Aleppo.

Identification of Persons with Disabilities

The *Washington Group Short Set on Function* was used to determine if the individual surveyed or a household member had a disability. The questions use the World Health Organization's International Classification of Functioning, Disability, Health, and focus on vision, hearing, mobility, cognition, self-care, and communication.²⁶

Classification of Barriers

Barriers in the survey were classified into the five barriers listed below:

- **Attitudinal barriers:** barriers such as discrimination, stigma, and/or prejudice, reflected in the behaviour, perception, or attitude of others towards the person with disabilities.
- **Communication barriers:** barriers that prevent persons with disabilities from fully communicating via hearing, speaking, reading, writing, and/or understanding.²⁷
- **Institutional barriers:** barriers in policies or laws (systematic level) that unfairly discriminate against persons with disabilities in activities.²⁸
- **Financial barriers:** barriers that prevent a person with disabilities from accessing resources due to limited-to-none economic/financial means.
- **Physical barriers:** barriers that prevent or block mobility, or lack inclusiveness, such as lack of ramps in places with stairs.²⁹

Limitations

There are limitations to note with this data collection. While surveys provide a one-on-one setting for a candid conversation with the respondent, respondents may have a bias in responding in a way they believe is favourable to humanitarian actors. Additionally, some may not want to answer more culturally sensitive questions, particularly around protection incidents of violence and/or GBV. In parallel, while the sample size was chosen to ensure representation, it may not be reflective of the entire area or different needs in specific areas of northwest Syria, particularly since the data draws on responses from Idlib and Aleppo, Syria, not the entire northwest region of Syria.

Lastly, the research for this report was gathered before the fall of the prior Syrian government on 8 December 2024. Despite the changes in context since, the contents regarding persons with disabilities' legal needs remain relevant as much of the barriers raised in the assessment (including physical and financial barriers) are still present in northwest and across Syria.



Syrians warm up before a futsal match during a sports tournament to mark the International Day for Persons with Disabilities, in Idlib, Syria, on December 3, 2020. © Ahmad al-Atrash / AFP

Key Findings & Recommendations

Access to Information on Legal Procedures

- **Physical and financial barriers are the largest barriers** for persons with disabilities when it comes to accessing information on legal procedures.
- **60% of key informants said they do not think persons with disabilities have the same opportunities** to access information, while **77% of households surveyed with a disability or with a family member with a disability said they do face more challenges in accessing information** on legal procedures.
- The most requested ways to improve access to information are through **door-to-door legal awareness and mobile registration clinics**.

Access to HLP and Civil Documents

- **58% of key informants said they did not think** persons with disabilities in their communities have the same opportunities to access **civil documents, with the largest barriers being physical and financial**.
- **70% of key informants said they did not think** persons with disabilities in their communities have the same opportunities to **access HLP documents, with the largest barriers also being physical and financial**.
- **62% of households surveyed reported a missing civil document**, while about 75% of those missing a document reported missing an ID card.
- **34% of households surveyed reported missing an HLP document**; with about 60% of those missing an HLP document reporting a missing property document other than an inheritance deed, lease agreement, sales contract, court decision, or land cadastre document.
- The largest reported consequences of missing civil and/or HLP documents for persons with disabilities were **lack of access to health or medical services/treatment; inability to access education; inability to access work opportunities; inability to access basic services like food or water**.

Protection Risks Due to a Lack of Documents

- The main protection risks for persons with disabilities without civil documents, identified by both surveys, were **verbal abuse, psychological/emotional abuse; and exploitation**, followed by **detention** and **threats/intimidation**.*
- When households were asked what support they need to reduce these protection risks, **financial support and job opportunities were the most commonly cited**, with many emphasizing the need for direct financial aid to cover expenses. **Legal support was the second most requested support**, with respondents highlighting the need for legal awareness sessions and assistance in navigating civil registry processes. **Medical support was another priority**, including access to physical and psychological therapy, advanced treatment, prosthetics, and mobility aids. Additionally, some requested community awareness.

Improving Humanitarian Response

- **Only 23% of key informants said that legal aid service providers do not understand the needs of those with disabilities.** According to the 23% of KIs, legal aid service providers lack specialized training and awareness on persons with disabilities. To improve access to legal services, the key informants recommended legal aid teams be trained on how to better communicate with and provide tailored legal assistance for persons with disabilities.
- When asked how to improve access to services, households most often cited **financial support, cash assistance, or fee subsidies**.[†] **Transportation and delivery services were also widely requested** to be able to reach essential services, including civil/land registries and medical facilities, with some advocating for mobile registration clinics.

Recommendations

Government of Syria:

- **Ensure national legislation protects persons with disabilities**, either by continuing to implement Legislative Decree no. 19 of 2024 or by passing new legislation that adheres to the International Convention on the Rights of Persons with Disabilities.

* Similar protection risks were reported in the Protection Cluster's August 2024 *Fact Sheet: Protection Barriers for Persons with Disabilities in North-West Syria*, <https://reliefweb.int/report/syrian-arab-republic/persons-disabilities-protection-barriers-report-north-west-syria-august-2024>.

[†] Respondents also requested financial aid to cover non-legal needs such as medication, therapy, and daily expenses, particularly for those with chronic conditions or disabilities requiring specialized care.

- **Commit to implementing government enforcement mechanisms to any national legislation that protects persons with disabilities**, ensuring that legal protections are effectively implemented rather than remaining mere promises on paper.
- **Integrate disability-inclusive approaches into ongoing HLP restitution and civil documentation processes**, such as by simplifying documentation requirements, establishing mobile legal clinics to better reach persons with disabilities, and waiving fees.

Humanitarian actors and/or legal aid providers:

- Establish or support **targeted and specialized centres and/or services to better cater to the specific needs** of persons with disabilities.
- **Better reach and engage** with persons with disabilities, including via home visits, and **promote participatory approaches, involving persons with disabilities in service design and delivery**.
- **Focus on community coordination and integration**, including through collaboration with community leaders, local councils, and camp management; **focus on awareness and advocacy** within their communities.
- **Improve communication channels** with persons with disabilities, via hotlines and messaging applications.
- **Bolster financial, legal, and medical support** for persons with disabilities.
- **Cover and/or provide transportation** so persons with disabilities can better access legal services.
- **Enhance referrals and service mapping** to better connect individuals to appropriate services and ensure age, gender, and diversity considerations are present in all service delivery frameworks.

Donor governments:

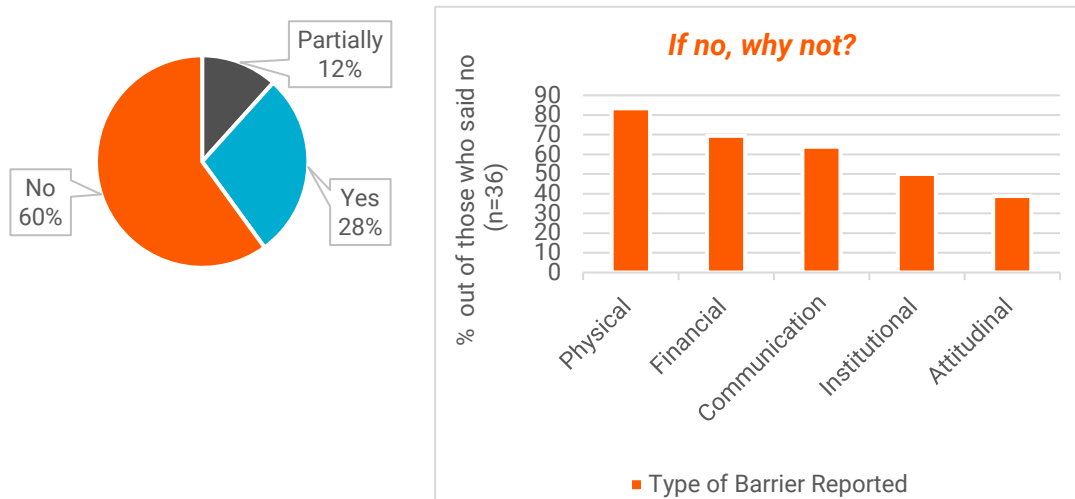
- **Ensure disability inclusion is not an afterthought but a core part of recovery strategies**. Push for inclusive infrastructure rehabilitation, including accessibility standards for shelters, schools, and health centres in return areas.
- **Advocate for participatory approaches** in program design to involve persons with disabilities or organizations centered on addressing legal needs of persons with disabilities.
- **Continue to commit to fund legal aid programming** centered on providing financial, transportation, and/or legal services so individuals are better able to access civil registries, real estate departments, and courts.
- **Support specialized education, well-being, and community centers** targeted for persons with disabilities in Syria.

1 Access to Information on Legal Procedures

Key informant and household survey participants were asked if persons with disabilities in their community had the same opportunities or faced more barriers in accessing information on legal procedures. The majority of key informants and households confirmed that persons with disabilities do not have the same opportunities and face more barriers, particularly physical and financial barriers.

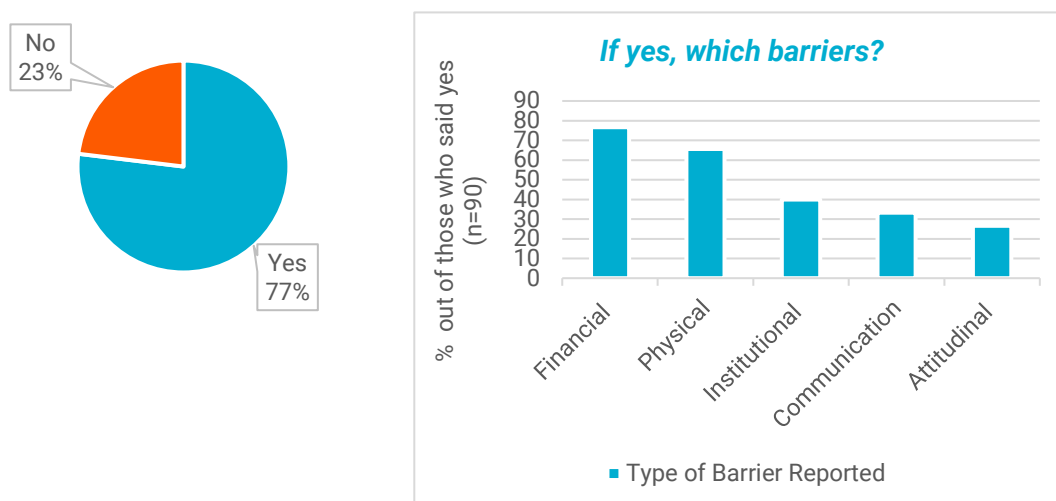
1.1 Perception of Key Informants

Do you think persons with disabilities in your community have the same opportunities to access information on legal procedures, such as obtaining documents?



1.2 Perception of Households

Do you feel that you or your HH member with disabilities face more challenges in accessing information on legal procedures than persons without disabilities?

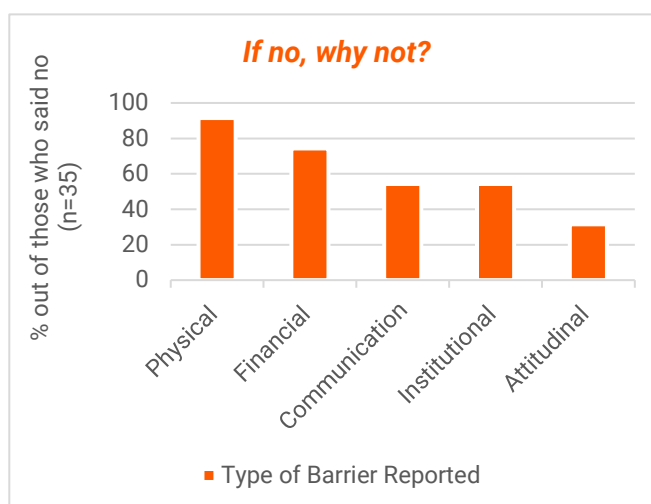
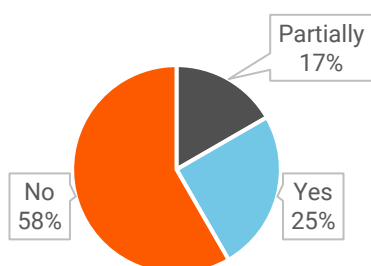


2 Access to HLP and Civil Documents

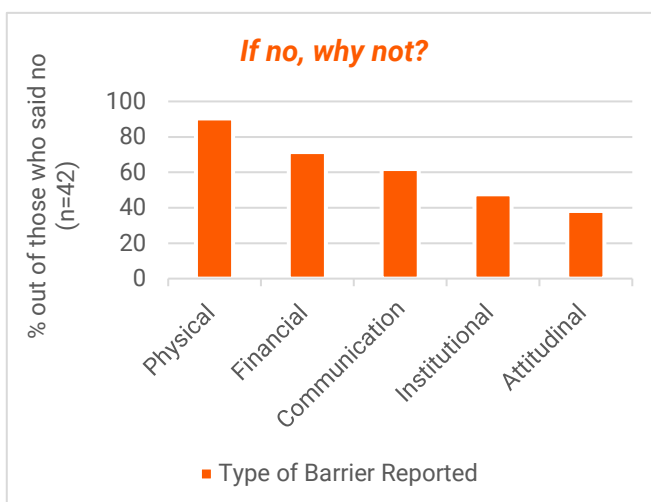
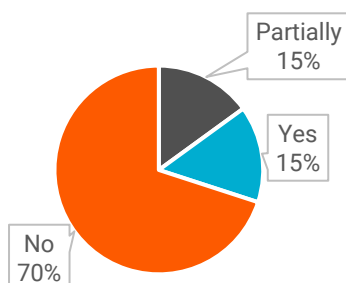
Key informants were asked whether they thought persons with disabilities in their community had the same opportunities to access civil and HLP documents. The majority said that persons with disabilities do not have the same opportunities, with physical and financial barriers being the main obstacles. Households with a person with disabilities member were asked if they were missing any documents, and the majority confirmed missing at least one document. The top missing civil document was an ID card, and the top missing HLP document was a copy of a property document (ex: title deed, real estate registration statement).

2.1 Perception of Key Informants

Do you think persons with disabilities in your community have the same opportunities to access civil documentation as persons without disabilities?

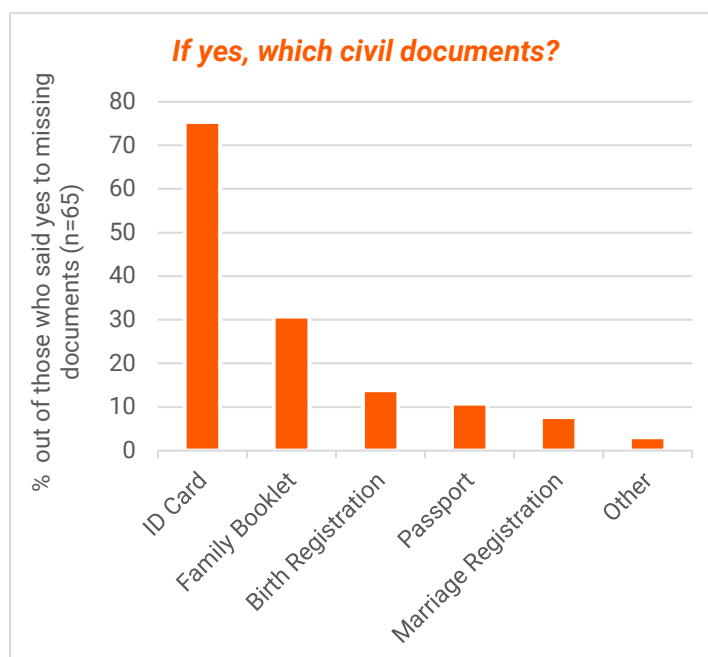
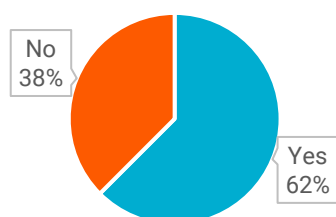


Do you think persons with disabilities in your community have the same opportunities to access HLP documents as persons without disabilities?



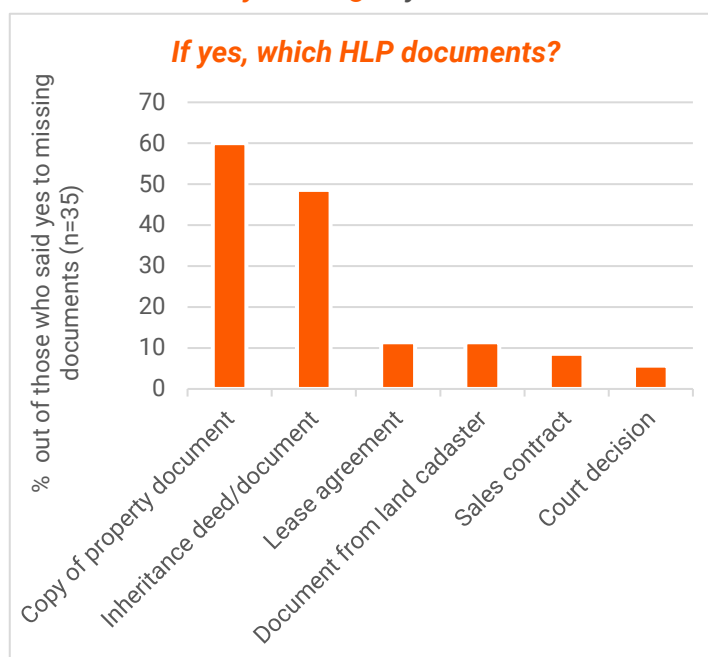
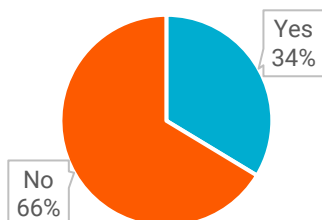
2.2 Perception of Households

Are you or your HH member who has a disability missing any civil documents?



For those who said "other," they referred to unspecified documents, or the ikhraj qeid (civil status extract).

Are you or your HH member who has a disability missing any HLP documents?

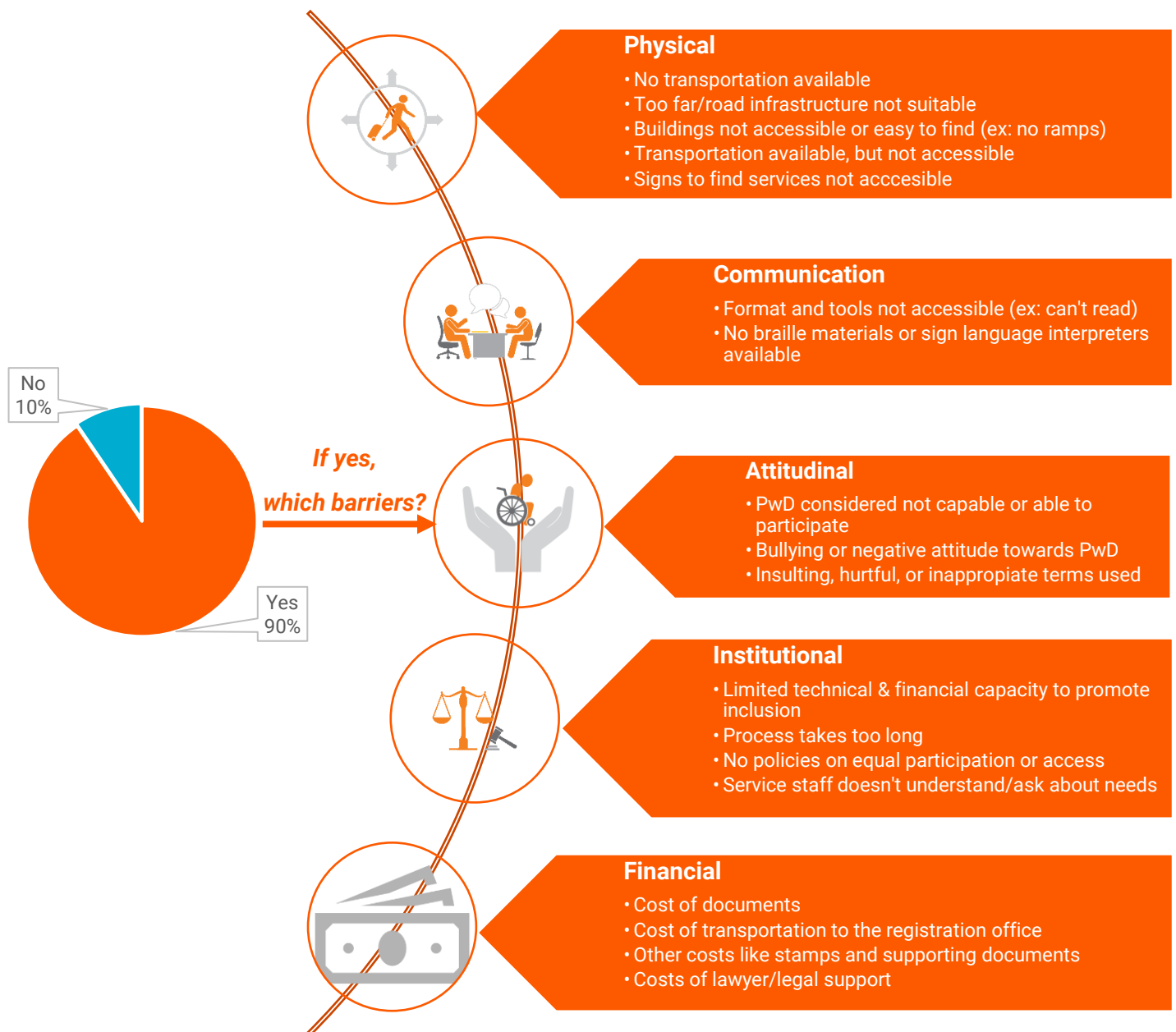


For those who said "copy of property document," it refers to property documents not listed on the chart (ex: title deed, real estate registration statement).

The lower reported number of missing HLP documents, compared to civil documents, may stem from the fact that not everyone owns or has access to property, whereas legal identity documents are more required and essential.

If you did report missing a civil or HLP document, do you or your HH member with a disability face any barriers in accessing these documents?

The chart below showcases the top types of barriers mentioned by respondents, listed in order of prevalence in each category.



90% of the households surveyed reported facing barriers to accessing civil or HLP documents, including physical, communication, attitudinal, institutional, and/or financial. **The largest reported barrier was financial, with 74 respondents stating that the costs of documents are their main obstacle.** 50 respondents also stated that the cost of transportation to the registration office was a large barrier. Financial barrier may be the largest reported barrier due to various reasons. First, there are numerous costs involved with obtaining a legal document, such as cost of the document itself, cost of any legal representation needed, cost of transportation to

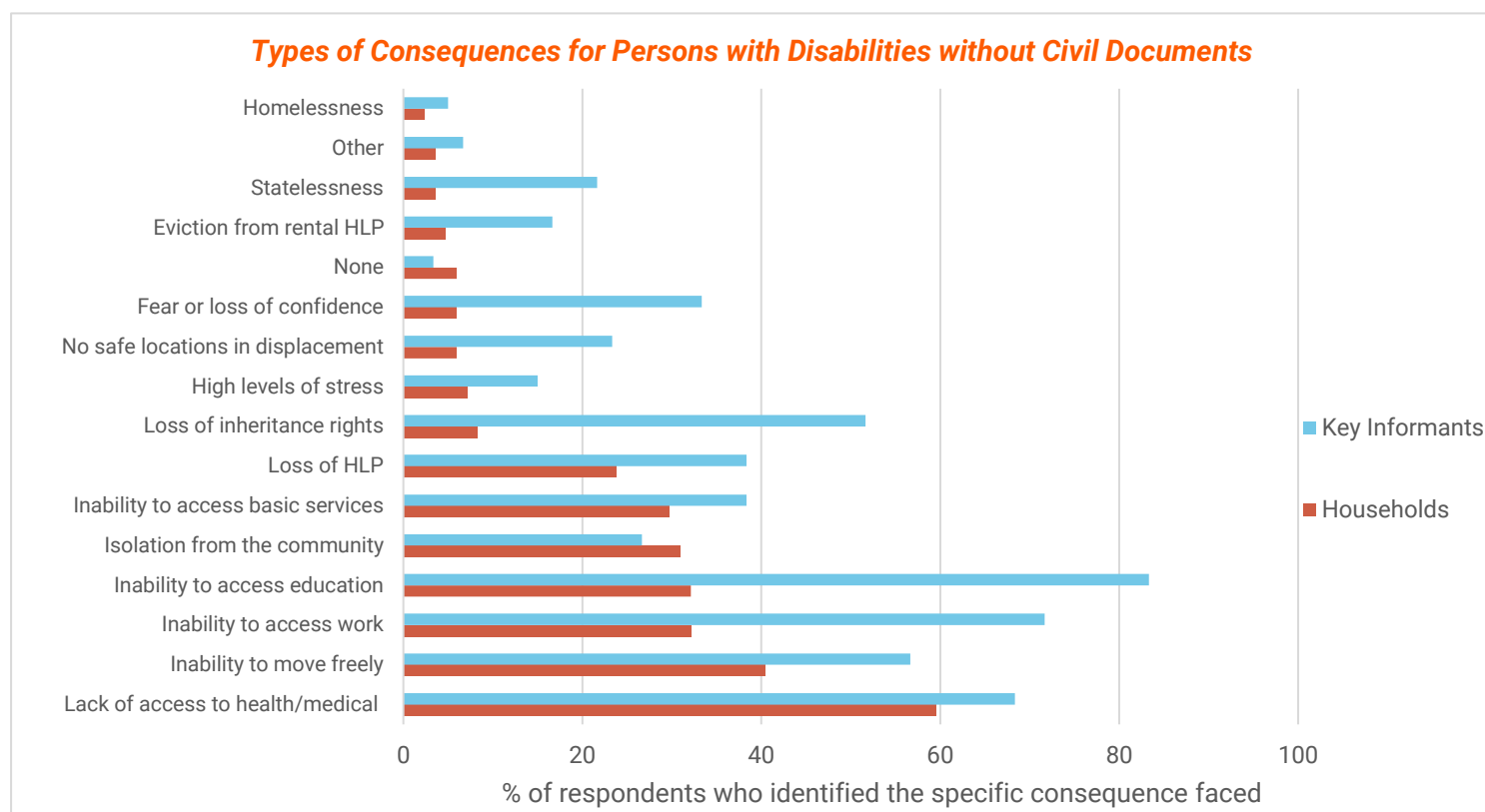
and/from the civil registries and/or courts, and the opportunity costs from time spent securing the document instead of working to support their or their family's daily needs. Second, many may be unaware of the costs to secure documents, but assume it is a high cost due to the various procedures involved. Lastly, with the severe economic crisis in Syria, individuals simply might not be able to afford it.

On the other hand, 45 respondents reported **facing institutional barriers of limited technical and financial capacity** to promote inclusion, while 38 respondents expressed no transportation was available. In line with data from the key informants, financial and physical barriers, including accessible infrastructure and buildings, appear to be the most common when attempting to access documents.

When households were asked about family members without disabilities who had missing documents, they also reported physical and financial barriers though it was more centred on distance to civil/land registries (too far), lack of transportation, and high costs. Communication, attitudinal, and institutional barriers were not as common for household members without disabilities.

2.3 Consequences Due to Lack of Documents

What consequences do persons with disabilities without civil documents face?



The five most frequently reported negative impacts/consequences for persons with disabilities due to missing/lack of documents are:

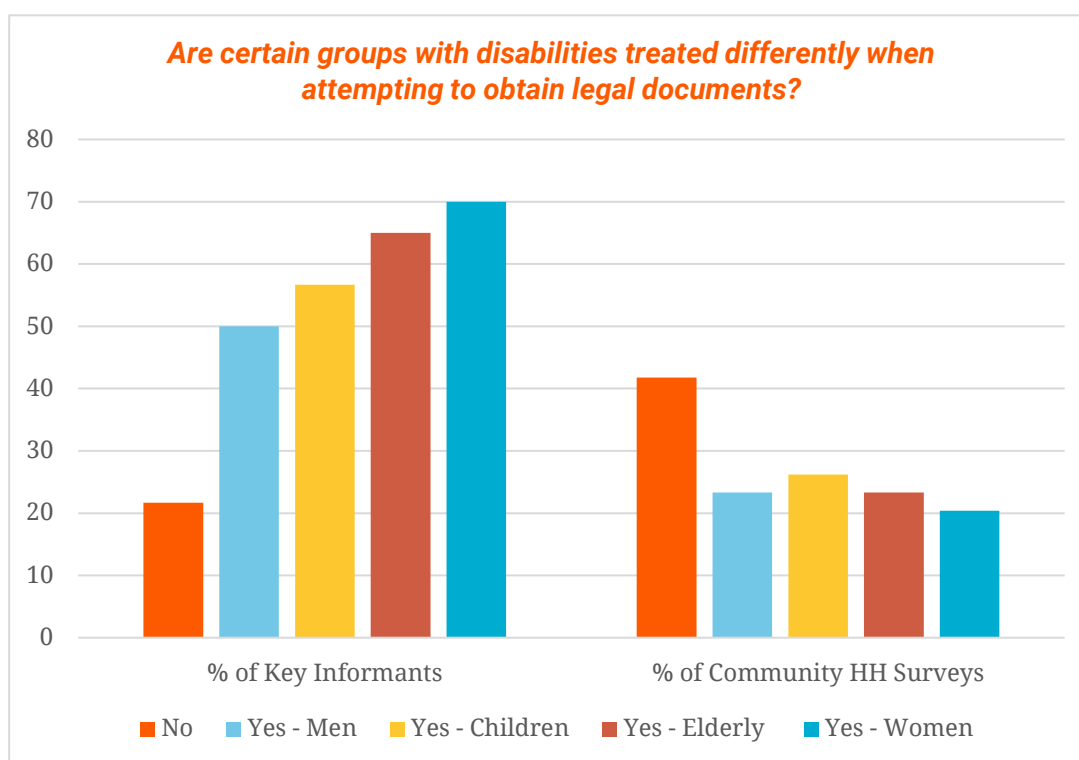
- **Lack of access to health/medical services** (68% of KIs and 59% of HHs);
- **Inability to move freely** (56% of KIs and 41% of HHs);

- **Inability to access work opportunities** (72% of KIs and 32% of HHs);
- **Inability to access education** (83% of KIs and 32% of HHs);
- **Isolation from the community** (26% of KIs and 31% of HHs).

Key informants raised specific concerns about the vulnerability of women with disabilities, who face heightened risks of harassment, rape, and unwanted pregnancies. Stigma and discrimination were also identified as significant challenges affecting persons with disabilities.

2.4 Are Certain Groups Treated Differently?

Do you feel men, women, children, and elderly with disabilities are treated differently when attempting to obtain legal documents?



Roughly 35% of the combined key informant and household responses reported no group as treated differently. However, this combined response contrasts with the majority of key informants who believe children, elderly, men, and/or women with disabilities are treated differently, while the majority of households said no group was treated differently.

70% of key informants reported **women** with disabilities are treated differently, with about half saying it is easier for women with disabilities to obtain documents, and the other half stating it is more difficult because communities view documents as less necessary for women. Of the key informants who stated **elders** are treated differently, 59% said it was easier for them to obtain documents, while 26% said it was more difficult because they received less support from their community/family. The remaining key informants reported elders face more difficulty in obtaining documents because they face more discrimination, their need is more likely to go unnoticed, and

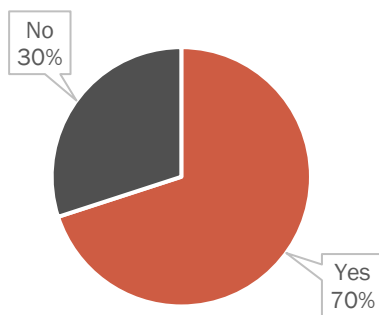
they have greater access barriers. 50% of key informants expressed that **men** with disabilities are treated differently, with the majority stating it is easier for men to obtain documents. While 57% of key informants expressed **children** are treated differently, with 62% of those saying it is easier for them to obtain documents, while 29% stated it is more difficult for them as communities view documents as less necessary for them. Other reasons reported for children facing more difficulties in obtaining documents included discrimination; their need is more likely to go unnoticed; they can't go without their parent accompanying them.

Most of the households surveyed (about 42%) did not think that a specific group of persons with disabilities is treated differently. Among those who said yes, responses were fairly evenly distributed across different groups, though slightly more indicated that children are treated differently. It is not clear why there is this discrepancy between key informants' and households' responses. Key informants, as community workers, may have greater awareness of broader, community-level treatment of persons with disabilities. However, further exploration is needed to determine whether certain groups experience different treatment or access to services.

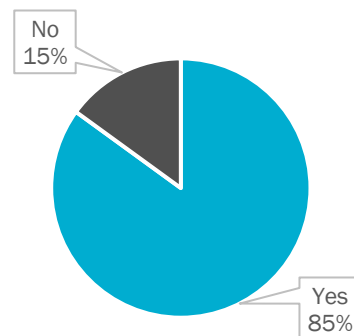
3 Protection Risks Due to a Lack of Documents

3.1 Perception of Key Informants

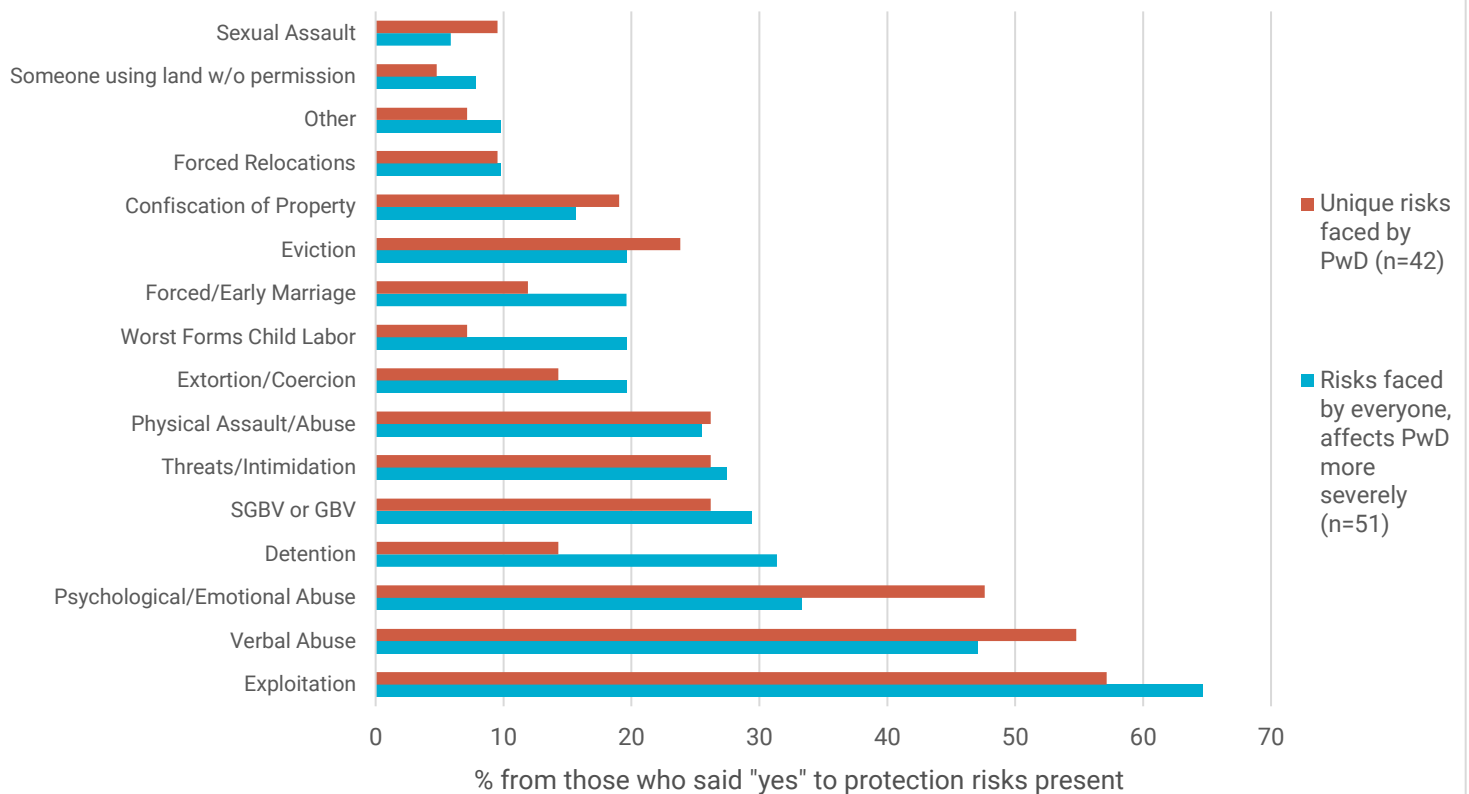
Do persons with disabilities who are missing documents face unique protection risks that persons without disabilities who are missing documents do not?



Are there protection risks faced by everyone missing documents, which affects persons with disabilities more severely?



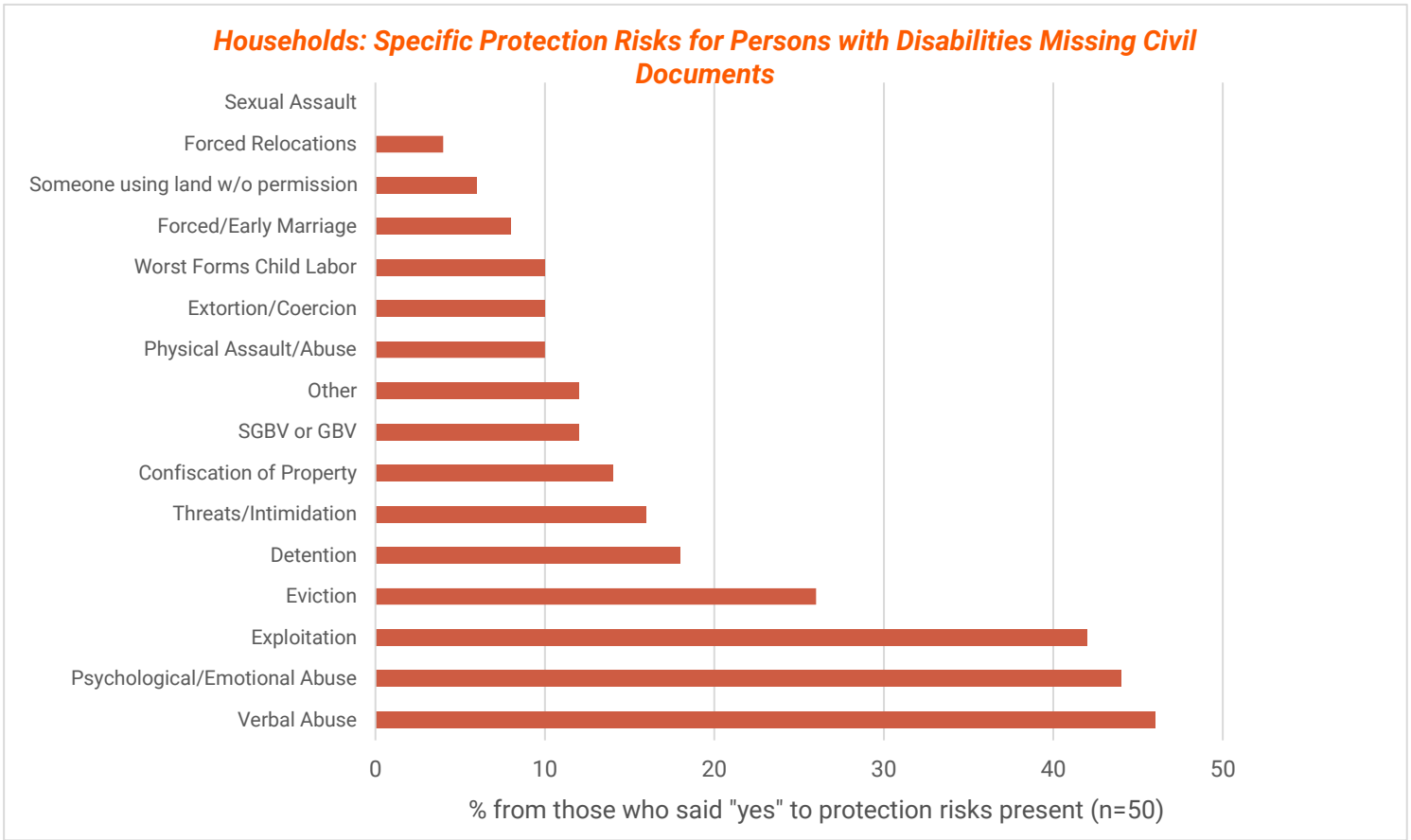
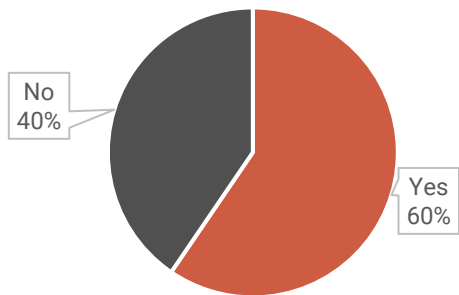
Key Informants: Types of Protection Risks Identified for those without Civil Documents



When key informants were asked what protection risks they thought *were uniquely faced by persons with disabilities due to missing documents*, the top risks identified were (1) exploitation; (2) verbal abuse; (3) psychological/emotional abuse; (4) SGBV or GBV; (5) threats/intimidation; and (6) physical assault/abuse (as illustrated in the red bars on the graph). Key informants were then also asked what protection risks are faced by everyone who is missing documents *but affects persons with disabilities more severely*, the top responses were (1) exploitation, (2) psychological/emotional abuse; (3) verbal abuse; (4) detention; and (5) incidents of SGBV or GBV. Across both responses, exploitation, psychological/emotional abuse, and verbal abuse were the three most prevalent risks identified, which aligns with risks identified as top concerns in an August 2024 assessment by the Northwest Syria Protection Cluster.³⁰

3.2 Perception of Households

Do you or your HH member with disabilities face specific protection risks due to the lack of documents compared to persons without disabilities?



According to the household survey, the top protection risks for persons with disabilities missing civil documents are **(1) verbal abuse, (2) psychological/emotional abuse; and (3) exploitation**, similar to the risks identified by key informants/community leaders. Additionally, it is important to note that the risks of **detention and threats/intimidation** were prevalent in both key informants and household surveys.

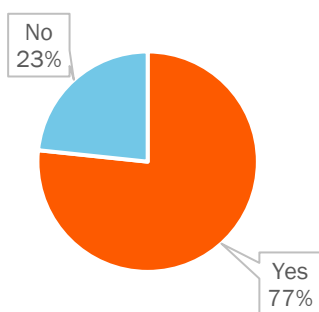
SGBV/GBV was identified as a risk by both key informants and households, as 12% of household surveys who reported protection risks exist identified GBV specifically as an issue. However, none of the households reported sexual assault as a protection risk, while it was lightly reported by key informants. Though this group of household respondents may not have experienced sexual assault or believe it is an issue their family member has faced, the high sensitivity of the question, which may be considered taboo, could also have caused it to be underreported.

Those reporting “other” protection risks mentioned that persons with disabilities are at higher risk of being denied access to services such as health and humanitarian assistance, face risk of barriers to freedom of movement as they require accompaniment, and one reported that they are anxious or fearful that they cannot obtain their specific rights. When households were asked **how they reduce these protection risks on their own**, most stated that they try to raise awareness (though it seemed from the responses that this was a request as opposed to a current tactic used). Others stated that they try to obtain the missing documents. Some respondents also noted that they reduce social interactions and keep family member(s) with disabilities at home to avoid risk, while others stated that they try to do the opposite and try to integrate their children with disabilities, with one respondent stating, *“I am strong and try to explain my daughter’s condition to society...to integrate her (more).”*

4 Improving Humanitarian Response

4.1 Key Informants: Do Legal Aid Providers Understand the Needs of Persons with Disabilities?

*Do you think legal aid service providers (I/NGOs) understand the needs of persons with disabilities such as difficulties moving, seeing, hearing or understanding?**



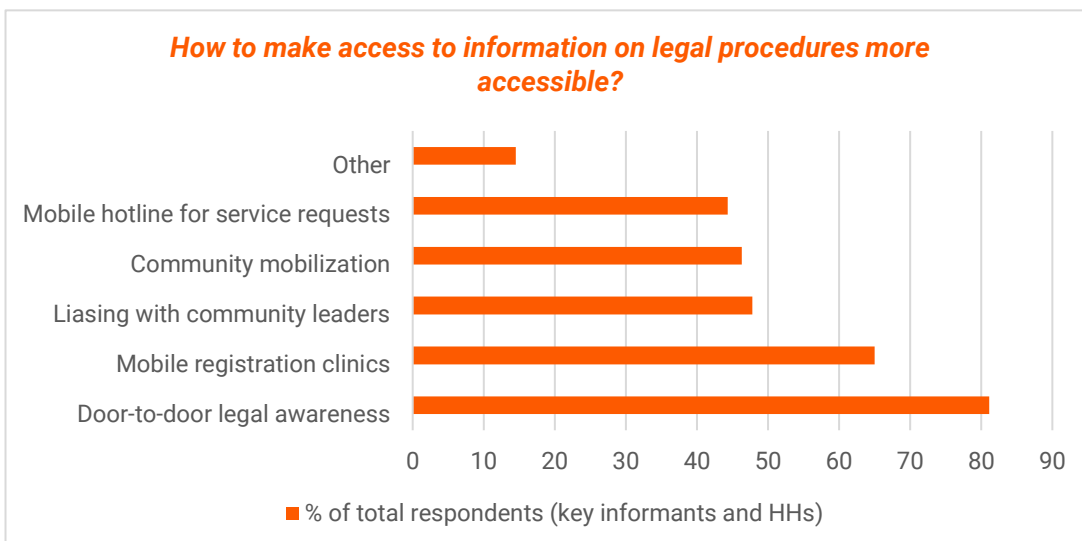
Only 23% of key informants reported that legal aid providers do not understand the needs of those with disabilities. Those who reported a lack of understanding expressed that service providers have a lack of specialized training/specialists, a lack awareness on persons with disabilities, and that legal teams should be better trained on communication and adapted services to

address the needs of persons with disabilities.

Those who reported a lack of understanding also expressed that **organizations do not cater to the particular needs of persons with disabilities** and do not provide them with enough specific information/support. They also stated there is a lack of capacity in some organizations, and organizations are not unified as each one has a different policy when addressing persons with disabilities.

4.2 Improving Access to Information

What do you feel humanitarian organizations could do to make access to information on legal procedures more accessible for persons with disabilities?



When asked this question, both key informants and households had similar responses, with the most common being door-to-door legal awareness followed by mobile registration clinics. For those who stated, “liaising with community leaders” or “community mobilization,” they expressed such community engagement was needed to identify those in need of tailored support to access information on legal procedures. The 14.5% who suggested other ways reported needing assistance in covering transportation, having the ability to register online, needing financial support/reduction of fees, and having access to mobile legal services/clinics.



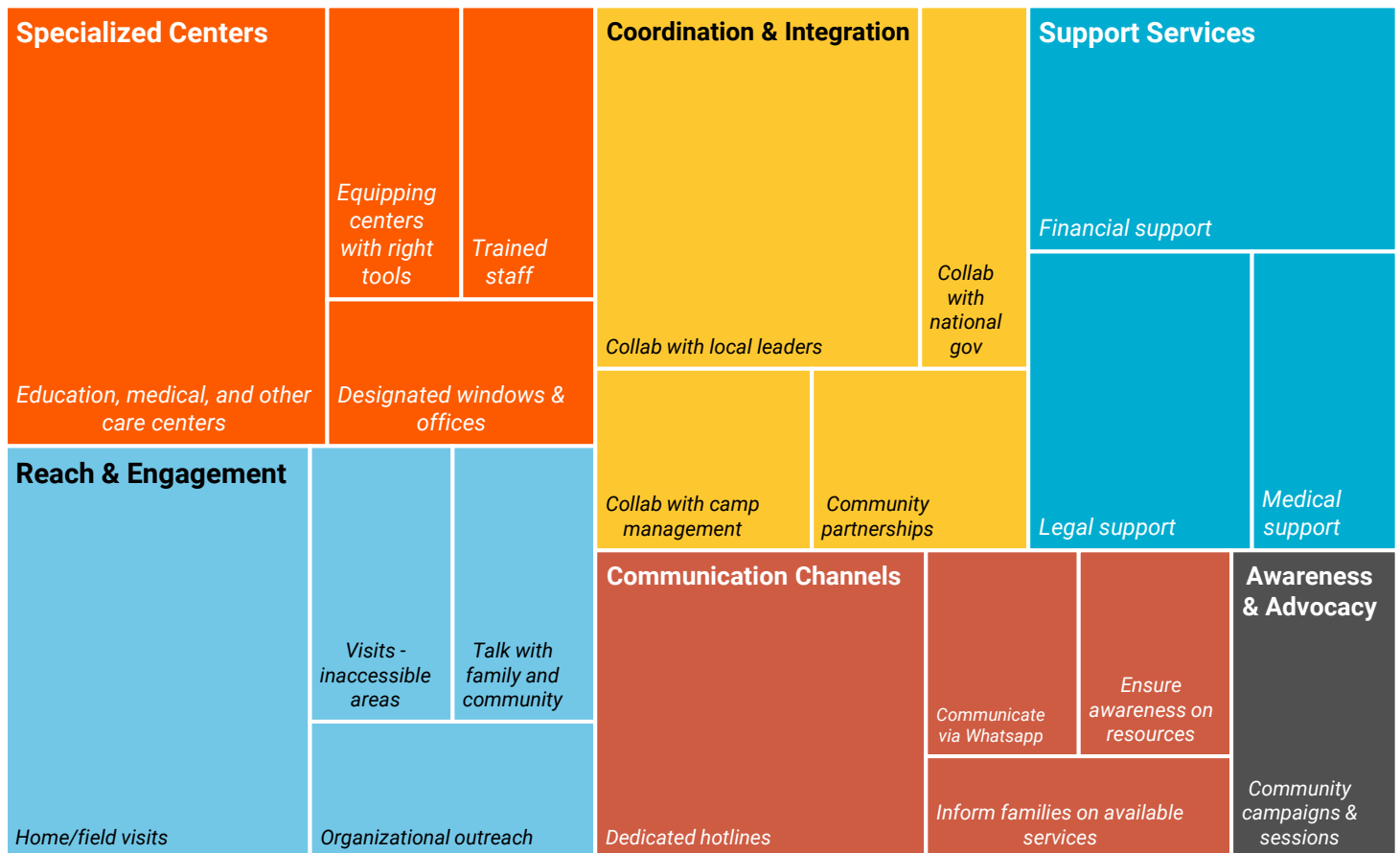
A view from a special education centre prepared for children with disabilities on July 27, 2022 in Idlib, Syria. © Muhammed Said / Anadolu Agency via AFP

4.3 What can humanitarian organizations do to better reach persons with disabilities?

The experiences and needs of persons with disabilities differ from one person to the next. However, humanitarian actors should develop tailored service modalities to address the most common barriers identified in this report as well include programmatic and budget flexibility within projects to support persons with disabilities overcome new barriers identified through programming. Thus, ensuring truly accessible and inclusive programming.

To better support persons with disabilities, respondents across both surveys highlighted several key areas for improvement, listed below in order of prevalence. The most common suggestions are summarized in the tree map on the next page.

Top Areas of Services and Support Needed



1. Targeted and specialized centers or services

One of the most prominent recommendations was the **establishment of targeted and specialized centers or services**. These centers should provide tailored support, such as helping persons with disabilities obtain civil documents, offering educational and therapeutic services, and ensuring access to basic rights.

Participants emphasized the need for such centers to be equipped with trained specialists and resources suited to various types of disabilities. For example, one respondent expressed, *“my daughter, who is autistic, is not the same (does not have the same needs) as an adult who has a physical disability such as a limb amputation.”* There were also suggestions to create spaces where children with and without disabilities could be integrated, fostering inclusion and reducing discrimination.

2. Reach and engagement

Another priority was **conducting periodic home or field visits to better reach and understand the needs of persons with disabilities**, particularly those who may be hesitant to seek help. Home visits could also address the challenges faced by individuals in remote areas who may not have access to services or the means to communicate their needs. Respondents stressed that proactive outreach is essential to identify and assist marginalized persons with disabilities. These visits can also inform family members of persons with disabilities on how to support them in claiming their rights, what tailored services exist, and how to access them.

3. **Community coordination and integration**

Community mobilization and better coordination with local entities were emphasized. **Respondents suggested collaborating with local government offices, community leaders (mukhtars), local councils, tribal leaders, and camp management to improve outreach and ensure services are effectively tailored to local contexts.** This would facilitate stronger connections between persons with disabilities and humanitarian organizations, especially where local authorities and leaders already have detailed knowledge of community needs.

4. **Bolstering communication channels**

Respondents highlighted the need for direct, continuous communication with persons with disabilities and their families. They proposed **dedicated channels, such as hotlines or WhatsApp groups, to report needs, ask questions, and receive updates** on services. Such tools could help bridge the gap between organizations and persons with disabilities (and their family members) who may feel isolated or unaware of the support available to them. **Humanitarian organizations can also use multiple formats and easy-to-read communication materials, including braille, audio descriptions, and sign language interpretations.**

5. **Support services through financial, legal, and medical provision**

Respondents emphasized the need for **financial support** to address the economic challenges faced by persons with disabilities. Proposed interventions include establishing employment and cash-for-work programs to support economic empowerment.

Legal assistance was also requested to help secure important civil and real estate documents. Legal support could include awareness sessions tailored to specific disabilities including through in home visits, as well as mobile registration clinics to streamline the process of obtaining necessary paperwork.

Medical, psychological, and rehabilitation support were also considered essential. Suggestions included providing physical therapy, prosthetic limbs, and rehabilitation programs designed to help persons with disabilities enter the labor market, as well as calls for ensuring access to medication and medical equipment.

6. **Awareness and advocacy**

Respondents requested establishing **community awareness campaigns** to promote understanding of persons with disabilities and combat stigmas.

7. **Transportation**

To address logistical challenges, respondents proposed solutions such as **providing transportation services** to help persons with disabilities access registration centers and complete essential tasks.

8. **Referral and service mapping**

They also stressed the importance of **mapping available services and improving referral systems** to ensure persons with disabilities are directed to the appropriate organizations and programs that can meet their specific needs.

Endnotes

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