

Hidden victims of the Syrian crisis:

disabled, injured and older refugees



Amandine Allaire/HelpAge International

The Syrian crisis has generated the largest refugee movement since the Rwandan genocide and is described as the defining refugee crisis of our era. Within this refugee population **older, disabled and injured refugees face specific challenges that contribute to their vulnerability**, yet, studies of humanitarian programming show that **these same groups are often neglected in assessments, data collection, design and delivery of responses**.

Handicap International and HelpAge International, thus, undertook a research project in Jordan and Lebanon between October and November 2013, to highlight the number and needs of Syrian refugees¹ living with impairment, injury and chronic disease – referred to in this study as people with specific needs. The research findings, summarised in this document, are based on a survey of 3,202 registered and non-registered refugees in seven areas of Jordan and Lebanon, specifically – North Lebanon, Bekaa, Beirut City and Mount Lebanon governorates in Lebanon; and Irbid and Amman governorates and Zaatari Camp in Jordan.

Random cluster sampling was used to identify registered refugees based on the population density of refugees; word of mouth and “snowball” sampling was used to identify and interview non-registered refugees. All major statistical results in the full report present restricted standard deviations. All members of house-holds were enumerated, interviewed and screened. Older people were identified as those aged 60 years and above. People with impairment were identified through a specific questionnaire evaluating five categories: their ability to move around and/or reach and use objects; sight; hearing; speech; ability to learn and understand. People with injury and people with chronic diseases were screened by self-declaration and observation.

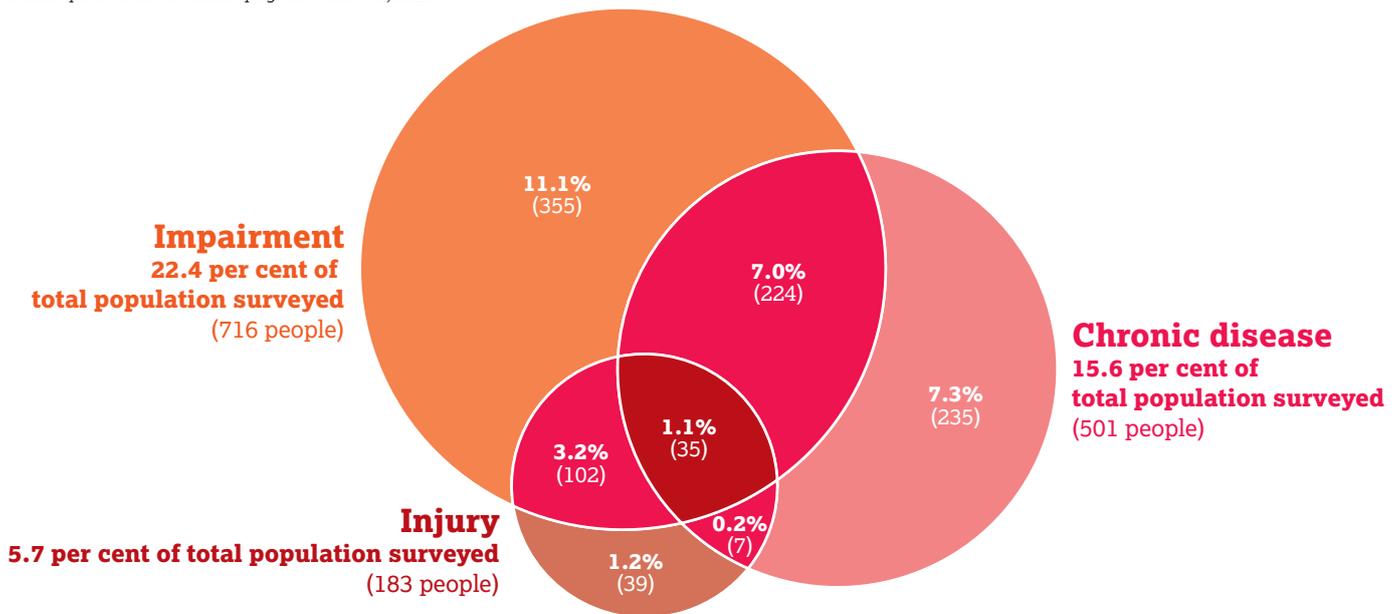
The findings of this work present a new and critical perspective on the position of the identified groups and the risks and vulnerabilities they face, with far-reaching consequences for the way current humanitarian responses are designed and delivered.

As such, the report aims to contribute to the evidence base humanitarians use to design responses, and to support the delivery of inclusive activities which identify and respond to the needs of persons with specific needs and older people.

1. Due to access and security constraints it was not possible to collect data in Syria itself, however it is recognised that the needs of refugees identified in the following report will be reflected within Syria, and that in this more extreme humanitarian situation the issues outlined below demand further consideration and response.

Number and percentage of people with specific needs in the surveyed Syrian refugee population

Handicap International and HelpAge International, 2013



The study shows that of the Syrian refugees surveyed:

- 30 per cent of refugees have specific needs: one in five refugees is affected by physical, sensory or intellectual impairment; one in seven is affected by chronic disease; and one in 20 suffers from injury, with nearly 80 per cent of these injuries resulting directly from the conflict.
- Older people account for 10 per cent of refugees with specific needs, yet they make up 5 per cent of the surveyed refugee population meaning they are disproportionately affected; 77 per cent of older refugees surveyed have specific needs.
- Refugees with and without specific needs have the same basic concerns – a lack of income, availability and quality of shelter, and access to basic healthcare, food and essential household items.
- The difficulties faced by those with specific needs in addressing basic concerns and accessing adequate levels of assistance have more severe consequences for their health and living conditions than the general refugee population.

The survey findings paint a bleak picture for the psychological status of refugees with specific needs:

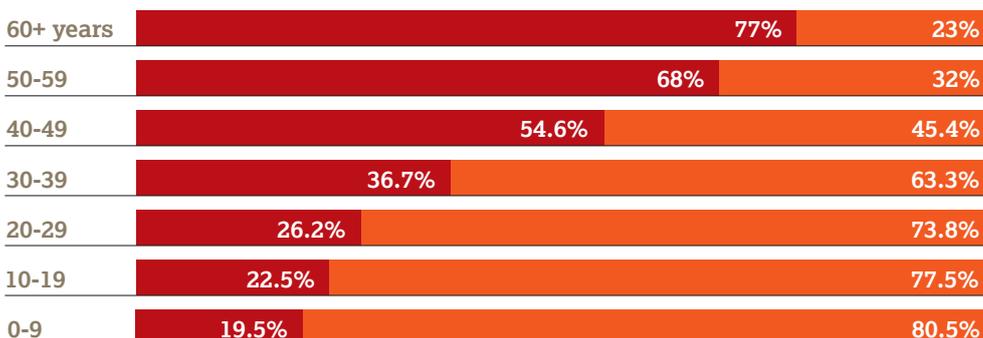
- They are twice as likely as the general refugee population to report signs of psychological distress.
- 65 per cent of older refugees present signs of psychological distress.

Finally, the study provides an insight into the challenges faced by refugees with specific needs in undertaking basic daily activities. The assessment of challenges faced in conducting such activities forms a crucial part of the evidence base on disability in the refugee population, and suggests a higher level of disability among refugees than assumed to date:

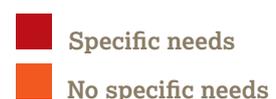
- 45 per cent of surveyed refugees with specific needs have problems in accomplishing simple activities of daily living.²
- Injury, permanent impairment, chronic disease and older age are all shown to increase the likelihood of refugees facing such challenges.

Percentage of survey refugees with specific needs per age category

Handicap International and HelpAge International, 2013



2. Activities of Daily Living (ADL) are routine activities that people tend to do every day without needing assistance. There are six basic ADLs: eating, bathing, dressing, toileting, transferring (walking) and continence. An individual's ability to perform ADLs is important for determining what type of long-term care is needed (eg care home or home care) and is also a key element of the World Health Organization definition and measurement of disability.



The major findings are:

Syrian refugees with an impairment

- 22 per cent of surveyed Syrian refugees have an impairment; 6 per cent have a severe impairment.
- Of those 22 per cent, half experience difficulties in daily living activities.
- 44.2 per cent of impairments recorded in this survey were physical, 42.5 per cent sensory and 13.4 per cent intellectual.
- Just 1.4 per cent of UNHCR-registered refugees in Lebanon are recorded as having a disability.
- 20 per cent of refugees with impairment are affected by more than one.
- The survey highlighted a higher prevalence of impairment in Jordan (26 per cent) compared with Lebanon (20 per cent).
- 7 per cent of surveyed refugees suffering from non-communicable diseases also have an impairment.

Syrian refugees with chronic diseases

- 15.6 per cent of the surveyed Syrian refugees have a chronic disease.
- 54 per cent of older surveyed refugees have a chronic disease.
- 7 per cent of interviewed refugees suffer from both impairment and chronic disease.
- 10 per cent of those aged 0-30 are affected by chronic disease.
- 30 per cent of those aged 30-50 are affected by chronic disease.
- Half of those aged 50+ are affected by chronic disease.
- In Jordan 19.6 per cent of surveyed refugees have a chronic disease and 13 per cent in Lebanon.

Injured Syrian refugees

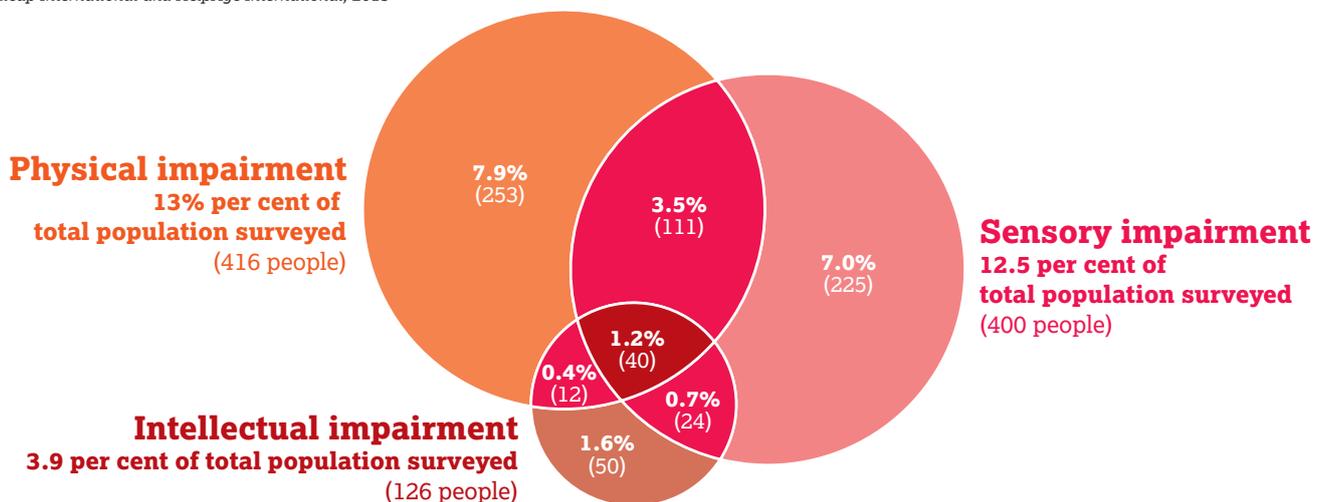
- 5.7 per cent of surveyed Syrian refugees in Jordan and Lebanon have a significant injury.
- 80 per cent of injuries were sustained as a direct consequence of war in Syria.
- In Jordan, one in 15 Syrian refugees has been injured. The highest percentage of people with injuries are found in Zaatari camp (8.9 per cent).
- In Lebanon, 1 in 30 Syrian refugees has been injured because of war. The highest percentage of people with injuries is found in North Lebanon (10 per cent).
- Men account for 72 per cent of injured people and women for 28 per cent, while the levels of injury among children is the lowest of all the age groups.
- 55 per cent of injured people have difficulties in performing daily living activities without support.

Older Syrian refugees

- 5 per cent of surveyed refugees are older people, but they make up 10 per cent of those with specific needs.
- 77 per cent of older people have specific needs.
- 54 per cent of older people have a chronic disease.
- 66 per cent of older people have an impairment.
- 33 per cent of older people have a severe impairment.
- 60 per cent of older people have problems in daily living activities.
- 65 per cent of older people present signs of psychological distress.
- 13 per cent of heads of households are older people.
- Where an older person is present in a family they are head of the household in 6 out of 10 cases.

Impairments of surveyed refugees broken down by type

Handicap International and HelpAge International, 2013



Recommendations

This report provides an insight into the situation and needs of older refugees, and refugees with impairments, injury and chronic disease – people whose needs are under-addressed by the current humanitarian response. It clearly illustrates the under-reporting of conditions known to contribute to the vulnerability of displaced populations including the challenge of adapting to new environments, limited access to services that help them meet their basic needs, and limited access to specialist services that can help address impairments, injuries and chronic diseases and conditions.

To ensure the delivery of a humanitarian response that is appropriate and accessible to people with specific needs, and that fulfils a commitment to impartiality and accountability to affected populations, it is essential that the evidence presented here is used to inform future assistance and services. Agencies and institutions delivering responses in Jordan and Lebanon must ensure that people with specific needs are identified and their needs addressed.

All refugees have the right to dignified and secure lives, based on their ability to meet both their basic and specific needs. Responsibility for ensuring this objective is achieved sits with all involved in the humanitarian response – not only specialist age or disability agencies. The following recommendations are intended to strengthen the capacity of local, national and international partners to fulfil their responsibilities.

The recommendations address five groups of actors:

1. NGOs, UN agencies and other humanitarian organisations

- Collect, analyse and use sex, age and disability disaggregated data (SADDD)
- Sensitise and build the capacities of staff to identify and include people with specific needs (people with impairment, injury, those suffering from chronic disease and older people) in response activities
- Develop strategies that strengthen existing support mechanisms for people with specific needs

2. National and international healthcare providers

- Address gaps in the quality of primary healthcare services for those with chronic diseases
- Ensure adequate provision of NCD drugs at primary healthcare level
- Improve access to laboratory tests at primary healthcare level
- Improve access to primary healthcare services for those with specific needs
- Ensure medical assistance addresses the need for post-operative care (to avoid creating disabilities)
- Ensure services to address psychological distress are accessible to, and appropriate for, people with specific needs

3. Donors

- Ensure projects that address the needs of refugees with specific needs receive necessary support, and encourage projects that ensure accessible services
- Support organisations to develop and implement new approaches that are inclusive of refugees with specific needs

4. Governments and local authorities

- Central governments
 - Ensure national ageing and disability actors are consulted in the development of national health strategies
 - Ensure national resilience plans consider people with specific needs – especially the accessibility, availability and appropriateness of services supporting older people and people with a disability or injury
- Local authorities (local antennae of Ministries of Social Affairs and municipalities)
 - Ensure regular consultation with civil society organisations and disabled and older people's organisations when collecting information on the needs and numbers of affected populations
 - Sensitise and build the capacity of staff to better identify and include people with specific needs and their families in service provision (in partnership with international specialist organisations where relevant)
 - Facilitate links and engagement between international organisations, civil society organisations and disabled and older people's organisations

5. Providers of specialised assistance

- Enhance the range of specific services provided to people with specific needs and their families
- Improve data collection related to specific needs
- Support mainstream response to ensure people with specific needs can access services

Download the full report – *Hidden victims of the Syrian crisis: disabled, injured and older refugees*

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