

Background

With the conflict in Syria well into its 10th year, there is an urgent need to adopt a comprehensive, integrated and multidisciplinary approach to disability-inclusive programming. In fact, 3.7 million people - or 27 percent of the total population (aged 12+) - in Syria have a disability. The key findings from the national assessment of disability in Syria showed that in addition to the provision of medical rehabilitation services, other environmental factors such as physical and social barriers and the mental health of persons with disabilities (PWDs) are priorities to be addressed and require urgent attention.

While the COVID-19 pandemic threatens all members of society, PWDs are disproportionately impacted due to attitudinal, environmental and institutional barriers that are reproduced in the COVID-19 context.² Syria is no exception. The recent socioeconomic impact assessment of COVID-19 in Syria highlighted that emergency care services for PWDs have been compromised as a result of limited personal protective equipment and uncertainty about management protocols.3

As noted in the United Nations Development Programme (UNDP) 'Disability Inclusive Development in UNDP: Guidance and entry points', disability is a multidimensional development and human rights issue. Disability inclusion is fundamental to the Sustainable Development Goals (SDGs) and their central pledge to leave no one behind and to reach the furthest behind first.⁴

Moreover, the guiding principles of the Convention on the Rights of Persons with Disabilities (CRPD) include non-discrimination, participation and inclusion, equality of opportunity, respect and dignity, and respect for diversity. The CRPD clearly stipulates that embracing disabilities as part of human diversity and humanity, and helping societies to restructure policies, practices and attitudes and to dismantle social and economic barriers for PWDs are essential to build inclusive societies.

Inclusive policies and programmes are sound investments in society, and both the SDGs and the CRPD are mutually inclusive and critical for the development of an effective disability inclusion programme.

United Nations Humanitarian Needs Assessment Programme, 'Disability: Prevalence and Impact', HNAP, Damascus, https://www.globalprotectioncluster.org/ wp-content/uploads/Disability_Prevalence-and-Impact_FINAL-2.pdf.

United Nations Office of the High Commissioner for Human Rights, 'COVID-19 and the Rights of Persons with Disabilities: Guidance', OHCHR, Geneva, 29 April 2020, https://www.ohchr.org/Documents/Issues/Disability/COVID-19_and_The_Rights_of_Persons_with_Disabilities.pdf.
United Nations Country Team in Syria, 'Socioeconomic Impact Assessment of COVID-19 and Related Factors in Syria', Damascus, July 2020

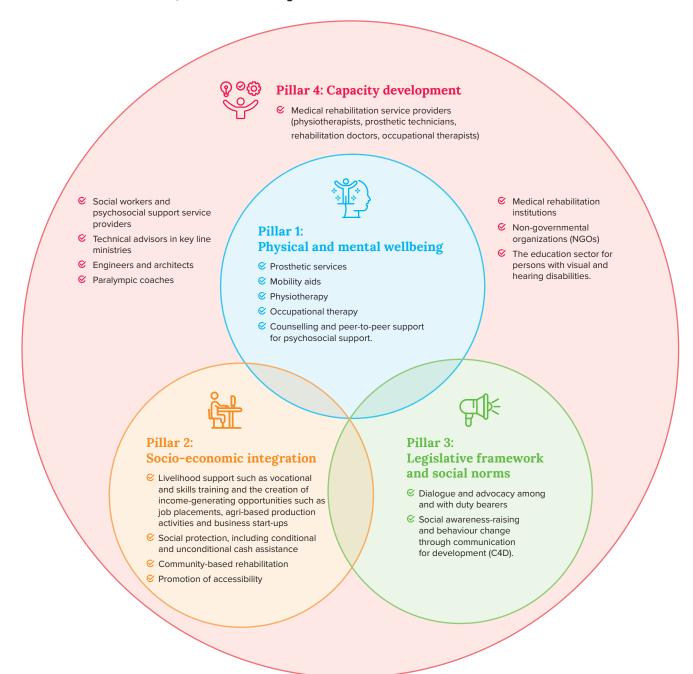
United Nations Development Programme, 'Disability Inclusive Development: Guidance and entry points', UNDP, New York, 2018, https://www.undp.org/content/ $undp/en/home/librarypage/democratic-governance/human_rights/disability-inclusive-development-in-undp.html. and the properties of the pro$

Strategy and approach

In line with the 2030 Agenda for Sustainable Development and the CRPD as a twin framework, UNDP supports PWDs in Syria through a human rights-based approach to disability and the principle of leaving no one behind. To address multidimensional challenges facing PWDs in a cohesive manner, UNDP Syria identifies four key pillars which are closely interlinked and require an integrated approach:

- Physical and mental well-being: This is the main entry point for UNDP, aiming to enhance the functionality and autonomy of PWDs through a variety of medical rehabilitation and psychosocial support services.
- Socio-economic integration: This aims to enhance the resilience of PWDs and their households against the negative socio-economic impacts of the crisis.
- Legislative framework and social norms: Legal systems reflect social and cultural norms that shape laws with respect to disability. PWDs often face stigma and discrimination in their communities and are frequently denied their basic rights such as to food, education, employment and access to information and health services. This pillar aims to develop enabling legal, policy and social environments.
- Capacity development: This is a cross-cutting issue across the above three pillars, aiming to improve the quality and sustainability of services by developing local capacity.

UNDP's disability inclusion programme puts PWDs at the centre of the integrated approach and addresses their needs through the four pillars. Using a simultaneous, integrated approach, UNDP facilitates transformative changes to the lives of PWDs in a holistic manner, as shown in the diagram below.



Key results since 2015

Pillar 1: Physical and mental well-being

Since 2015, UNDP's work in this area has focused on medical rehabilitation as an essential entry point for other parts of the disability inclusion programme to follow. UNDP is the only United Nations agency in Syria that has established prosthetic workshops in collaboration with local communities in Damascus, Aleppo, Tartous and Al-Hassakeh governorates. During the Syrian crisis, UNDP has provided more than 650 lower limb prosthetic devices to people in need, including women and children. Despite this valuable contribution, there is still a huge need for a roughly estimated over 100,000 cases of amputation. Along with the prosthetic services, UNDP ensures the provision of comprehensive physical rehabilitation treatment that includes medical consultation, physical therapy and psychosocial support. In addition, UNDP provides physical therapy and psychosocial support to persons with different types of physical disabilities, such as spinal cord injuries, traumatic brain injuries and children with disabilities, through the mobilization of local NGOs as service providers.

Another significant added value in this domain is the enhanced quality of mobility aids – including wheelchairs, for which UNDP developed drastically improved technical specifications. Prior to UNDP's interventions, the provision of mobility aids to PWDs focused merely on procuring and distributing commercially available wheelchairs without due attention to the individual needs and preferences of each patient. To address this issue, UNDP partnered with experts through a network of decentralized local authorities in Italy and transformed the system from the simple distribution of wheelchairs to provision of a comprehensive service to enhance the functional level and autonomy of PWDs. The results of this simple yet technically demanding step yielded significant results by reducing morbidity and enhancing the quality of life of the targeted PWDs.

Key results for Pillar 1



11,204 PWDS

received disability aids, wheelchairs, crutches, walkers, air mattresses and prosthetics



1,660 PWDs

completed rehabilitation treatment such as physical therapy, occupational therapy and speech therapy



10,027 rehabilitation sessions provided for PWDs

who completed treatment

108 PWDs

received psychosocial support



Pillar 2: Socio-economic integration

Building on its experience in providing livelihood support and economic early recovery for vulnerable groups, UNDP has supported more than 1,800 PWDs in 12 governorates in Syria to enhance their livelihood opportunities and overall resilience. While efforts have been made to address mild to moderate types of disabilities, persons with severe disabilities such as spinal cord injuries and traumatic brain injuries are left behind due to a lack of capacities in dealing with the levels of severity, resources and comprehensive inclusive planning skills. Under the principle of leaving no one behind, UNDP Syria identified conditional cash assistance coupled with physiotherapy as an efficient and effective intervention to support the resilience of persons with severe disabilities and their households. In 2019, UNDP implemented the first conditional cash assistance programme, targeting 500 persons with severe disabilities in Aleppo governorate – one of the most devastated during the conflict.

Moreover, UNDP is the first United Nations agency in Syria to promote the right to accessibility for PWDs, because this is one of the most important and challenging aspects of the Syrian context. The challenges come from the need to have a multisectoral/ multidisciplinary approach, which requires greater awareness and better coordination among several key stakeholders to ensure accessibility and alleviate the barriers in physical, information and attitudinal environments. UNDP has implemented several pilot projects in Al-Hassakeh and Aleppo governorates, where four schools have been successfully rehabilitated to enable access for 50 children with physical disabilities. UNDP believes that the first step is to create an enabling legal environment to impose obligations for the application of accessibility guidelines, in addition to raising the technical capacities in this domain. This is a fundamental step that we aim to achieve through Pillars 3 and 4.

Key results for Pillar 2

1,131 PWDs

benefited from livelihood support





426 PWDs received vocational training

95 job opportunities created

201 PWDs benefited from the provision of start-up kits

More than **50 students** with disabilities have better





Pillar 3: Legislative framework and social norms

One of the major challenges is to shift outdated perceptions of disability issues in Syria among the public, decision makers, service providers, targeted communities and PWDs themselves. There is consensus among experts in the field of disability in Syria that a key intervention is to sensitize the major stakeholders on the human rights-based approach and the CRPD guidelines to re-establish a unified language and level of comprehension among them.

To this end, UNDP is leading the development of local capacities and raising awareness on the rights of PWDs as stipulated in the CRPD and advocating for the importance of implementing and adhering to CRPD obligations. It is worth noting that Syria is one of many countries that have ratified the CPRD. By bringing its expertise in the field, UNDP facilitates dialogues and promotes regional and global networking through workshops, training sessions and events.

UNDP believes that empowering PWDs themselves is a key component needed to speed up the transformational process towards inclusion. However, overcoming social barriers to participation, social opportunities, health, education, employment and personal development is very challenging. To respond to this need, UNDP uses C4D as an advocacy and communication tool to change people's attitudes and behaviours. For instance, UNDP has implemented a programme called '10 Bootcamp' that empowers PWDs themselves to run social awareness campaigns and initiatives. This was a huge success, resulting in the creation of the first community-led online platform promoting the rights of PWDs and highlighting the challenges and opportunities for disability inclusion.

Key results for Pillar 3



Three workshops on the CRPD facilitated for 40 national staff

working in the field of disability inclusion and support

and NGO staff

35 people,

including PWDs and persons without disabilities, mobilized to conduct three social awareness campaigns, resulting in the creation of the first online platform on disability inclusion, reaching

more than 7,000 social media followers



⁵ United Nations Development Programme, «Ten» Boot Camp for effective inclusion for Persons with Disabilities (PWDs) in Syria, UNDP, Damascus, 28 July 2019, https://www.sy.undp.org/content/syria/en/home/presscenter/pressreleases/2019/Boot_Camp_PWD.html.

Pillar 4: Capacity development

To ensure sustainable, quality local services for PWDs, UNDP provides technical support to strengthen the capacities of service providers in medical rehabilitation, psychosocial support, socio-economic integration, accessibility and universal design. As of today, UNDP has delivered several training programmes for 325 service providers from different disciplines. To enhance institutional capacities, UNDP has also provided a computer-assisted design/computer-assisted manufacturing (CAD/CAM) system to the prosthetic centre at the Ministry of Health to enhance its limited capacities to provide these valuable services.

In 2019, UNDP expanded its services to different types of disabilities, such as hearing and visual disabilities. Tapping into the education sector as an entry point, UNDP developed the institutional capacity of two schools in Damascus and Aleppo to accommodate the needs of students with visual disabilities. UNDP provided a braille language printer, braille typewriters and stationery for the students with visual disabilities to enhance their academic attainment. In addition, UNDP supported an initiative to provide sign language interpretation for the university curriculum at two universities.

UNDP has identified the Paralympic field as a potential source of role models who can influence PWDs' perception in a positive way; therefore, it is instrumental in awareness-raising and empowerment of PWDs under Pillar 3. To this end, UNDP has initiated a set of activities to develop the capacities in this domain by providing training to coaches at Paralympic institutes and community clubs. UNDP has also supported inclusive rehabilitation of Paralympic sports halls and organized Paralympic sporting events to enhance PWDs' participation in sports activities and to enable them to experience different sides of their abilities.

Key results for Pillar 4

253 health workers

benefited from a capacity-building programme on wheelchair services, prosthetics, rehabilitation medicine and occupational therapy





35 social workers benefited from a series of training sessions on psychosocial support

25 engineers and architects' capacities developed on improving accessibility

capacities developed on improving accessibility and universal design

12 Paralympic coaches' capacities developed on sitting volleyball, table tennis and wheelchair dancing

More than 100 PWDs benefited from the rehabilitation of Paralympic sports halls

2,000 community members,

including PWDs and persons without disabilities, participated in three Paralympic sporting events



Shahed Shaaban's life-transforming journey with UNDP Syria

Shahed Shaaban, a 21-year-old Syrian student, welcomed 2020 with a big smile on her face and feelings of happiness and satisfaction. In 2019 she was able to resume her university studies, overcome her fear to participate in social life and build new friendships with people around her.

Shahed suffers from a severe movement disorder, resulting from muscular dystrophy, which has significantly impaired her mobility and overall physical function. She was one of 400 people benefiting from the project providing physical therapy for PWDs implemented by UNDP Syria⁶ in Lattakia in 2018 in partnership with a local NGO. Shahed's health condition would have stayed the same or even deteriorated, had it not been for the intervention from UNDP. After a series of intensive physical therapy treatment, she regained her autonomy and ability to move and function independently in her daily life. She says, "The physical therapy brought back not only my self-confidence but also my ability to stand, walk and move."

A few months later, Shahed was selected as one of 20 young Syrians to participate in the '10 Bootcamp' in Damascus that aims to promote disability inclusion in the country. The camp was Shahed's first experience of leaving home. Being alone, without her family, she managed to participate fully and effectively in the activities and establish new friendships with other participants. The bootcamp experience changed her perspective on life and motivated her to take control of her own destiny.

After the bootcamp, Shahed was ready to take on new challenges. After returning home, she joined English language courses and is continuously learning how to develop her computer skills. She then volunteered for social work in her community, providing peer psychosocial support to PWDs by utilizing the information and skills she gained through the 10 Bootcamp. After that, Shahed contributed to the establishment and launch of the 'DAL' platform ('DAL' is an Arabic acronym for better inclusion in society), which is the first platform in Syria promoting the rights of PWDs and highlighting challenges and opportunities for disability inclusion. Even the COVID-19 pandemic did not stop Shahed from searching for new opportunities. In partnership with UNDP Syria, she launched the crowdfunding campaign 'Un-silence My World' to support students with disabilities in the country.⁷ The result was remarkable: the campaign led to supporting 29 students to receive laptops and free Internet connectivity to overcome their challenges with access to information and helped them realize their dreams to get into university.

Shahed's journey continues. Feeling empowered, she is now looking for a job to help her become financially independent. Her story is the embodiment of the UNDP vision that strives to implement a comprehensive, integrated and multidisciplinary approach to support PWDs in Syria in line with the CRPD, the 2030 Agenda and the SDGs.



⁶ See https://www.youtube.com/watch?v=MMKDf16mhZo.

⁷ United Nations Development Programme, "Un-silence my world" Campaign, UNDP, Damascus, 31 May 2020, https://www.sy.undp.org/content/syria/en/home/presscenter/pressreleases/2020/Un-silencemyworldCampaign.html.



Through its commitment to support the needs of PWDs in Syria by reaching out to as many PWDs as possible, especially those in remote and hard-to-reach areas

and those who are particularly vulnerable to discrimination, exploitation and violence, including women and girls with disabilities

- By expanding its partnerships through South-South collaboration and the establishment of a community of practice on disability inclusion and recognizing the dynamic context in Syria
- By expanding its disability inclusion programme by: 1) enhancing the capacities of service providers to ensure sustainable, quality service provision for PWDs; 2) promoting the inclusion of accessibility in addition to the guidelines on communitybased rehabilitation in policies; and 3) enhancing psychosocial support and raising social awareness.

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From the People of Japan



