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**Promotion and protection of all human rights, civil,
political, economic, social and cultural rights,
including the right to development****Persons with disabilities in the context of internal
displacement****Report of the Special Rapporteur on the human rights of internally
displaced persons****Summary*

In her report, the Special Rapporteur on the human rights of internally displaced persons, Cecilia Jimenez-Damary, provides an account of the activities she has undertaken pursuant to the mandate given to her by the Human Rights Council in resolution 41/15.

In the thematic section of the report, the Special Rapporteur examines the specific experiences of persons with disabilities in the context of displacement. She analyses the obstacles to the equal enjoyment of their rights and recommends actions to ensure inclusive protection, assistance and durable solutions.

* Agreement was reached to publish the present report after the standard publication date owing to circumstances beyond the submitters' control.



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I. Introduction

1. The report of the Special Rapporteur on the human rights of internally displaced persons, Cecilia Jimenez-Damary, is submitted in accordance with Human Rights Council resolution 41/15. In the report, the Special Rapporteur provides an overview of the activities she has undertaken since her previous report (A/HRC/41/40). In addition, and in the light of the momentum gained for the rights of persons with disabilities since the World Humanitarian Summit in 2016, the Special Rapporteur has dedicated the present report to the specific experience of persons with disabilities in contexts of displacement, examining the ongoing challenges and the necessary actions to be taken by States, the United Nations and other humanitarian, human rights and development actors to remove the obstacles to the equal enjoyment of their rights.

II. Activities of the Special Rapporteur

2. The Special Rapporteur pursued the tasks mandated by the Human Rights Council through various activities in accordance with her priorities. The multi-stakeholder GP20 plan of action, launched by the Special Rapporteur in 2018 to mark the twentieth anniversary of the Guiding Principles on Internal Displacement is focused on the themes of participation by internally displaced persons, law and policy, data and analysis, and solutions to displacement.¹ Activities related to the plan continued to be undertaken by States, civil society, human rights institutions and United Nations agencies and country teams, some with the direct participation of the Special Rapporteur. The activities included quarterly GP20 Steering Group meetings in Geneva and two regional exchanges: one in March 2019 in Dakar on law and policy² and one in October 2019 in Addis Ababa on durable solutions.³ In order to highlight the gains of the plan of action by various stakeholders worldwide, an annex to the Special Rapporteur's annual report to the Human Rights Council for 2019 was also presented (A/HRC/41/40/Add.1). To mark the twenty-second anniversary of the Guiding Principles this year, the Special Rapporteur issued a joint press release with the Global Protection Cluster and GP20, particularly highlighting the relevance of this framework in the current coronavirus disease (COVID-19) pandemic.⁴

3. Promoting and mainstreaming the Guiding Principles was the goal of most of the Special Rapporteur's activities in 2019. They included presentations (in person or remotely) to various conferences, such as the International Metropolis Conference in June in Ottawa; the Indigenous Peoples' Fellowship Programme of the Office of the United Nations High Commissioner for Human Rights (OHCHR) in June in Geneva; the Wilton Park Conference on internal displacement in September in London; the Mindanao Peace Conference in November in Butuan City, Philippines; and the Latin America human rights defenders conference in December in Mexico.

4. In collaboration with the International Institute for Humanitarian Law and the Office of the United Nations High Commissioner for Refugees, the Special Rapporteur co-organized and facilitated three courses in Sanremo, Italy, on law and policy on internal displacement, two in English in June and November and one in French for the first time in November. The courses were attended mainly by national and local authorities from over 30 countries affected by internal displacement. The mandate also contributed to the development of draft laws for the protection of internally displaced persons in El Salvador, Ethiopia, Honduras and Mexico, including as a member of the Global Protection Cluster Task Team on Law and

¹ See GP20, "A plan of action for advancing prevention, protection and solutions for internally displaced people 2018–2020" (May 2019).

² See GP20 "Comparative experience on preventing, addressing and resolving internal displacement. West Africa regional exchange on law and policy to prevent and address internal displacement" (2019).

³ See GP20, "Comparative experience on preventing, addressing and resolving internal displacement. Experiences in supporting resilience and durable solutions to internal displacement in the IGAD region" (2019).

⁴ Available from www.ohchr.org/en/NewsEvents/Pages/GPID.aspx.

Policy. The Special Rapporteur particularly congratulates El Salvador for the adoption of its national law in January 2020.

5. Regarding data on and analysis of internal displacement, the Special Rapporteur continues to be a member of the Executive Committee of the Joint IDP Profiling Service. She contributed to the development and promotion of the international recommendations on internally displaced persons statistics, issued by the Expert Group on Refugee and IDP Statistics, which were adopted in March 2020 by the United Nations Statistical Commission. In January 2020, she also participated in the International Forum on Migration Statistics in Cairo.

6. The African Union declared 2019 as the Year of Refugees, Returnees and Internally Displaced Persons and was therefore a particular focus for the Special Rapporteur. In Addis Ababa, she participated in the African Union round table on root causes and durable solutions in February and a conference of the Network of African National Human Rights Institutions on durable solutions in September. In October, she also participated in a panel on internal displacement at the African Commission on Human and Peoples' Rights in Banjul; a conference on durable solutions in the Democratic Republic of the Congo in Kinshasa in October; the African Union annual humanitarian symposium on forced displacement in Nairobi in November; and the commemoration of the tenth anniversary of the African Union Convention for the Protection and Assistance of Internally Displaced Persons in Africa (Kampala Convention) in Kampala in December. The Special Rapporteur congratulates Somalia and South Sudan as new States parties to the Kampala Convention.

7. Throughout the reporting period, the Special Rapporteur conducted several working visits to raise the visibility of internal displacement: to Tbilisi for activities related to GP20 in July, to Bangkok to meet regional organizations in July and to Brussels for meetings with various European Union counterparts in December. She also conducted visits to assist Governments, United Nations agencies and other stakeholders in their work on internally displaced persons, namely a joint mission to Ethiopia with the Emergency Relief Coordinator and the Assistant Secretary-General for Peacebuilding Support in September; a two-day event in Nigeria in October promoting the ratification of the Kampala Convention, organized by the National Commission for Refugees, Migrants and Internally Displaced Persons and Public Service International and its unions; and a four-day consultation mission in the Philippines in February 2020 in Cotabato. The Special Rapporteur engaged in constructive dialogues with Member States, mainly through State-organized stakeholder meetings and bilateral meetings. An official mission was also conducted to Iraq in February 2020.

8. To advocate for the rights of internally displaced children, the focus of her report to the General Assembly in 2019 (A/74/261 and Corr.1), the Special Rapporteur took part in the activities of Child Rights Connect related to the day of general discussion of the Committee on the Rights of the Child in Geneva in June. She is also currently advising on the Child Rights Connect toolkit for children human rights defenders. The Special Rapporteur co-organized with Honduras a side event at the forty-first session of the Human Rights Council in Geneva in June and a side event at the seventy-fourth session of the General Assembly with Norway, the United Nations Children's Fund (UNICEF) and the Office of the United Nations High Commissioner for Refugees (UNHCR) in New York in October. She also contributed video messages to the conference on displaced children organized by Refugees International, the Jesuit Refugee Service and the Catholic Relief Services in New York in September and to the commemorative activities of the Committee on the Rights of the Child in Geneva in November.

9. Given the relationship between climate change and internal displacement, the focus of her upcoming report to the General Assembly, the Special Rapporteur participated in a humanitarian affairs segment side event of the Economic and Social Council, addressing conflict and disaster displacement in Geneva in June and in the Rosa Luxembourg Stiftung international conference on climate migrants in Manila in September. She remains a member of the Advisory Committee of the Platform on Disaster Displacement.

10. Academic institutions and capacity-building events are important in promoting the protection of internally displaced persons. Over the past year, the Special Rapporteur has engaged with the Geneva Academy of International Humanitarian Law and Human Rights,

the refugee law initiative of the University of London and the Global Migration Centre of the University of Geneva, and in training events organized by various United Nations agencies, including the Asia-Pacific regional training course for national human rights institutions organized by OHCHR and the Asia-Pacific Forum of National Human Rights Institutions in Bangkok in September.

11. To mainstream the human rights of internally displaced persons into the United Nations system, the Special Rapporteur, a standing invitee to the Inter-Agency Standing Committee, participated in its regular Principals meetings, held in Geneva in May and December, and various other activities, while bilateral cooperation with Committee members continued at the global, regional and country levels. The Special Rapporteur also engages closely with the High-level Panel on Internal Displacement established by the Secretary-General, in accordance with its terms of reference.

12. To contribute to the protection of the human rights of internally displaced persons during the COVID-19 pandemic, the Special Rapporteur has issued relevant press statements of her own and endorsed those of other special procedure mandate holders.⁵ She also endorses the related guidelines issued by the Inter-Agency Standing Committee.

III. The rights of internally displaced persons with disabilities

A. Introduction

13. In recent years, there has been increased global attention paid to closing the inclusion gap for persons with disabilities and ensuring that they enjoy their human rights without discrimination. The adoption of the Convention on the Rights of Persons with Disabilities in 2006 introduced a new rights paradigm for persons with disabilities, shifting policy from a charitable and medical approach to a rights-based one. The 2030 Agenda for Sustainable Development emphasizes that no one should be left behind and that those who are furthest behind should be supported first.

14. The World Health Organization (WHO) estimates that about 15 per cent of the world's population have a disability.⁶ Applying this estimate to the 45.7 million persons internally displaced worldwide by conflict and violence at the end of 2019 means that about 6.8 million of them could have a disability.⁷ Millions more are displaced by disasters and the adverse effects of climate change every year, so this figure could be much higher.

15. Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which, in interaction with various barriers, may hinder their full and effective participation in society on an equal basis with others. Disability is understood as a social construct resulting from the interaction between persons with actual or perceived impairments and attitudinal, environmental and institutional barriers.⁸ Persons with disabilities are not a homogeneous group; they include a diverse range of persons with different impairments and support needs that intersect with their age, gender and other identities.

16. An estimated 46 per cent of older persons, 20 per cent of women and 10 per cent of children have a disability.⁹ In forced displacement contexts, an even higher percentage of

⁵ Available from www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=25763&LangID=E and www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=25786&LangID=E.

⁶ See WHO, "Disability and health", 16 January 2018.

⁷ See Internal Displacement Monitoring Centre, *Global Report on Internal Displacement, 2020* (May 2020).

⁸ Convention on the Rights of Persons with Disabilities, art. 1.

⁹ See Inter-Agency Standing Committee, *Guidelines: Inclusion of Persons with Disabilities in Humanitarian Action* (July 2019).

persons are expected to have a disability owing to increased risks of injuries, lack of access to quality medical services and the creation of new barriers in the environment.¹⁰

17. The Special Rapporteur has made a core priority of her mandate the promotion of visibility and effective protection for all internally displaced persons, including those who have become neglected, rendered invisible and vulnerable, and those facing the greatest challenges resulting from their displacement (A/72/202, para. 5). Persons with disabilities may face discrimination before and during displacement and in the search for durable solutions. Internally displaced persons with disabilities encounter physical, environmental and societal barriers to accessing specific displacement-related information, humanitarian assistance and services, including education, employment, health care and social protection, and barriers more generally to the full enjoyment of their human rights, including the right to participate in society on an equal basis with others and without discrimination. Internally displaced persons with disabilities often face multiple and intersectional forms of discrimination based on other grounds, such as gender, age, ethnicity, religion, group affiliation and displacement itself.

18. Forced displacement amplifies the risks for the safety, security and dignity of persons with disabilities. Internally displaced persons with disabilities may share the same challenges as other displaced persons but because of environmental and social barriers they are affected differently. Their challenges may be overlooked, or inadvertently even posed, by aid and development providers. Compounding their marginalization, persons with disabilities continue to be considered primarily as recipients of aid; their potential to make constructive contributions to solving issues linked to displacement is still largely unexplored. The recognition of persons with disabilities and their representative organizations as critical stakeholders in internal displacement situations, both emergency and protracted, is crucial.

19. Certain groups or categories of internally displaced persons with disabilities are especially at risk of violence, isolation or neglect, especially those with high support needs, such as persons with psychosocial or intellectual disabilities, unaccompanied, separated and orphaned children with disabilities or survivors of severe traumatic events. Women and older persons with disabilities also face additional stigmatization and discrimination and protection challenges.

20. In the present report, the Special Rapporteur aims to develop a better understanding of the diverse experiences of displaced persons with disabilities, which is required to effectively protect and promote their rights; empower them to become active stakeholders in the decision processes that affect them; provide inclusive and accessible humanitarian assistance and services; and better support the achievement of durable solutions.

21. In January 2020, the Special Rapporteur sent a questionnaire to all Member States requesting them to recount their experiences, policies and practices with regard to internally displaced persons with disabilities. She sincerely thanks the Governments of Cambodia, Colombia, Ecuador, Honduras, Italy, Lebanon, Mexico, Norway, Ukraine and the United States of America for their responses. She also would like to thank the United Nations agencies, non-governmental organizations (NGOs) and organizations of persons with disabilities whose contributions were essential for the report.¹¹

B. Applicable legal and policy frameworks

22. Under international human rights law, the rights of internally displaced persons are neither diminished nor curtailed by their displacement. That includes rights under the core human rights treaties, in particular the Convention on the Rights of Persons with Disabilities. In situations of international or non-international armed conflict, internally displaced persons are also entitled to the protections guaranteed to civilians under international humanitarian law, except insofar as an individual directly participates in hostilities.

¹⁰ See Handicap International, “Disability in humanitarian contexts” (2015).

¹¹ For all contributions, see www.ohchr.org/EN/Issues/IDPersons/Pages/CallforInputs_InternallyDisplacedPersons.aspx.

23. Under article 11 of the Convention on the Rights of Persons with Disabilities, States parties are specifically required to take all necessary measures to ensure the protection and safety of persons with disabilities in situations of armed conflict and disasters. In addition, all the provisions of the Convention remain relevant in displacement situations (see A/HRC/31/30).

24. Internally displaced persons with disabilities unfortunately lack visibility in the monitoring of their rights. A search of observations and recommendations relating to the Convention in the Universal Human Rights Index database reveals that in March 2020, out of a total of 3,826 records, there are only 22 relating to internally displaced persons with disabilities.

25. Principle 4 of the Guiding Principles on Internal Displacement, which reflect international human rights and humanitarian law, explicitly states that they should be applied without discrimination of any kind, including on the basis of disability. Having been developed before the Convention on the Rights of Persons with Disabilities, the Guiding Principles should be interpreted in rights-based language with respect to persons with disabilities. Importantly, they entitle internally displaced persons with disabilities to safe and dignified access to the protection and assistance they might require, as well as durable solutions.

26. The basic principles and guidelines on development-based evictions and displacement refer to the need to give priority in housing and land allocation to disadvantaged groups, including persons with disabilities (A/HRC/4/18, para. 31).

27. The United Nations is upgrading its system-wide policies to become more inclusive of persons with disabilities. In June 2019, it launched the United Nations Disability Inclusion Strategy, whereby the entire United Nations system, including country and humanitarian teams, has committed to measuring and tracking their performance with respect to disability inclusion. In June 2019, the Security Council adopted its very first resolution on persons with disabilities, resolution 2475 (2019), calling for the protection of persons with disabilities, including those displaced in time of conflict.

28. The World Humanitarian Summit in 2016 endorsed the Charter on Inclusion of Persons with Disabilities in Humanitarian Action, which led to the adoption in October 2019 of the Inter-Agency Standing Committee guidelines on the inclusion of persons with disabilities in humanitarian action (Inter-Agency Standing Committee guidelines). The guidelines complement, among others, the humanitarian inclusion standards for older people and people with disabilities and the revised Sphere handbook provisions on persons with disabilities.¹² Efforts are under way to advance inter-agency collaboration on disability inclusion in humanitarian response plans and humanitarian needs overviews.¹³ At the field level, protection clusters are increasing the focus on disability inclusion throughout the humanitarian programme cycle.

29. At the regional level, relevant instruments include the Kampala Convention (arts. 5 (1) and 9 (2) (a) (b) and (c)) and the Protocol on the Protection of and Assistance to Internally Displaced Persons adopted by the International Conference on the Great Lakes Region in November 2006 (articles 4 (1) (d) and (f) and annex, principles 4 and 19).

30. Of 86 existing national laws and policies on internal displacement, some 35 explicitly mention persons with disabilities.¹⁴ Some countries have national frameworks for persons with disabilities that also apply to those living in situations of internal displacement.¹⁵

¹² See Age and Disability Consortium, *Humanitarian Inclusion Standards for Older People and People with Disabilities* (2018) and Sphere Association, *The Sphere Handbook: Humanitarian Charter and Minimum Standards in Humanitarian Response* (2018).

¹³ See, for example, Department for International Development, "Guidance on strengthening disability inclusion in humanitarian response plans" (2019).

¹⁴ See contribution by the Global Protection Cluster Task Team on Law and Policy.

¹⁵ See contributions from Cambodia, Colombia, Honduras, Italy, Mexico and Ukraine.

C. Participation

31. Internally displaced persons with disabilities have the right to participate in all matters affecting them, including in relation to the general impact of displacement on their lives and the specific obstacles they face as persons with disabilities.¹⁶ Ensuring participation in all decision-making processes helps overcome protection, accessibility and communication barriers, and reduces discriminatory and exclusion impacts. Participation ensures good governance and social accountability and helps reduce stigma (A/HRC/31/62, para. 13).

32. Participatory approaches are essential for national Governments, local authorities and all humanitarian, development and other relevant actors to effectively prevent and address internal displacement (A/72/702, paras. 11 and 33). At all phases of displacement, stakeholders must closely consult with and actively involve persons with disabilities and promote an environment for their effective and full participation in decision-making processes, without discrimination. Accessibility is a precondition for full participation. Every effort should be made to ensure representation of the full diversity of persons with disabilities who are identified in the displaced population.

33. The Special Rapporteur has previously observed that internally displaced persons are typically not adequately informed or consulted throughout the various phases of displacement (*ibid.*, para. 11). That applies to displaced persons with disabilities, who are more likely to be limited by physical and/or communication barriers in providing their opinion in matters that affect their lives, and face discrimination, prejudice and stereotyping in camp settings and in the wider society.¹⁷ Moreover, concerns or suggestions raised by persons with disabilities appear rarely to reach humanitarian actors and coordination mechanisms or are disregarded.

34. Repeated and regular engagement by authorities, through appropriate and accessible mechanisms and processes that avoid excessively “top-down” decision-making approaches can better integrate the views, needs, capacities and priorities of internally displaced persons with disabilities. To be meaningful, participation requires two-way communication between humanitarian actors and people with disabilities, with clear responses given to concerns raised by persons with disabilities and their representative organizations. Organizations of persons with disabilities must also be included in monitoring and evaluation.¹⁸ States and humanitarian actors should give priority to voices coming from organizations “of” persons with disabilities, to be distinguished from organizations “for” persons with disabilities (A/HRC/31/62, para. 38).¹⁹

35. The active participation of internally displaced persons with disabilities is paramount in assistance and protection programming, monitoring and evaluation, and in camp coordination and management when internally displaced persons live in camps or camp-like settings. Community-based approaches to assistance foster their mobilization.²⁰ The participation of women, who are generally the main caregivers, in any decision regarding household and living should be made a priority.²¹ Building the capacities of organizations of persons with disabilities at the community level helps to develop their leadership skills and the capacity to influence policies and practices, including by joining humanitarian coordination mechanisms. Such mechanisms should also ensure their participation by answering reasonable accommodation²² and accessibility requirements. Additionally, efforts

¹⁶ See Convention on the Rights of Persons with Disabilities, articles 3 (c), 4 (3) and 29; principle 28 of the Guiding Principles on Internal Displacement; and Committee on the Rights of Persons with Disabilities, general comment No. 7 (2018) on the participation of persons with disabilities, including children with disabilities, through their representative organizations in the implementation and monitoring of the Convention.

¹⁷ See contributions from Light for the World and Amnesty International.

¹⁸ See Convention on the Rights of Persons with Disabilities, article 33 (3).

¹⁹ See also Committee on the Rights of Persons with Disabilities, general comment No. 7.

²⁰ See contribution from Light for the World.

²¹ See contribution from Amman Centre for Human Rights Studies.

²² See article 2 of the Convention on the Rights of Persons with Disabilities for a definition of reasonable accommodation.

to raise awareness in the community of the rights of persons with disabilities will help their full and meaningful participation in consultations and decision-making.

36. National and international actors should technically and financially support the creation of disability inclusion groups and networks in the context of internal displacement and build their capacities to advocate for their rights and include their perspective at all decision-making levels. Respect for freedom of expression, freedom of association and peaceful assembly all contribute significantly to public participation by persons with disabilities.

37. Partnerships and training that brings together responders and organizations of persons with disabilities are a good practice for increasing the awareness of disability of humanitarian and development actors, but also for building the expertise and interest of national organizations of persons with disabilities in issues related to displacement and durable solutions.²³ With greater awareness of the specific challenges faced by internally displaced persons, national organizations of persons with disabilities can play an important role in building relationships between hosts and displaced persons with disabilities.

38. The participation of displaced persons with disabilities outside camps presents additional challenges, as they may be dispersed among host communities in urban or rural settings. Digital media and other innovative communication tools, accessible in a variety of formats, may help reach out to displaced persons with disabilities, including those outside camp settings. Consultation of persons with disabilities within host communities also provides the authorities and their humanitarian and development partners with vital knowledge and perspectives.

Development of law and policies and political participation

39. Internally displaced persons, including those with disabilities and their representative organizations, must be consulted and their views and experience taken into consideration in developing law and policies related to displacement.²⁴ Their voice and views matter for shaping policy to make it responsive to their experience. Furthermore, their participation will reduce stigma showing that persons with disabilities are rights holders capable of participating and engaging meaningfully at all levels of society (A/HRC/31/62, para. 31).

40. Participation by the full range of persons with disabilities in the development of relevant laws and policies is impeded when information and communication are inaccessible and support is unavailable. Decision-making bodies rarely produce information in accessible formats, such as Braille or Easy Read, or ensure the availability of sign language interpretation, guide interpreters for deaf or blind persons, or captioning during public debates (A/HRC/31/62, para. 76). Accessible information and communications technologies can significantly enhance the inclusion of persons with disabilities in public decision-making processes (A/HRC/31/30, para. 52).

41. Internally displaced persons with disabilities face multiple barriers to political participation, including a lack of access to documentation allowing them to vote or stand for office and physical, communication and attitudinal barriers to meetings, polling stations and other processes. National laws may deny the legal capacity to vote or stand for election on the grounds of disability (A/HRC/19/36, para. 41 and A/HRC/31/62, paras. 19–20). Persons with disabilities should be entitled to be assisted to vote by a person of their own choice. Voting procedures, facilities and materials should be accessible. Political rights can be facilitated by the use of assistive and new technologies. Awareness-raising campaigns and material regarding the political rights of internally displaced persons should feature persons with disabilities, in particular women with disabilities.²⁵

²³ See, for example, Disability Alliance, “Bridge CRPD-SDGs Module 3 on article 11 of the CRPD”, 19 June 2019.

²⁴ See, for example, CRPD/C/UGA/CO/1, para. 20 (a); CRPD/C/MMR/CO/1, para. 21 (a); CRPD/C/HTI/CO/1, para. 20 (b); and CRPD/C/TUR/CO/1, para. 23.

²⁵ See contribution from the International Foundation for Electoral Systems.

Access to information and communications

42. Persons with disabilities and their families generally lack access to information about available services, protection and reporting mechanisms, and about their own rights. Lack of information can prevent them from accessing vital aid and services. They may be unaware of communications channels, or those channels may not disseminate information in an accessible format to the diversity of persons with disabilities or in a language they understand, particularly for indigenous peoples or other linguistic minorities. Access to information on prevention, hygiene and assistance in accessible formats is particularly important at times such as during the COVID-19 pandemic.²⁶ Protection officers and protection working group members in camps are rarely trained in appropriate communications methods and do not always provide sign language interpreters.

43. It is important to consult with persons with disabilities on their communications needs and preferences and ensure that information is disseminated and that feedback and complaints mechanisms are available through a variety of channels and in a number of accessible locations.²⁷ Examples of ways to increase access to information include training camp management, focal points and key community members on accessible communications methods; assigning sign language interpreters; and providing all key messages in multiple formats (large print, Easy Read, verbal, pictograms) at information desks, at distribution sites and in safe spaces.²⁸

44. A positive example is the establishment of a team of sign language interpreters roving between a camp and a number of host communities, which allowed for greater participation of deaf and hard-of-hearing persons in community consultations, and gave an opportunity to refer those persons with disability to organizations of persons with disabilities and other relevant services providers when necessary.²⁹

D. Data and evidence

45. The lack of accurate data on persons with disabilities among internally displaced populations is widely acknowledged and presents a significant challenge in analysing, assessing, planning, implementing and monitoring the inclusivity of responses to displacement situations.³⁰

46. A number of factors contribute to under-identification of internally displaced persons with disabilities, including lack of accessibility, adequate capacity and/or prioritization, stigma and unduly narrow definitions of disability, particularly with regard to psychosocial functioning. The operational, political and conceptual constraints on collecting information more generally on internally displaced persons make collecting and analysing data on displaced persons with disabilities particularly complex.³¹ In the absence of data, in its guidelines the Inter-Agency Standing Committee recommends assuming that 15 per cent of an affected population has a disability.

47. Nonetheless, in recent years, different actors have been collecting data on internally displaced persons, including those with disabilities, more systematically. For official

²⁶ See WHO, “Disability considerations during the COVID outbreak” (2020) and UNICEF, “COVID-19 response: considerations for children and adults with disabilities”.

²⁷ UNHCR, “Working with persons with disabilities in forced displacement” (2019), p. 14.

²⁸ See International Organization for Migration and Humanity and Inclusion, “Access to humanitarian services for people with disabilities. Situational analysis in Bentiu protection of civilians site, South Sudan” (2018), p. 9.

²⁹ See CBM International, Humanity and Inclusion and the International Disability Alliance, “Case studies collection 2019. Inclusion of persons with disabilities in humanitarian action” (November 2019), p. 36.

³⁰ See contributions by Amnesty International, Human Rights Watch, Light for the World, and the United Nations Population Fund (UNFPA).

³¹ See UNHCR, “Obtaining representative data on IDPs: challenges and recommendations” (April 2017).

statistics, the main data sources include population censuses, listings, general or internally displaced sample surveys and administrative registers. The recently adopted international recommendations on statistics for internally displaced persons offer guidance, including on the disaggregation of existing data by disability.³²

48. For example, the national victims registry in Colombia includes information on internally displaced persons with disabilities: 324,973 as of November 2019.³³ The registry of internally displaced persons in Ukraine showed 51,223 internally displaced persons with disabilities as of February 2020.³⁴

49. Collecting data on persons with disabilities in ways that respect international norms on privacy is an obligation for States that have ratified the Convention on the Rights of Persons with Disabilities (art. 31). Since its inception in 2001, the Washington Group on Disability Statistics has developed and tested tools for the collection of internationally comparable statistics on disability. Other widely used tools include the WHO disability assessment schedule. WHO also supports States in carrying out model disability surveys.³⁵

50. Anecdotal evidence suggests, however, that disability-related surveys rarely generate data disaggregated by displacement status; doing so would help increase the visibility and understanding of how internal displacement affects persons with disabilities and facilitate comparisons with persons without disabilities, and with persons with disabilities who have not been displaced. Such data could also inform relevant initiatives and promote State reporting on progress, including progress towards achievement of the Sustainable Development Goals for this specific group, particularly for targets and indicators that were prioritized for disaggregation by disability.³⁶

51. In many situations the evidence base relating to internally displaced persons with disabilities is derived primarily from humanitarian operational data collected from various sources: from aggregate data to inform strategic decision-making, risk analysis and planning to case management data for better targeting of protection and assistance.³⁷ Although the Washington Group questions are increasingly used in humanitarian contexts,³⁸ too often operational data are still not adequately disaggregated by disability, limiting their usefulness for improving responses.

52. Conducting separate data-collection exercises that focus on persons with disabilities (including needs and barriers assessments, as well as mapping of organizations of people with disabilities and disability-specific services) where it is relevant and feasible to do so is therefore particularly valuable.³⁹ The obligation to mainstream data by disability⁴⁰ is not by itself enough and should be complemented by assessments focused on disability and information on disability derived from individual case management systems. The need for awareness-raising and capacity-building in relation to disability, including for data collectors, has been recognized as essential.⁴¹

53. For certain purposes, disaggregation of operational data to the extent possible by age, sex and disability may be sufficient (for example, to calculate the number of persons with

³² See Expert Group on Refugee and IDP Statistics, *International Recommendations on IDP Statistics (IRIS)* (March 2020).

³³ See contribution from Colombia. The data can be further disaggregated by age and gender.

³⁴ See contribution from Ukraine.

³⁵ Available from www.who.int/disabilities/data/mds/en/.

³⁶ See Inter-Agency and Expert Group on Sustainable Development Goal Indicators, "Data disaggregation and SDG indicators: policy priorities and current and future disaggregation plans" (March 2019).

³⁷ See contribution from UNHCR.

³⁸ For example, in 2018 UNHCR committed to incorporating the Washington Group short question set into its continuous registration process to improve the identification and protection of persons with disabilities and to using the extended set in household surveys.

³⁹ Inter-Agency Standing Committee guidelines, p. 25.

⁴⁰ See Convention on the Rights of Persons with Disabilities, article 31, and Sustainable Development Goals 17 and 18.

⁴¹ Inter-Agency Standing Committee guidelines, p. 21, and contribution from Universidad de los Andes.

disabilities in an affected population or to disaggregate data on needs and risks). However, direct engagement with persons with disabilities is necessary to understand their experiences and perspectives (for example, experience of discrimination or targeted violence, or their views on priorities).⁴² Qualitative data-collection methods bring much added value through participatory processes and tools; unfortunately they still represent the exception rather than the rule.⁴³

54. In 2017, a multi-sector assessment of the situation of internally displaced persons with disabilities in a camp for internally displaced persons, revealed that access barriers were more severe for people with psychological disabilities, unaccompanied people with disabilities and women with disabilities because of discrimination, and that some aid workers had poor attitudes towards people with disabilities. Those findings resulted in a clear road map for all actors demonstrating how to improve access and the participation and protection of persons with disabilities.⁴⁴

55. Despite the many challenges, increased efforts must be undertaken to use qualitative data-collection methods with the meaningful participation of internally displaced persons with disabilities, ideally through or in collaboration with organizations of persons with disabilities.⁴⁵

E. Protection

56. Persons with disabilities face inequalities and heightened protection risks in situations of displacement. They often face abandonment, neglect, violence or denial of access to essential services. Persons with limited mobility and persons living in institutions may be unable to flee from trouble in the first place, leaving them exposed to violence or left to survive on their own while others have fled. Experience in various countries shows that older persons with disabilities found it harder to leave conflict zones than younger adults or older persons without disabilities. Some delayed moving or stayed behind because of functional limitations, poor health, loss of support, reluctance to leave their own communities in the absence of anywhere else to live, because of deep connections with their homes and land, or because they could not afford to leave.⁴⁶ During conflicts, families of persons with disabilities may have to choose between risking their own lives while trying to save a relative with a disability or leaving that relative behind.⁴⁷ Lack of emergency warning systems adapted for persons with sensory disabilities can also prevent their safe evacuation (CRPD/C/UKR/CO/1, para. 22).⁴⁸

57. Persons with disabilities experience violence at much higher rates than others and may experience targeted violence and abuse on the basis of their disability⁴⁹ – risks that can be exacerbated in situations of displacement, including in camp settings, because of high levels of stigmatization, social isolation and the loss of protective community networks. Loss of assistive devices can also deprive persons with disabilities of independence, forcing them to rely on others and thereby increasing the risk of exploitation and abuse. Among the types of violations brought to the attention of the Special Rapporteur are physical, sexual and gender-

⁴² Inter-Agency Standing Committee guidelines, p. 24.

⁴³ See contribution from Light for the World.

⁴⁴ See International Organization for Migration and Humanity and Inclusion, “Access to humanitarian services for people with disabilities. Situational analysis in Bentiu protection of civilians site, South Sudan”.

⁴⁵ For example, to enable persons with disabilities to give their informed consent, information on the use of their data may need to be provided in multiple formats. It may also be necessary to allocate more time for explanation and arriving at a decision. Some persons with disabilities may wish to ask a trusted person to support them in making an informed decision. See Inter-Agency Standing Committee guidelines, p. 26.

⁴⁶ See contributions by Human Rights Watch, Amnesty International and HelpAge International.

⁴⁷ See Human Rights Watch, “Central African Republic: peoples with disabilities left behind”, 28 April 2015.

⁴⁸ See also contribution from Amnesty International.

⁴⁹ See, for example, WHO and the World Bank, *World Report on Disability* (2011), p. 59.

based violence; robbery, bribery and intimidation and coercion; denial of food and essential medicine, harassment, emotional abuse and neglect, often perpetrated by persons known to them.⁵⁰ When violations are perpetrated by caregivers, they are less likely to be reported, thus fostering impunity.⁵¹ Humanitarian crises may have a particularly profound psychological impact on older persons with disabilities and exacerbate mental health and pre-existing cognitive impairments.⁵²

58. Government and other stakeholders must better research and collect data to identify the degree and prevalence of violations and their impact on the safety, well-being and dignity of internally displaced persons with disabilities. Specifically adapted services and accessible reporting mechanisms are needed. Culturally appropriate actions to prevent and respond to targeted violence against them, including through community-based approaches, should be developed in consultation with women, girls, men and boys with disabilities.⁵³ States and other humanitarian actors must systematically incorporate disability into their protection policies and frameworks to ensure that the safety and security of persons with disabilities are not overlooked during displacement (see CRPD/C/NER/CO/1, CRPD/C/HTI/CO/1 and CRPD/C/SDN/CO/1).

Situation of internally displaced women, children and older persons with disabilities

59. Internally displaced children, women and older persons with disabilities, particularly those with intellectual or psychosocial disabilities, are reportedly at risk of greater levels of abuse, violence and neglect than their peers without disabilities.⁵⁴ These individuals may face extreme isolation and marginalization in displacement situations and may be unable to access the basic health care, food, shelter and support they need to survive.

60. Children with disabilities are often stigmatized by other children by being teased or bullied and denied their right to education because of unsatisfactory accommodation of their learning needs or inaccessible infrastructures within and outside camp settings. They are often subject to sexual and physical abuse, exploitation and neglect.

61. Barriers to accessing education for displaced children with disabilities include negative attitudes from teachers, other students and parents; a lack of teachers with an understanding of inclusive education or specialized support for those with particular impairments, such as vision or hearing impairments; issues around the physical accessibility of schools or temporary learning facilities (for example, lack of ramps at the entrance or inside the school, a lack of transport solutions or adapted sitting solutions in situations where children sit on the floor); and the loss of assistive devices. Multiple forms of discrimination may arise against children with disabilities, especially against girls.⁵⁵

62. Exclusion from formal education systems is particularly concerning, as lower education achievements contribute to the cycle of poverty, including increased food insecurity, unsafe or insecure housing and lack of access to essential services such as health care. For displaced children with disabilities in particular, non-attendance at school can further limit future employment opportunities and have a lasting impact on their socioeconomic engagement and health outcomes. That can subsequently have a ripple effect within the household, support networks and/or the community as a whole. This makes it imperative for States and their humanitarian and development partners to support efforts, including in the area of education, that are accessible and responsive to the specific requirements of persons with disabilities.

⁵⁰ International Organization for Migration and Humanity and Inclusion, “Access to humanitarian services for people with disabilities. Situational analysis in Bentiu protection of civilians site, South Sudan”, pp. 41–42.

⁵¹ UNHCR “Working with persons with disabilities in forced displacement”, p. 19.

⁵² See HelpAge International “Missing millions: how older persons with disabilities are excluded from humanitarian response” (2018).

⁵³ UNHCR, “Working with persons with disabilities in forced displacement”, p. 19.

⁵⁴ See contributions from Amman Centre for Human Rights Studies, UNFPA and UNHCR.

⁵⁵ See contribution from Colombia.

63. Women may be subject to intersecting forms of discrimination and the risks are increased when they are isolated by being cut off from protective peer networks and excluded from social, cultural or economic activities that could otherwise confer protective exposure. They may face barriers to accessing sexual and reproductive health care and rights, be denied educational opportunities and be subjected to forms of domestic violence.⁵⁶ Women and girls with disabilities, and to a lesser extent men and boys with disabilities, reportedly face greater risks of sexual and gender-based violence because of stigma linked to disability, social isolation and the loss of protective community networks. However, persons with disabilities are often overlooked in sexual and gender-based violence prevention programmes.⁵⁷

64. Internally displaced older persons with disabilities may be abandoned by family members whose resources are already depleted. They appear not to access health care on an equal basis with other displaced persons and are often excluded from livelihood activities.⁵⁸

Stigma and discrimination

65. The Special Rapporteur is concerned by reports of negative stereotypes and the stigmatization of internally displaced persons with disabilities, including by service providers, camp residents and host communities. These forms of discrimination may be compounded by discrimination on the basis of, age, gender, race, religion, ethnicity or membership of a minority group.

66. Persons with disabilities are often not considered equal members of the community and are segregated in social gatherings. Some are kept “hidden” by their families because of cultural stigma. They may be addressed in derogatory language, be subject to prejudicial attitudes and are less likely to receive opportunities for paid work in camps, owing to assumptions and prejudices about their abilities to perform a task.⁵⁹ The lack of acceptance of persons with disabilities prevents them from integrating into communities and may deter them from expressing their views and concerns. Stigma and ignorance can also spark conflict within the community. For example, adults with disabilities in a camp reported emotional abuse by peers without disabilities because of the priority or assistance they received in accessing food and non-food items.⁶⁰ An organization of people with disabilities working in the camp sought to defuse the tension by organizing inclusive events and fostering other forms of positive exchanges between internally displaced persons with and without disabilities, using an approach based on disability inclusion in community development, proposing joint security patrols, and opportunities for volunteering in child-friendly places or acting as after-school tutors.⁶¹

67. Stigma and discrimination are not always deliberate; they can arise inadvertently, particularly when humanitarian staff or caregivers are not aware of or are otherwise not implementing a human rights-based approach to disability. Owing to lack of experience or training, humanitarian aid organizations may only consider persons with disabilities as an afterthought. Fighting ignorance and stigma can be best achieved through collaboration with organizations of persons with disabilities and fostering links between persons with disabilities who are internally displaced and those who are members of host communities.

Accountability and access to justice

68. The exclusion of persons with disabilities from services and assistance and the potential violations of their rights and due process need to be addressed through independent, fair and responsive reporting mechanisms, including where necessary by a judicial

⁵⁶ See contribution from UNFPA.

⁵⁷ UNHCR, “Working with persons with disabilities in forced displacement”, p. 20.

⁵⁸ See contribution from HelpAge.

⁵⁹ See, for example, contribution from Medical Aid for Palestinians.

⁶⁰ See contribution from Light for the World, annex III.

⁶¹ See contribution from Light for the World and “Disability inclusion in community development” (2019).

procedure.⁶² In order to ensure that persons with disabilities are not discriminated against while seeking to report a violation or to obtain effective remedies, such mechanisms should be inclusive and accessible, including through the provision of procedural and age- and gender-appropriate accommodations (see A/HRC/37/25).⁶³ Specific confidential processes should be followed, taking into account the barriers persons with disabilities might face.

69. Other processes linked to the principle of accountability of humanitarian actors to affected populations must also be inclusive of persons with disabilities. Indeed, humanitarian actors have a duty to make sure their assistance generates the best possible outcomes for all internally displaced persons, including those who may be less visible, such as persons with disabilities.⁶⁴

F. Accessibility of services and infrastructure

70. Persons with disabilities often do not enjoy equal access to facilities and aid and may be excluded from relief efforts (CRPD/C/HTI/CO/1, para. 20 (c) and CRPD/C/UKR/CO/1, para. 22). They may be remotely settled from essential services such as health centres, schools, water and sanitation or collection points. They may have lost their assistive devices such as tricycles, wheelchairs, canes or crutches and not be informed of any procedure to obtain replacements, or the camp terrain may be too rough or rocky for wheelchairs.⁶⁵

71. Temporary shelters may not have ramps, wide doorways, accessible toilets or clear signage. Persons with disabilities may be excluded from financial grants or in-kind construction kits because of a lack of accessible information and assumptions and prejudices about their ability to build a shelter. The material distributed may include standard items, such as tents, sleeping mats and cooking utensils, that may not be adapted for persons with disabilities. In urban contexts, persons with disabilities are sometimes accommodated with host families who might not be aware of their support needs.⁶⁶

72. Water and sanitation infrastructures may not be designed in a manner that allows everyone to use them in a safe and dignified manner. There may be no system in place to support persons with disabilities, including older persons, to fetch their own water. Latrines may lack ramps, wide doorways, seats and handrails, obliging wheelchair users to crawl on their hands on unclean and unsanitary floors. Some toilets and bathrooms do not provide enough privacy and security, particularly for women with disabilities. Furthermore, sanitary and incontinence products may not be available, requiring increased access to water and sanitation facilities.

73. Food security can also be a risk for displaced persons with disabilities. Households that include persons with disabilities are more likely to experience food insecurity, because they possess fewer economic resources and work opportunities, may require more health services and may incur extra costs and expenditure related to disability.⁶⁷ Food distribution points or information related thereto are often inaccessible. The food distributed may not be prepared or adapted for those who have difficulty in chewing or swallowing, or not be suitable for persons with particular nutritional requirements, in particular children with developmental issues and older persons. Persons with disabilities may lack adapted devices such as easy-to-grip utensils or straws. They may furthermore receive a lower level of priority

⁶² See International Covenant on Civil and Political Rights, article 2 (3) and Convention on the Rights of Persons with Disabilities, article 13. See also Basic Principles and Guidelines on the Right to a Remedy and Reparation for Victims of Gross Violations of International Human Rights Law and Serious Violations of International Humanitarian Law and Global Protection Cluster *Handbook for the Protection of Internally Displaced Persons*, at www.unhcr.org/4794b4e12.pdf.

⁶³ See also Convention on the Rights of Persons with Disabilities, article 13, and Human Rights Council resolution 37/22.

⁶⁴ Inter-Agency Standing Committee guidelines, p. 43.

⁶⁵ See contributions from Amnesty International, Light for the World and UNFPA.

⁶⁶ See contribution from UNFPA. See also International Federation of Red Cross and Red Crescent Societies, *All Under One Roof: Disability-inclusive Shelter and Settlements in Emergencies* (2015).

⁶⁷ Inter-Agency Standing Committee guidelines, p. 93.

for receiving food owing to stigma and discrimination, have their rations stolen or be separated from family or people who would otherwise provide assistance with eating and drinking.⁶⁸

74. Equal access to health services is often not guaranteed. Data received from needs assessments of older persons in Africa and the Middle East suggest that older persons with disabilities do not access health care on an equal basis with the overall internally displaced population.⁶⁹ Lack of proximity and accessibility of health-care structures, lack of accommodation of their specific health-care needs and disruption of the supply of the medication and equipment they require are some of the additional challenges faced by persons with disabilities. Injuries, psychological distress, malnutrition and other conditions may particularly impact persons with existing disabilities, or for other persons result in impairments leading to long-term disability. Access to sexual and reproductive health care for persons with disabilities is generally a low priority for health-care providers, owing to misconceptions that persons with disabilities are not sexual beings. That becomes an even greater challenge in emergency and displacement situations.

75. Ensuring that persons with disabilities, family members and organizations actively participate in decision-making and in designing, implementing, monitoring and evaluating health programmes in displacement situations is fundamental to promoting inclusiveness and accessibility. Additional targeted action may be necessary to accommodate the individual requirements of persons with different types of disability to address specific barriers that may arise in the design and delivery of health services. Access to mental health care and psychosocial safety is paramount in displacement situations and should be available for all members of the community.

76. Service providers have shown positive and inventive efforts to ensure that persons with disabilities are not excluded from relief efforts, such as transportation and door-to-door services, fast-track systems and the creation of disability support networks. However, they often address only the situation of people with physical disabilities and are frequently not integrated into an overall strategy to ensure equal accessibility of aid and services. Deliberate action is needed from the outset of any assistance project to include people with disabilities in service provision and to conceptualize an appropriate universal design of buildings and facilities. International donors have a role to play in ensuring that aid is inclusive, including by funding proposals that show that all activities are safe and accessible, and that persons with disabilities are included in needs assessments, beneficiary selection, protection and assistance activities and monitoring and evaluation efforts.⁷⁰

77. The participation of organizations of persons with disabilities in inclusive assessments, planning and budgeting, the design and implementation of assistance projects and the training of humanitarian staff in disability awareness and communications are crucial to overcoming the common challenges met by service providers. Efforts to improve inclusion, if integrated from the start, do not signify higher costs, but rather a different way of thinking and more attention paid to the issue. More systemic issues, such as the lack of visibility of persons with disabilities in assessment and response plans, owing to a lack of collection of disaggregated data, and the failure to report violations of the rights of persons with disabilities, need to be carefully addressed.

78. In the Inter-Agency Standing Committee guidelines a section is dedicated to bridging the gap between accessibility and reasonable accommodation, and in an annex there is a further explanation of the process for the provision of reasonable accommodation, given that this critical measure to ensure equal access is still not consistently understood and applied by humanitarian stakeholders.

⁶⁸ See contributions from UNFPA and Light for the World.

⁶⁹ See contribution from HelpAge International.

⁷⁰ See contribution from the United States. See also European Commission, "The inclusion of persons with disabilities in EU-funded humanitarian aid operations" (January 2019).

G. Durable solutions for displaced persons with disabilities

79. The specific needs and human rights concerns of internally displaced persons do not automatically disappear when a conflict or natural disaster ends, nor do they fade away when people initially find safety from an ongoing conflict or disaster. Rather, displaced persons, whether they return to their homes, settle elsewhere in the country or integrate locally, usually face continuing issues, requiring support until they achieve a durable solution to their displacement.

80. Internally displaced persons with disabilities may face specific challenges in making progress towards durable solutions. While all persons with disabilities have a right to make an informed and voluntary choice on what durable solution to pursue, they may not have access to information about the options and risks. Their right to participate in the planning and management of durable solutions may also be challenged by barriers to participation, as previously described. Moreover, displaced persons with disabilities often have limited access to the resources they need to reach solutions and may rely on support persons, often family members, for mobility and personal and communication assistance.

81. Addressing these challenges means putting the principles of accessibility and non-discrimination at the centre of any intervention aimed at durable solutions. It also means designing and implementing responses that are inclusive of and accessible to the diversity of persons with disabilities, while including targeted actions to support the decision-making of persons with disabilities, in particular regarding their long-term safety and security.

Access to employment and livelihoods

82. Internally displaced persons with disabilities may face additional challenges in accessing employment. Even where significant employment gaps exist in a given country, anecdotal evidence suggests that unemployment often disproportionately affects persons with disabilities, including those who are internally displaced.⁷¹ Unemployment rates, coupled with the increased cost of care, suggest that displaced people with disabilities are more likely to face financial hardship, including in cases where there is a minimal discrepancy between the income of persons with a disability and those without.

83. Disability generally does not impact on only one individual, but on the whole household. Through the increased likelihood of school absences and unemployment for other family members, it contributes to a cycle of vulnerability and poverty. Supporting income-generating activities can therefore help to improve livelihoods in the families of persons with disabilities. For example, income-generating programmes targeting parents of children with disabilities have helped them to support the education of their children with and without disabilities, catering for medical needs in addition to other basic household needs.⁷² Furthermore, States must take the specific measures necessary to accelerate or achieve de facto equality of persons with disabilities in accessing public service positions and enact policies and measures to ensure that persons with disabilities are employed in the public sector (A/HRC/31/62, para. 21).

84. Displaced persons with disabilities may be more reliant on systems of care, including increased dependence on spouses or next of kin, than those without disabilities. Assumptions that persons with disabilities will be cared for in families lead to systems and practices that increase their dependence on others and infringe their right to autonomy and independence.

Access to documentation and social benefits

85. Information received by the Special Rapporteur emphasizes that internally displaced persons with disabilities, particularly older people, often face several barriers in accessing procedures for obtaining or recovering relevant documentation, including for registering their

⁷¹ See, for example, Humanitarian Needs Assessment Programme, “Disability: prevalence and impact” (2019) and the contribution from Maat Foundation for Peace, Development and Human Rights.

⁷² See contribution from Light for the World.

disability status or even registering as a displaced person, where relevant. They may not be familiar with the procedures, which might be considered too time-consuming and bureaucratic, or they want to avoid the stigma associated with having a disability, or being internally displaced. That can in turn hamper their access to social benefits and/or pensions.⁷³

Housing, land and property

86. Access to adequate housing, land and property is important at all phases of displacement. In many contexts, internally displaced communities face the risk of forced eviction, which can also affect persons with disabilities.⁷⁴ Access to effective mechanisms that restore the housing, land and property of internally displaced persons or provide them with compensation is particularly relevant for their achievement of durable solutions, with access to information and legal advice without discrimination, which is a key challenge for many displaced persons with disabilities. Some persons with disabilities may be denied the right to sign contracts, own property or land on the basis of their legal capacity status (A/HRC/37/56, para. 24). Many of them might be unaware of their rights, where to seek advice and how to assert claims. Additional measures to support them adequately in such processes are required. When persons with disabilities and their families are in particularly vulnerable situations, their claims should be processed as a priority. Displaced women with disabilities may face compounded discrimination and barriers resulting from socioeconomic disadvantages in gaining access to their housing, land and property rights, often in connection with gaps in laws and customary practices.

IV. Conclusions and recommendations

87. **While the past decade has seen significant progress in the recognition of the rights of persons with disabilities in humanitarian and development settings, States and other humanitarian and development actors need to shift from awareness of disability to a proactive human rights-based disability inclusion strategy to manage internal displacement. States, local governments, humanitarian agencies, donors, national human rights institutions, organizations of persons with disabilities and other NGOs, internally displaced persons and host communities all have a role to play in implementing change, reducing stigma and violence by promoting inclusion and increasing the participation of organizations of persons with disabilities in managing and finding durable solutions for internal displacement. They also have a role to play in thinking about universal design from the outset of any temporary or durable services or infrastructures and ensuring accessible and transparent two-way communications between internally displaced persons with disabilities and their interlocutors in and outside camp settings. Despite inherent challenges, collecting more comprehensive data about numbers, profiles, barriers and the specific requirements of persons with disabilities in displacement contexts is a priority for informing effective and inclusive protection and assistance responses and facilitating durable solutions for them.**

88. **The Special Rapporteur thus makes the following recommendations in general terms and in specific areas of importance to persons with disabilities.**

General recommendations

89. **States and all relevant humanitarian and development actors should ensure that:**

- (a) **Their legal, policy and strategy frameworks related to internal displacement are inclusive and address the specific rights of persons with disabilities;**
- (b) **All their services, programmes and activities aimed at preventing forced displacement and protecting and assisting internally displaced persons are accessible to those with disabilities, without discrimination, by identifying and removing attitudinal,**

⁷³ See contributions from HelpAge International, Amnesty International and Human Rights Watch.

⁷⁴ See UNHCR Protection Cluster Ukraine, update October 2016, available at https://reliefweb.int/sites/reliefweb.int/files/resources/2016_10_protection_cluster_factsheet_eng.pdf.

environmental and communications barriers, and by providing reasonable accommodation when required;

(c) They invest in awareness-raising and capacity-building, allocate core funding and develop lasting partnerships with organizations of persons with disabilities to empower persons with disabilities and their representative organizations to become active contributors to the response to humanitarian needs and solutions for displacement.

90. From planning stages through to monitoring and evaluation, States and other relevant humanitarian and development actors should work in close collaboration with persons with disabilities and their organizations, and should identify and allocate sufficient financial resources to dedicate to inclusive preparedness and response efforts in support of displaced persons with disabilities.

91. Donors funding national and international support for internally displaced persons should make disability inclusion a requirement in project proposals. Funding for addressing humanitarian crises and displacement situations should benefit persons with disabilities on an equal basis with others. Donors should also dedicate specific funding opportunities for projects aimed at realizing the inclusion and participation of internally displaced persons with disabilities and building the capacity of organizations of persons with disabilities to make their programmes inclusive of internally displaced persons with disabilities.

Participation

92. Displaced persons with disabilities should be at the centre of any decision-making process relevant to them and their capacities and efforts as agents of change in their families and communities should be supported by all relevant stakeholders.

93. States and all relevant stakeholders should ensure persons with disabilities have equal opportunities to participate in and promote the participation of displaced persons with disabilities in policy and programme development, implementation, monitoring and evaluation.

94. International and local organizations of persons with disabilities should be actively involved in the response to displacement and work in partnership with responders to increase mutual understanding of issues related to disability and displacement. Together, they can more effectively work to raise the awareness of operational actors and communities affected by displacement of the rights of persons with disabilities, and train operational actors on practical approaches to addressing access and participation barriers.

95. In both camp and out-of-camp settings, displaced persons with disabilities should be represented in community leadership structures and other community-based protection mechanisms, taking account of the range of disabilities, as well as gender, age and other aspects of diversity. Specific attention should be given to underrepresented and marginalized groups, such as persons with intellectual and psychosocial disabilities, persons with deafblindness, women and girls and indigenous or minority groups.

96. Organizational good practices in the inclusive delivery of services should be more widely promoted, including establishing disability focal points; providing mobile assistance teams with specific expertise; training staff on eliminating stigma and stereotypes and on universal accessibility designs and the provision of reasonable accommodation; promoting peer support and the creation of networks of volunteers; and hiring persons with disabilities.

97. States and their humanitarian and development partners should prepare key messages in multiple accessible modes, means and formats, including sign language. Information about services, infrastructures and activities, and about procedures for feedback and complaint, should be effectively disseminated in accessible formats.

Persons with disabilities should be consulted on their communications needs and preferences.

98. Proactive efforts should be made to engage displaced populations in structures and processes that promote the rights of persons with disabilities, including in national, regional and global networks of organizations of persons with disabilities.

Data and evidence

99. States and other humanitarian and development actors, as relevant, should:

(a) Invest in generating evidence on the impact of forced displacement on persons with disabilities and documenting effective practices for promoting fulfilment of their rights;

(b) Integrate a disability inclusion lens into efforts to develop official statistics on internal displacement in line with the international recommendations on statistics related to internally displaced persons and the upcoming manual for data compilers;

(c) Integrate a disability inclusion lens into operational data-collection systems and processes that focus on or include displacement, as appropriate and feasible, including data adequately disaggregated by age, sex and disability, particularly through the use of the Washington Group methodology. When data is not available, an assumption that 15 per cent of an affected population has a disability is recommended;

(d) Develop standardized methods for the identification of information and data on barriers faced by persons with disabilities, as a first step to developing solutions to address them;

(e) Use innovative qualitative data-collection methods that allow for the participation of and effective engagement with all the various groups of persons with disabilities;

(f) Develop stronger partnerships between organizations of persons with disabilities and those collecting data on internal displacement, with a focus on capacity-building and sharing expertise, as relevant;

(g) Make better and greater use of existing data on internally displaced persons with disabilities through enhanced data-sharing practices within appropriate data protection standards and protocols.

Protection and accountability

100. States and their humanitarian and development partners should:

(a) Inform and train persons with disabilities, their families and support persons on their rights and entitlements, and how to recognize, avoid and report instances of violence, exploitation and abuse;

(b) Inform and train the police, health workers, child protection actors and others to identify and respond to abuse of and violence against persons with disabilities, including understanding the unique risks and barriers to reporting arising out of the intersection between disability and displacement;

(c) Ensure persons with disabilities and their representative organizations are involved in protection needs assessments, in particular women, children, older persons and those belonging to a minority or other identities;

(d) Implement strategies to reduce stigma about disability and take steps to make the internally displaced populations at large and other communities affected by displacement aware of the rights of persons with disabilities;

(e) Establish a system to monitor persons at heightened risk and develop and implement culturally appropriate actions to prevent and respond to targeted violence against displaced persons with disabilities, including through community-based approaches;

(f) Integrate displaced persons with disabilities throughout prevention and response mechanisms for sexual and gender-based violence;

(g) Ensure that persons with disabilities have equal access to reporting and complaint mechanisms, and that their concerns are acknowledged and addressed. To ensure an adequate response to the violations they may face, reporting mechanisms for human rights violations should include and pay specific attention, among others, to women, children and older persons with disabilities and persons with disabilities belonging to a minority. Feedback or confidential reporting mechanisms should be accessible to all, with particular attention paid to victims of sexual and gender-based violence, and meaningful two-way communications should be ensured and be accessible to all groups of persons with disabilities;

(h) Support the access of internally displaced boys and girls with disabilities to inclusive and quality education on an equal basis, including by concretely addressing barriers and providing reasonable accommodations to children with different types of disabilities to ensure their effective access in accordance with their specific requirements.

Durable solutions

101. Whether internally displaced persons with disabilities choose to integrate locally, return or settle elsewhere, States should ensure that any durable solution intervention contributes to “build back better”, applying the principles of participation, accessibility, non-discrimination and universal design to all aspects of life. That will help internally displaced persons with disabilities to overcome any specific assistance and protection challenges they might have and to enjoy their human rights without discrimination.

102. In particular, States and their humanitarian and development partners, as relevant, should:

(a) Provide information about options for solutions in accessible formats, putting in place additional measures to support decision-making by displaced persons with disabilities;

(b) Identify any specific assistance required to support returns, local integration or settlement elsewhere of displaced persons with disabilities, in line with their preferences. Outreach might be necessary to identify persons at heightened risk so that they can be prioritized in durable solution processes;

(c) Facilitate access on an equal basis to mechanisms for family reunification for families separated by displacement, prioritizing persons in particularly vulnerable situations;

(d) Support internally displaced persons with disabilities in accessing employment and livelihoods on an equal basis, including by identifying barriers and taking steps to remove those barriers, providing reasonable accommodations to persons with disabilities, as necessary, to facilitate their full inclusion and promoting their right to autonomy and independence;

(e) Facilitate the access of all internally displaced persons with disabilities, including through reasonable accommodations that may be required, to the personal and other documentation necessary for access to public services and for political participation, among others, and where relevant, guarantee access without discrimination to procedures for registering as internally displaced persons and/or as persons with disabilities;

(f) Take steps to support internally displaced persons with disabilities in accessing mechanisms to restore their housing, land and property rights, including by sharing information in accessible formats and prioritizing the claims of the most vulnerable.