

## Why accident survivors and their families need an inter-sectoral approach.

### More than half of the families in northwest Syria have a family member with disability<sup>1</sup>

In Syria, it is extremely challenging to have accurate data on the prevalence of disabilities in a conflict-affected and highly mobile population. However, the prevalence of disabilities is high in Syria.

Currently, there is more emphasis on prevention of Explosive Ordnance (EO) accidents through Mine Action Assistance (SA), which is mostly limited to Health and Rehabilitation. The inter-sectoral vulnerabilities of EO accident survivors and their families are widely unknown.

A single injury may impact families in multiple ways, leading to school drop-outs, early marriages or increased vulnerability. In the context of limited access to infrastructure and services due to years of conflict, the needs and vulnerabilities of EO accident survivors and their families are widely unknown.<sup>2</sup>

Despite the vulnerabilities aggravated by disabilities, persons with disabilities are often excluded from aid due to a lack of understanding or awareness among humanitarian actors. Discrimination in Syria, causing persons with disabilities to feel unsafe in their homes.

### Comprehensive Survivor Assistance programme funded by ECHO

The 2019 – 2020 ECHO-funded HALO/HIHFAD Mine Action project addressed multi-dimensional vulnerabilities of the survivors and their families through five main components:

<sup>1</sup> Humanitarian Needs Assessment Programme (HNAP) report in September 2020 reveals that 57% of the surveyed households have a family member with disabilities in northwest Syria.

<sup>2</sup> Cash and Voucher Assistance for Achieving Protection Outcomes in Mine Action, Task Team on Cash for Protection, scheduled in December 2020.



I'm no longer feeling despair or defeated. My peer support coordinator told me that he had a similar situation with his injury but that he did not give up hope. He later found a job opportunity. So I'm continuing medication.  
(23-year-old male, inernal displaced)

Being able to make a difference in someone's life encouraged me. (Peer support coordinator)  
Some of them were able to accept their injuries when he came, and other injured persons, working as a coordinator.

#### PROSTHETIC SUPPORT:

Started with referral service to one of the few prosthetics centres in Idlib, HHFAD expanded its coverage across NW Syria with 4 prosthetic centres. Prosthetic limbs and orthotic devices can dramatically increase mobility and improve the quality of life of those living with disabilities. In 2015, Humanity and Inclusion estimated over 80,000 Syrian people needs prosthetics, as fighting intensified, the estimate is likely bigger today and they remain under-served given limited interventions in NW Syria.

#### MOBILE OUTREACH:

Mobile teams visited homes of patients with enduring difficulties (physical and/or financial) preventing access to rehabilitation facilities. The teams provided them with basic and essential services of physiotherapy, nursing, and PSS. Central to the concept of "mobile outreach" was the training of the patients and their caregivers to self-care so that they could continue caring for their own injuries while rehabilitating and improving their physical functionality and mobility. A team of two physiotherapists, a nurse, and a PSS worker jointly assessed patients and customised treatment plans for each patient and caregiver to follow.

#### MATERIAL SUPPORT:

Based on the overall level of household vulnerability and individual needs, material support was provided to beneficiaries in need as well as medical and/or rehabilitation support. Among 475 households, a high percentage opted for basic needs - food basket (73%), mattress/blanket/pillow (50%), schoolbags (34%), carpet (19%), kitchen kits (18%), solar system (18%).

While some requested disability specific items (32% for adults/child diapers, 18% for toilet chairs, 8% for wheelchairs), fewer selected more specific items linked to improvements of the survivor's conditions (medical bed, home modification, surgery related costs). This trend is also corresponding with the HNAP September 2020 report findings (only 7% of the respondents commented that dedicated disability assistance is their priority while 44% reporting their immediate needs for food). This data suggests the greater need is to adapt a twin track approach, to address both needs of the households, providing means to mitigate their immediate needs as well as specific service targeting disabilities, not to make the survivors with disabilities marginalized within their own families.

#### Recommendations for future improvements to Survivor Assistance:

- Resource holistic MA intervention programmes to address complex issues faced by survivors.
- Encourage partnership and case management mechanisms, all required support cannot be provided by a single organization or facility.
- Pilot cash transfers to help survivors meet their basic needs.
- Encourage and promote good practices with survivors.

HiHFAD has devoted much effort to help survivors and their families. The organization has been successful in providing support to survivors and their families.