Case Study
May 2022

Unshielded, Unseen
The Implementation of UNSC Resolution 2475 on the Protection of Persons with Disabilities in Armed Conflict in Yemen
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Our heartfelt thanks go out to the representatives of persons with disabilities organisations (OPDs) in Yemen and affected persons who shared their valuable insights and testimonies with us. We hope that a better understanding of the situation of persons with disabilities in the armed conflict in Yemen will lead to increased attention and resources to tackle the issues raised.

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Glossary

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Humanity & Inclusion in Yemen

Humanity & Inclusion (HI), also known as Handicap International, supported physical and functional rehabilitation services for explosive ordnance (EO) survivors and persons with disabilities in Yemen from the early 2000s up until 2012. Since 2015, HI has been providing direct services to all individuals affected by the ongoing conflict. HI provides rehabilitation services as well as assistive devices and technologies, and psychosocial support, and works to ensure that humanitarian assistance reaches the most vulnerable populations in Yemen.
Introduction

Entering its eighth year, the war in Yemen has been defined by flagrant and consistent violations of international humanitarian law, leaving hundreds of thousands of people killed and injured and millions displaced. It is estimated that the cumulative impact of the past seven years of fighting and the continuing degradation of infrastructure and services has already killed around 377,000 Yemenis.(1) While around 150,000 Yemenis have died in direct conflict-related attacks, a staggering 60% of civilian deaths are due to indirect consequences of the conflict such as hunger and disease.(2) In addition to the significant loss of life, a shocking 23.4 million people, over three-quarters of the population, have been left in need of some form of humanitarian assistance.(3)

It is clear that the devastating impact of the war in Yemen goes well beyond the excess mortality and civilian casualties directly caused by the ongoing armed violence. Indeed, after seven years, the needs in Yemen are more complex than ever before, with systemic issues such as acute economic decline, the total rupture of social fabric, and the decimation of public infrastructure and services among the main causes of civilian suffering, putting vulnerable populations at significant risk.

Persons with disabilities are among the most marginalised in crisis-affected communities and the situation in Yemen is unfortunately no different. While the conflict in Yemen has affected all civilians, the war has exacerbated existing socio-economic vulnerabilities and in particular heightened the discrimination experienced by persons with disabilities across the entire spectrum of economic, social, health and civil rights. Confronted with all the challenges the general population faces as a result of the war, persons with disabilities in Yemen face additional hurdles that strongly undermine their safety, dignity and ability to participate in Yemeni society. Some of these challenges include barriers to equal access to services such as humanitarian assistance, healthcare, education and employment opportunities, but also obstacles to meaningful participation and representation in humanitarian programme development processes and governance, as well as peacebuilding and conflict prevention efforts.

On 20 June 2019, the UN Security Council unanimously adopted Resolution 2475, a landmark resolution calling on states and parties to armed conflict to protect persons with disabilities in conflict situations and to uphold their rights, including by ensuring they have access to justice, basic services and unimpeded humanitarian assistance. Comprehensive and clear, Resolution 2475 established several concrete actions that states, parties to conflicts, the UN and the international community at large must take in order to address the challenges experienced by persons with disabilities in situations of armed conflict. However, with the impact of the Resolution being entirely dependent on its implementation, lack of action on the ground leaves persons with disabilities disproportionately affected by conflicts around the world. This is especially the case in Yemen, where some 4.8 million people are estimated to have at least one form of disability, although there is currently no reliable data available on persons with disabilities in Yemen.(4)

Methodology

This document provides a non-exhaustive examination of the situation of persons with disabilities in Yemen in relation to the provisions contained in Resolution 2475 and proposes recommendations to facilitate its implementation in Yemen. For this purpose, both a literature review and key informant interviews with representatives from eight local Yemeni organisations of persons with disabilities (OPDs) were conducted, as well as talks with affected persons and INGO professionals in the field. These interviews and research were conducted from March to April 2022. This document also reflects anecdotal and empirical evidence from HI’s experience in implementing activities for and with persons with disabilities in Yemen.
1. Internation Law & Accountability

Resolution 2475, Operational Paragraph (OP) 1.
“Urges all parties to armed conflict to take measures, in accordance with applicable international law obligations to protect civilians, including those with disabilities, and to prevent violence and abuses against civilians in situations of armed conflict, including those involving killing and maiming, abduction and torture, as well as rape and other forms of sexual violence in conflict and post-conflict situations;”

Resolution 2475, OP 2.
“Emphasises the need for States to end impunity for criminal acts against civilians, including those with disabilities, and to ensure that such persons have access to justice and effective remedies and, as appropriate, reparation;”

Rampant Violations of International Law

Having entered its eighth year, the war in Yemen has been defined by flagrant and consistent violations of international humanitarian law, leaving thousands of people killed, tens of thousands injured, millions displaced and over two-thirds of the population in need of some form of humanitarian assistance. Even after seven years of conflict, indiscriminate attacks on the civilian population, including persons with disabilities, by all parties to the conflict remain widespread, ravaging the entire nation and continuing to cause significant material damage, injury and loss of life. Conflict, economic deprivation, the COVID-19 pandemic, and mass displacement have exposed an already vulnerable population to an increased risk of impairments – a large number of which are likely to result from the use of explosive weapons and contamination by explosive ordnance. The targeting of health facilities by armed actors and limited access to basic services also risks compounding existing impairments. Moreover, the reverberating effects caused by the use of explosive weapons with wide-area effects will continue to affect access to food security, healthcare and other services in the long term for vulnerable groups, such as persons with disabilities. The extensive explosive ordnance contamination in the country’s towns and cities is also likely to impede their safe return and socio-economic inclusion for decades to come.

“We, persons with disabilities, are often afraid to go outside. We live with a constant fear of getting injured since we simply cannot escape when explosions or armed clashes take place. This is a fear of every Yemeni, yet our limitations prevent us from being able to quickly get away from hostile situations. It is a constant fear persons with disabilities in Yemen live with, and it’s holding us back from being able to do many things such as looking for sources of income.”
OPD representative interviewed by HI.

January 2022 saw the highest rates of fatal attacks on civilians and civilian infrastructure in over three years,(5) showing the lack of progress in protecting civilians from armed violence, with marginalized groups such as persons with disabilities most at risk. For example, a respondent interviewed by HI indicated that many persons with hearing disabilities have sustained conflict-related injuries due to their inability to hear and understand what is happening during attacks or armed clashes. They further stated that the specific sense of insecurity due to not being able to perceive situations of violence creates
significant and often debilitating feelings of anxiety and psychological distress in these individuals.

In addition to pre-existing stigma and discrimination, persons with disabilities have also been disproportionately affected by the armed conflict because it heightens this discrimination across the entire spectrum of economic, social, health and civil rights. Furthermore, in times of war, health, institutional and economic structures collapse and the resulting barriers to access exacerbate structural inequalities.

A Prevailing Environment of Impunity

Despite the blatant disregard for international law, including the Convention on the Rights of Persons with Disabilities (CRPD), in October 2021, the UN Human Rights Council voted to reject the renewal of the mandate of the Group of Eminent Experts on Yemen (GEE), the only international and independent body investigating violations and abuses of international law committed by all parties to the conflict. Not only has this put millions of already vulnerable lives at further risk, but the decision not to renew this mandate, also sent the message that those violating the rights of the Yemeni people may act with impunity with no one to hold them to account. In fact, data reveal that the number of civilians killed or injured in Yemen almost doubled since the suspension of the GEE’s mandate, from 823 civilians killed in the four months before October 2021 to 1,535 in the four months that followed. With 200 air raids and up to 716 individual airstrikes, February 2022 constituted the longest period of heavy bombing since 2018.

Although a truce was declared in April 2022, it is yet to be seen how long it will be upheld and respected, and whether or not it will culminate in sustainable peace talks. Although cross-border attacks have ceased since the truce was instated, dozens of violations on the ground continue to be reported on a daily basis. Moreover, it is important to note that the protection of persons with disabilities in armed conflict goes well beyond the establishment of a temporary truce.

Nevertheless, the unexpected dismantling of the GEE made it even clearer that one of the primary obstacles to ending civilian suffering in Yemen remains a lack of political will. Although a monitoring mechanism would not eliminate the violations, accountability requires the impartial documentation of violations by all parties to a conflict, in order to ensure pathways towards international justice for all victims of the conflict, including persons with disabilities. It is also important to note that the GEE was one of the only bodies to investigate and collect information on the situation regarding the rights of persons with disabilities in the armed conflict in Yemen, despite being limited by the many restrictions it faces when collecting data on the ground.

Abdullah is 12 years old. Severely injured in an aerial bombing in December 2019 while playing outside with friends, he had to be amputated. HI’s teams provided him with psychological and rehabilitation support. Since Abdullah could not be fitted with a brace right away, HI first provided him with a wheelchair and a pair of crutches. He then received his adapted prosthesis and underwent rehabilitation sessions to learn to walk again.

Sanaa, Yemen. © ISNA Agency / HI
2. Access to Humanitarian Assistance

Resolution 2475, OP 3.
“Calls upon all parties to armed conflict to allow and facilitate safe, timely and unimpeded humanitarian access to all people in need of assistance;”

Resolution 2475, OP 4.
“Underlines the benefit of providing sustainable, timely, appropriate, inclusive and accessible assistance to civilians with disabilities affected by armed conflict, including reintegration, rehabilitation and psychosocial support, to ensure that their specific needs are effectively addressed, in particular those of women and children with disabilities;”

Humanitarian Access Constraints

Humanitarian access in Yemen remains extremely restricted. Although there has been some progress in the ability of humanitarian organisations to deliver principled assistance in Yemen through humanitarian diplomatic efforts with the authorities, the UN, and donor governments, humanitarian partners continue to devote tremendous amounts of time and resources to overcome significant bureaucratic impediments to deliver a principled, accountable, effective and timely humanitarian response. An estimated 10 million Yemenis (around 50% of the population in need) across Yemen are living in areas affected by access constraints, and out of 21 governorates, 16 are considered to be hard to reach. This is a reality that particularly affects persons with disabilities’ access to the assistance they require. In fact, in its survey of persons with disabilities in Yemen, HI found that a shocking 81% felt that they were unable to reach or use humanitarian services.

Most of HI’s rehabilitation patients travel from other governorates to access services provided by HI, often travelling for several days along dangerously contaminated roads across active frontlines and checkpoints, with unsafe means of transportation to obtain specialised treatment for complicated injuries.

HI data suggest that delays in reaching health services can lead to life-long impairments, particularly for victims with complicated injuries caused by explosive ordnance and patients with untreated chronic illnesses. These delays can be due to personal physical restraints but are mostly due to remoteness, the suspension or unavailability of services, as well as destroyed roads, bridges and infrastructure. Moreover, the continued economic crisis further limits persons with disabilities’ access to services, as they cannot afford the cost of transportation due to fuel price hikes which effectively prevents them from reaching the assistance they need.

Lack of Inclusive Humanitarian Action

In 2019, the Inter-Agency Standing Committee (IASC) released the IASC Guidelines on Inclusion of Persons with Disabilities in Humanitarian Action, a document setting out essential actions that humanitarian actors must take in order to effectively identify and respond to the needs and rights of persons with disabilities in humanitarian settings. Although some efforts have been made in Yemen towards implementing these guidelines and inclusive humanitarian action more generally, humanitarian coordination and programming in Yemen are still far from being inclusive of persons with disabilities: their specific needs and barriers to services are still not adequately identified and monitored, while humanitarian actors still have a limited capacity for disability inclusion. Moreover, interventions for persons with disabilities are still perceived as being limited to specialised health services, to be addressed by specialised actors, without considering their mainstream needs.

The dire situation of persons with disabilities in Yemen is also strongly exacerbated by widespread displacement. Most IDP sites lack adequate basic services such as accessible shelter and latrines as well as proximity to food distribution points, while services and activities that take the specific needs of persons with disabilities into account are often not present.
“Key protection assistance in such as Gender-Based Violence (GBV) services are generally inaccessible to women and girls with disabilities, while teachers for non-formal education activities in camps are not adequately equipped to accommodate students with disabilities. Persons with disabilities are often also not represented in camp committees or other community governance mechanisms, resulting in their needs and concerns not being voiced towards camp management and implementing organisations.”

Adrian Carrillo, HI Yemen Inclusion Technical Specialist

Moreover, the conflict and resulting displacement increase the risk of persons with disabilities being separated from caregivers and support networks, or even abandoned,[10] leaving them increasingly dependent on aid provision that is not only hard to reach, but also not sufficiently tailored to their needs. Moreover, in Yemen, the participation of organisations of people with disabilities in humanitarian coordination platforms such as clusters and working groups is not monitored nor systematised, meaning that barriers cannot be identified and removed. At the same time, Accountability towards Affected Population (AAP) mechanisms do not specifically target persons with disabilities, meaning that they are excluded from highlighting risk situations and barriers that may prevent them from receiving basic services.

“...people who have acquired disability during the war did so because of injuries from airstrikes, landmines and other explosive remnants of the war.”


Scarcity of Disaggregated Data

A major barrier to inclusifying the humanitarian response remains that persons with disabilities’ needs and barriers are still invisible in existing humanitarian data and monitoring efforts. Most humanitarian actors in Yemen only disaggregate data by age and gender and do not collect and analyse information about the needs of persons with disabilities nor engage with them meaningfully throughout the data cycle. This lack of disability-inclusive data collection and monitoring practices brings with it a heightened risk of violence and abuse against persons with disabilities, whose protection risks are not adequately identified, monitored and addressed in protection monitoring mechanisms and strategies.

Although the data are insufficient, it is nevertheless clear that after seven years of conflict, corresponding rates of conflict-related injuries and impairments as an indirect result of the conflict have risen substantially, thus adding to the number of persons with disabilities and consequently increasing the demand for both specialised and mainstream services.

Absence of Comprehensive Victim Assistance

In Yemen, a significant number of persons have acquired an impairment as a result of explosive ordnance, while others have been significantly impacted by material and economic losses, psychological damage and/or displacement as a result of its sustained and widespread use. Most direct and indirect victims of explosive ordnance face significant challenges in accessing services, mainly because service provision remains concentrated in urban centres, far from the majority of explosive ordnance victims. Rehabilitation activities are severely hampered by a lack of medical capacity and trauma care professionals in the country, while a severe shortage of female rehabilitation professionals also specifically prevents female explosive ordnance survivors from accessing the services they need.[11]

Another key issue in the Yemen humanitarian and development response is the lack of an intersectoral
and coordinated approach that integrates additional components beyond standard rehabilitation activities. MHPSS, livelihood programming, education and other activities specifically targeting the mainstream needs of survivors, other persons with disabilities and indirect victims, remain critically underfunded and under prioritised, cutting survivors off from the vital assistance they need to recover and build resilience.

3. Access to Basic and Specialised Services

Resolution 2475, OP 5.
“Encourages Member States to take appropriate measures to ensure that persons with disabilities have access on an equal basis with others to basic services provided in the context of armed conflict (...);”

Both mainstream and specific services for persons with disabilities have been disrupted by the conflict, while the resources available to this group have decreased substantially over the past seven years. Persons with disabilities in Yemen have been disproportionately affected by the extensive institutional collapse induced by the war. The services available to them were already limited before the conflict, but have now been almost completely decimated.

In a previous survey, HI found that 86% of persons with disabilities experienced problems in accessing basic services. Barriers include the absence of services, remoteness, physical access as well as economic and social discrimination. Safety when travelling is also a major concern. Continuing conflict and shifting frontlines constitute further hurdles to access, and exacerbate the needs of all civilians, but especially those with disabilities who often depend on others to reach services.

Decimated Institutional and Civil Society Capacity

The government of Yemen is a signatory to the Convention on the Rights of Persons with Disabilities (CRPD) and therefore has the obligation to provide the necessary support to persons with disabilities, including funds, to persons with disabilities and the organisations providing services.

Since 2002, the main institution providing assistance to persons with disabilities in Yemen is the Handicap Care and Rehabilitation Fund, a government institution which previously provided rehabilitation services and financial support to persons with disabilities, as well as initiatives to improve access to education and employment. However, as its sources of funding include customs duties paid by private-sector businesses and taxes on commodities such as airline tickets, the Handicap Care and Rehabilitation fund’s budget has taken a massive hit since the escalation of hostilities. The situation has been further exacerbated by the complete institutional collapse, the acute economic decline, and the continued territorial division and emergence of two different government administrations operating independently. This has led to the establishment of so-called “twin incarnations” of the fund in both areas under the control of the internationally recognized government and the de facto authorities in the North, further decreasing resources and complicating the coordination of service provision to persons with disabilities.

Although prior to the war significant efforts were made to develop a comprehensive and ambitious national strategy document to promote the rights of persons with disabilities in Yemen, representative organisations have indicated that all efforts to implement the strategy have ceased since the onset of hostilities in 2015 and that vital momentum for promoting rights for persons with disabilities has been lost.
“I no longer pay much attention to resolutions such as 2475 or action plans, since there is literally no institutional capacity or judicial authority to actually implement any of the actions proposed in these documents. Even organisations fall short of implementing the provisions. Without capacity, they will never be acted on.” **OPD representative interviewed by HI**

Moreover, prior to the war, there were more than 300 local organizations working in Yemen to provide services for persons with disabilities.\(^{14}\) Today, only a fraction remain, with extremely limited capacity and resources to provide assistance to persons with disabilities.

All the organisations interviewed by HI mention a lack of financial resources and indicate that contributions from the government and international organisations often only cover their running costs. Representatives of organisations of persons with disabilities also indicated that most of the already limited services available to persons with disabilities disproportionately target those with physical disabilities, leaving the needs of persons with sensory, psychosocial or intellectual disabilities largely unmet.

**Disruption of Mainstream Services**

Aside from specific services for persons with disabilities, a significant proportion of the mainstream services persons with disabilities also depend on have been decimated. The war has wreaked havoc on the country’s health system in particular, wiping out approximately 50% of its health facilities. There have been widespread direct and indirect attacks on health facilities throughout the conflict. Even those which have not sustained physical damage from explosive weapons are impacted by the damage inflicted by explosive weapons on civilian infrastructure more generally, including roads or ports. When key transportation hubs are destroyed or roads damaged, medical goods and humanitarian supplies can no longer be transported. Disruptions to transport and supply chains caused by the broader conflict in Yemen have also caused severe shortages of the medical supplies and medicines persons with disabilities may depend on to survive or alleviate pain and symptoms originating from their disability or other afflictions.

The respondents interviewed by HI also repeatedly and strongly emphasized the fact that the lack of livelihood and employment opportunities for persons with disabilities are some of the key drivers of economic marginalisation that are scarcely addressed by either the authorities or international organisations. At the same time, other services such as accessible education have been interrupted or even completely shut down, severely restricting children and adolescents with disabilities’ access to education.

**Armed Violence and Remoteness**

Yemen’s jagged geography combined with the high dispersion and remoteness of communities remain key obstacles to persons with disabilities reaching the assistance they need. While around 60% of Yemeni civilians live in rural areas,\(^{15}\) the vast majority of services still functioning, especially specialised ones, are concentrated around urban centers, making it extremely difficult for persons with disabilities to reach the services they require. Most importantly, the use of explosive weapons in populated areas has destroyed the infrastructure (health, education, livelihood, etc.) needed to allow persons with disabilities to fully participate in all aspects of life. Moreover, the impact of the armed conflict has severely complicated access as transport systems, including roads and bridges which are both critical infrastructure components, have been extensively damaged. The impact of road closures as a result of shifting frontlines and the destruction of transportation networks have also made it much harder for persons with disabilities to reach services.\(^{16}\)
Economic Decline

In Yemen, the conflict-driven economic collapse has resulted in steep increases in food and fuel prices and pushed millions of people into extreme poverty. After seven years of conflict, the socio-economic conditions continue to deteriorate rapidly, with fuel supply shortages and trade disruptions further aggravating what was already considered an extremely fragile economy prior to the war. This reality has particularly affected persons with disabilities, who already face significant economic marginalization, lack of livelihood opportunities, largely depend on caregivers and often unable to find adapted livelihood and employment opportunities. One of the key barriers identified when interviewing affected persons, was the fact that due to economic hardship and the ongoing fuel crisis, persons with disabilities were unable to afford the necessary transportation to access services, especially specialised healthcare. The majority of patients have to travel to specialized services from other governorates, and given the severe fuel shortages, this incurs significant costs that prevent many people from seeking the assistance and support they require.

Exclusion through Lack of Intersectionality

The Organisations of Persons with Disabilities interviewed by HI explained that the absence of an intersectional approach and understanding thereof is also preventing people from receiving the assistance they need. Many people in Yemen live with more than just one disability and are often excluded from accessing specific services because their needs go beyond just one form of disability and cannot be addressed with a single, one-size-fits-all approach. One interviewee described how a deaf child diagnosed with an autism disorder was excluded from accessing educational tutoring activities provided by several different associations because none of them had the resources and capacity to address the child’s intersecting needs from being both autistic and deaf.

Some groups of persons with disabilities are also more excluded than others. For example, a significant number of HI’s rehabilitation patients are refugees or illegal immigrants who sustained injuries during their displacement, and who often find themselves unable to access the care they need due to their status.
Another group facing significant hurdles are the muhamasheen, a tribe-less social group in Yemen, treated as pariahs. The deeply entrenched centuries-long discrimination against this population means they are frequently denied access to healthcare and other services. Older persons with disabilities also face discrimination resulting from attitudinal barriers imposed by family members who, due to the perception of age-related disabilities being a normal part of the ageing process in combination with economic hardship, may not prioritize seeking treatment to improve the quality of life of the older person.

Thus, persons with disabilities from these groups, as well as others, face significant intersectional discrimination that prevents them from accessing services and enjoying their rights.

4. Barriers to Meaningful Participation

Resolution 2475, OP 6.
“Urges Member States to enable the meaningful participation and representation of persons with disabilities, including their representative organisations, in humanitarian action, conflict prevention, resolution, reconciliation, reconstruction and peacebuilding, and to consult with those with expertise working on disability mainstreaming;”

Underrepresentation, Superficial Inclusion & Tokenization

The CRPD affirms the right to participate in decision-making processes. Persons with disabilities are therefore entitled to participate in making the decisions that affect them, including humanitarian decisions, as well as decisions in relation to peacebuilding, reconciliation and reconstruction efforts. Not only should persons with disabilities be included on the basis of their rights, but also because they can provide knowledge and skills. Persons with disabilities can provide critical insights into the nature of peace and the changes needed to transform factors such as broader exclusion and discrimination, which often play a key role in the outbreak of conflict.

However, in Yemen, persons with disabilities and their representative organisations remain very much underrepresented in such efforts, with the vast majority of local organisations interviewed by HI reporting that they had never been invited to participate or engage on these topics. When persons with disabilities in Yemen are included in conversations related to peacebuilding and conflict prevention, their participation appears to be tokenized and not necessarily meaningful. One of the key issues is that they are generally invited to share their disability-related experiences as opposed to general perspectives on the humanitarian response, peace and conflict, which therefore excludes them from any meaningful participation in these efforts. Their participation also remains superficial in the sense that although they may be invited to take part in certain conversations, they are by no means sustainably engaged throughout processes and only rarely offered an actual seat at the table.

“We have never been asked to participate in any such initiatives. This is a shame, since we are in fact the most affected by the conflict, and therefore have very valuable insights to share. We should have a seat at the table.”
OPD representative interviewed by HI

Moreover, the participation of persons with disabilities in such processes in Yemen is not tracked, quantified or followed up on. It is precisely this scarcity of data that forms a major obstacle to meaningfully including persons with disabilities in such activities. To support disability inclusion, those involved in shaping humanitarian interventions, peace, conflict resolution and other processes must understand and take into consideration who is participating and who is not.
Accessibility Impediments

Other barriers that exclude persons with disabilities from meaningful participation include impediments to physical accessibility, as premises and government buildings in Yemen are rarely adapted to be accessible for persons with disabilities. Stairs, the absence of ramps and accessible bathrooms are all examples of obstacles that prevent them from participating, along with the absence of inclusive transportation to reach the premises in the first place. As public transport in Yemen is by no means adapted to the needs of persons with disabilities, and given that many of them are dependent on their caretakers or others to move around, organisations should provide transportation adapted to the needs of the persons they wish to include. Moreover, in the interviews HI conducted with persons with disabilities and their caregivers, it became clear that caregivers in Yemen are often the sole breadwinner in their family, usually employed as day labourers in the informal sector. This means a significant financial impact is felt by the entire family if a caregiver has to accompany their family member with a disability to attend a specific event, even if just for one day.

Another key concern is that even when organisations do make a conscious effort to make their premises accessible, they often overlook the fact that different types of disabilities require different measures in order to facilitate participation. One key example is the absence of accessible communication materials for persons with sensory disabilities such as blindness, hearing or speech impairments. Materials are rarely translated into braille while events and meetings are rarely truly inclusive as they have no sign-language interpreters present.

For these reasons, inclusion and meaningful participation are most often viewed as complex, time-consuming and expensive, especially in an emergency response context such as Yemen. The fact is however that true inclusion requires committed and deliberate actions to change the planning, delivery and monitoring of activities.
5. Addressing Discrimination and CRPD Compliance

Resolution 2475, OP 8.
"Urges Member States to take all appropriate measures to eliminate discrimination and marginalization of persons on the basis of disability in situations of armed conflict, particularly those who face multiple and intersecting forms of discrimination."

Resolution 2475, OP 11.
"Urges State parties to comply with the obligations applicable to them under the Convention on the Rights of Persons with Disabilities."

The Yemeni Constitution guarantees equality and obliges the state to guarantee equal opportunities for all citizens politically, economically, socially and culturally. Yemen’s Constitution also applies at all times. Although the ongoing situation in Yemen has clearly negatively affected the State’s ability to uphold some of these rights contained in the CRPD, it does identify equality and equity as guiding principles. The Yemeni Constitution states that “in order for a State to be able to attribute its failure to meet its minimum core obligations to a lack of available resources, it must demonstrate that every effort has been made to use all resources that are at its disposal in an effort to satisfy, as a matter of priority, those minimum obligations. In addition, the status quo for the broader range of human rights must be fully used to progressively realize human rights in a way that guards against retrogressive steps or impacts and at least maintains the status quo for the broader range of human rights obligations.”

The representative organizations of persons with disabilities interviewed by HI reported that prior to the war, measured progress was made towards eliminating discrimination and marginalization on the basis of disability in Yemen, but the war has almost completely stalled any such efforts due to competing priorities and a lack of resources.

The absence of persons with disabilities in the workforce significantly hampers efforts to make programming inclusive as it results in stereotyping, and a lack of understanding of the challenges persons with disabilities face and how their needs should be addressed.
6. Mainstreaming Inclusion & Adequate Representation in International Forum

Resolution 2475, OP 9.
“Requests the Secretary-General to include, where pertinent, information and related recommendations on issues of relevance to persons with disabilities, in the context of armed conflict, in thematic and geographic reports and regular briefings to the Council, as well as to include, where pertinent, data disaggregated by disability within existing mandates and within existing resources;”

Resolution 2475, OP 10.
Recognises the importance of interactions between civil society and the Council and, in this regard, expresses its intention to invite persons with disabilities, including their representative organisations, to brief the Council in relevant thematic and geographic areas and consider including interactive meetings with local persons with disabilities, and their representative organisations, in the field during Council missions;

Although the attention paid to the situation of persons with disabilities in armed conflict has increased significantly over the past few years, culminating in a landmark UN Security Council resolution, the issues of relevance to persons with disabilities in armed conflict remain limited to disability-specific events and reports. For example, country-specific reports and briefings by the secretary-general still fall extremely short in terms of consistent, substantive reporting of abuses against and the experiences of people with disabilities. In fact, Human Rights Watch reported that several secretary-general reports on key humanitarian crises, including Yemen, either did not mention the impact of the respective conflicts on people with disabilities at all, or only made brief references.\(^23\)

An analysis of UN Secretary-General reports on Yemen and regular briefings to the United Nations Security Council published or held between June 2019 - when the resolution was voted - and May 2022 reveals that no mention was made at any point of persons with disabilities and only one statement (made by former UN Emergency Relief Coordinator Mark Lowcock) included the testimony of a person with a disability.

Although Raja Abdullah Almasabi, Chairwoman of the Arab Human Rights Foundation, a Yemeni organisation advocating for the rights of persons with disabilities, was invited to speak at the UN Security Council in July 2020, to date and all too often, representatives of organisations and communities of persons with disabilities in Yemen and beyond are only invited to relate their disability-specific experiences at disability-specific events as opposed to sharing their global perspectives on conflict on mainstream political platforms.
Recommendations

Recommendations to States

- Remind all parties to the conflict and their allies of the utmost necessity to uphold all of their obligations under International Humanitarian Law and International Human Rights Law, including the Convention on the Rights of Persons with Disabilities (CRPD), with special attention to article 11 pertaining to the rights of persons with disabilities in situations of armed conflict and humanitarian emergencies.

- Reinstate the GEE's mandate or establish an alternative independent international mechanism to monitor, report and conduct investigations into violations of International Humanitarian Law, International Human Rights Law and other international standards.

- Ensure that specific dedicated resources are made available for humanitarian and development partners to mainstream inclusion across the humanitarian and development response, and to ensure the meaningful participation of groups at risk of discrimination in humanitarian and development programming phases.

Recommendations to the Parties to the Conflict

- Constructively engage with all parties involved including allies and the Office of the UN Special Envoy to achieve a complete cessation of all hostilities across the entire country.

- Promote the participation of persons with disabilities in reconciliation and peacebuilding efforts.

- Revive and update the National Strategy document on persons with disabilities, with the active involvement of persons with disabilities and their representative organisations.

- Facilitate prompt, safe, consistent and unimpeded humanitarian access to all populations in need across the country by eliminating all bureaucratic impediments and restrictions of movement.

Recommendations to Humanitarian Actors

- Take deliberate and proactive action in all phases of the humanitarian response in line with the recommendations spelt out in the IASC guidelines on the Inclusion of Persons with Disabilities in Humanitarian Action, and its four must-do actions: identification and removal of barriers; promotion of meaningful participation of persons with disabilities and their representative organisations throughout the program cycle; enhance disability data for inclusive programming, and empower persons with disabilities and support them to develop their capacity.

- Initiate and support ongoing capacity strengthening and inclusive programming initiatives within their respective organisations to ensure that the humanitarian response is inclusive of persons with disabilities, including through the mobilisation of technical expertise, resources and sharing of lessons learned in relevant coordination spaces such as the Yemen Inclusion Task Force.

- Request that the whole humanitarian coordination structure uses the UN approved Washington Group Short Set of Questions (WGQs) when collecting humanitarian data, as analysis of these data will facilitate more inclusive actions towards identified persons experiencing any kind of functional limitation.
References


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