

VULNERABLE GROUPS

amid unstable conditions

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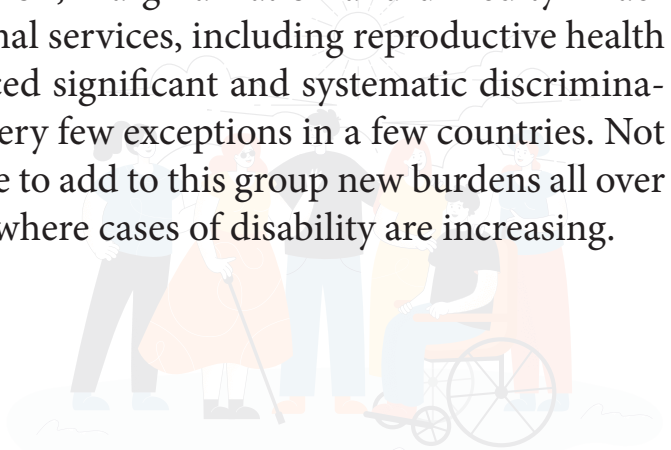
People with Disabilities Amid the Pandemic in the Arab World: Did Precautionary Measures Help in Protecting them?

Coronavirus was not the first health crisis experienced by the world's population. The past and present lessons learned from those health crises always indicate that the greatest losses are always related to vulnerable segments of the population, including people with disabilities. Consequently, upon tackling a health pandemic, it is extremely important to ensure that vulnerable groups are not excluded when developing peculiar multi-sectoral actions to meet their specific needs. In this context, policy makers should pay particular attention to aspects of psychological, social and economic support and mental health services.

Introduction

By the end of October 2020, and nearly a year after the spread of the global Corona pandemic, the total number of confirmed cases exceeded 40 million, and the Arab region recorded about two million deaths among the infected cases, equivalent to six percent (6%) of the total number of deaths in the world then. The pandemic at that time not only revealed social inequalities, but also led to increasing and exacerbating such inequalities, especially for vulnerable groups such as those people with special needs.

During normal times, at the pre-Corona era, people with disabilities were already suffering from insufficient attention, marginalization and difficulty in accessing high-quality health and educational services, including reproductive health information and services. This group faced significant and systematic discrimination especially in the Arab region, with very few exceptions in a few countries. Not only that but also Coronavirus crisis came to add to this group new burdens all over the world, especially in the Arab region, where cases of disability are increasing.



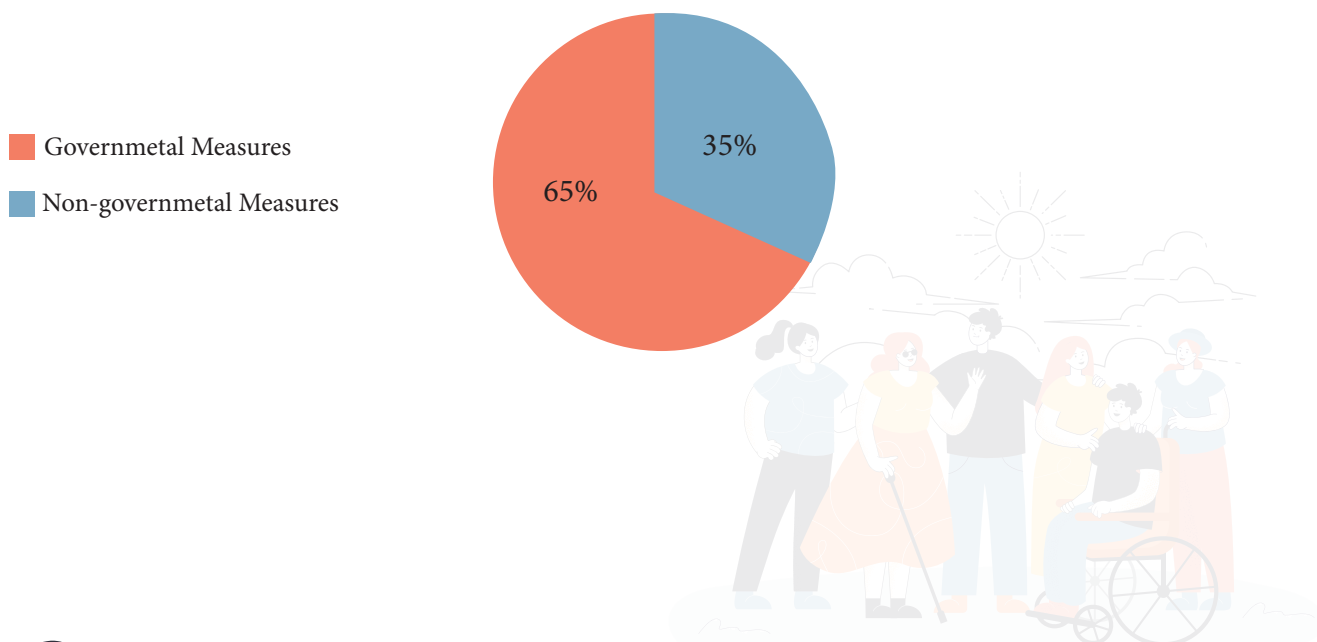
Statistics show that 15.1% suffer from some form of disability out of nearly eight (8) billion people in the world. The World Health Organization (WHO) estimates that in the Eastern Mediterranean region alone there are more than 100 million people with disabilities, which is roughly equivalent to the total population of the Arab Republic of Egypt. The percentage of people with disabilities is high in the Arab countries which have experienced conflicts and wars in recent decades. In Syria alone, with the ongoing conflict there, recent statistics indicate that one out of every four aged 12 years and above has a disability.

This study attempts to shed light on this group's suffering in the Arab countries amid the pandemic so as to draw lessons learned and make recommendations to improve the protection services dedicated to this group, especially in times of crises in general or even in times of stability.

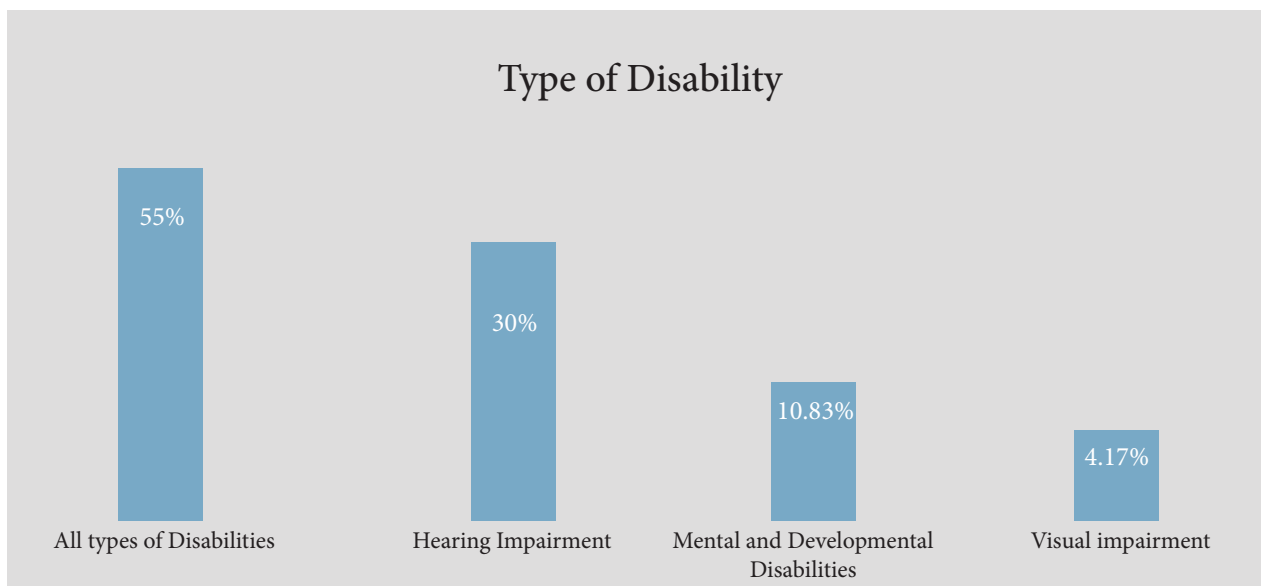
Findings of the United Nations Economic and Social Commission for Western Asia Report (ESCWA, 2020)

In 2020, the United Nations Economic and Social Committee (ESCWA), issued a report that monitors the precautionary measures and actions taken by the Arab countries to reduce the negative effects on the people with special needs. The findings of this report declared that 65% of the precautionary measures were governmental and 35% were non-governmental.

Measures taken to protect people with special needs from Coronavirus in Arab countries

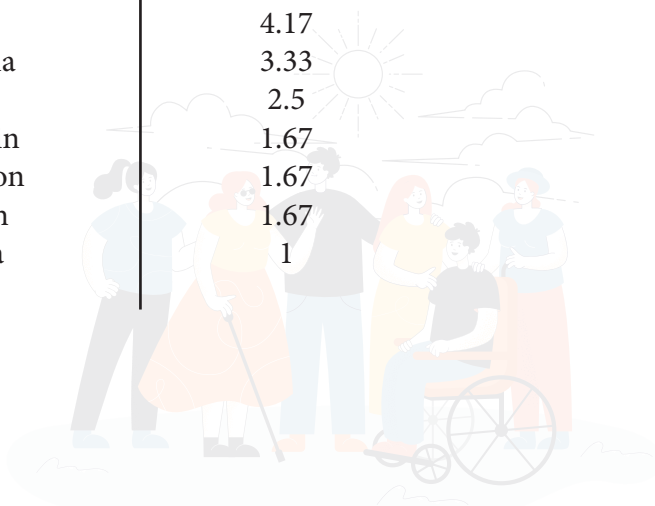


The report also showed that 55% of these measures tackled all groups of disability, 30% with hearing impairments, 10.83% with mental and developmental disabilities, and 4.17% with visual impairments.



In accordance with the ESCWA report (2020) for 15 Arab countries, Saudi Arabia and Jordan were the two Arab countries that provided the most precautionary measures during the Coronavirus pandemic. Below are the ranks of the Arab countries and the percentages that represent the effort made to protect people with special needs during Coronavirus:

Rank	Country	Percentage
1	Saudi Arabia	20.83
2	Jordan	17.5
3	Morocco	13.33
4	Egypt	11.67
5	Qatar	5.83
6	Oman	5
7	Kuwait	5
8	Palestine	4.17
9	UAE	4.17
10	Tunisia	3.33
11	Iraq	2.5
12	Bahrain	1.67
13	Lebanon	1.67
14	Sudan	1.67
15	Libya	1



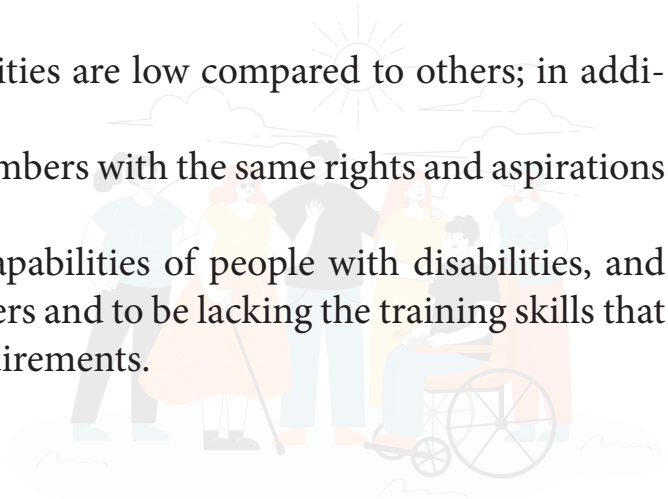
These measures focused on raising awareness among people with disabilities and their caregivers to limit the spread of Coronavirus in addition to the serious measures that were taken by countries to try to relieve the burdens and protect the people with disabilities from the negative effects resulting from the pandemic; however, these attempts and measures were not sufficient to strengthen protection and reduce the risks to which people with disabilities were exposed during Coronavirus. The prevalence of disabilities and the challenges suffered by those people is increasing not only in conflict-affected countries (not only in Syria), but also in relatively stable and middle-income Arab countries. At least one in every four people over 65 has a disability in Egypt, Jordan, Morocco and Oman, and more than half of them are women.

In spite of the superiority of some Arab countries such as Saudi Arabia and Jordan in the volume and impact of the measures taken to protect people with disabilities from the negative effects of Coronavirus, these groups still suffer from many difficulties, including marginalization and discrimination, and they still need a lot of effort in order to be provided with adequate protection.

Saudi Arabia:

In March 2018, one year before the emergence of Coronavirus, the General Supervisor of the General Administration of Special Education and the Director of the Audio-Visual Disability Department at the Ministry of Education, Dr. Arwa Akhdar, in an interview with the Saudi website (Al-Watan), revealed 10 obstacles facing the rehabilitation of people with disabilities and their exposure to discrimination and rejection in general or in the labor market in particular, and these are:

- Some people with disabilities do not receive adequate education.
- Inefficiency of training and skill development programs provided to them.
- Some employers do not recognize the certificates granted to them.
- People with disabilities do not keep up with the basic requirements of employment and professional growth, especially with regard to languages.
- There is a need to make necessary adjustments in the work environment to suit the abilities and capabilities of the disabled.
- Wages given to the people with disabilities are low compared to others; in addition, they lack employment security.
- They are not sufficiently accepted as members with the same rights and aspirations by ordinary persons.
- Employers are not convinced of the capabilities of people with disabilities, and they are not deemed as productive as others and to be lacking the training skills that are consistent with the labor market requirements.



These problems obviously are not only related to public policy makers in Saudi Arabia, but are also related to the societal view of this group and to raising awareness among Saudi citizens about the importance of integrating this group into society and the need to implement the principle of equal opportunity between them and other citizens. While this societal problem needs to be worked on for more than a year to be overcome, Coronavirus came in the midst of already unstable economic conditions, and what is worse is that these conditions have deep societal roots and need years of treatment.

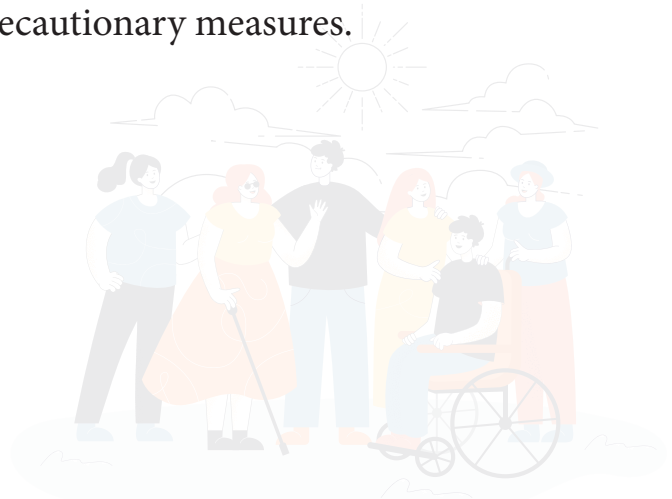
Jordan:

In Jordan, the number of people with special needs is about 1.2 million people, that is, 11% of the population, and 43% of them are males and 57% are females.

In terms of the impact of Coronavirus on people with disabilities, the Secretary General of the Jordanian Higher Population Council pointed out that the pandemic affected all economic, social and health fields for all citizens, especially those with disabilities. During the pandemic, a set of challenges emerged, which were the lack of updated data on people with disabilities in service organizations, and the failure to include their guides in the electronic services adopted by organizations during the pandemic to facilitate access for the Jordanian citizen.

The findings of an assessment study about the impact of the pandemic on a sample of families with disabilities in Jordan in 2020 indicated that 78% of these families lost their jobs during the lockdown, and that 79% of these families did not receive any additional support during the pandemic, and 88% of individuals with disabilities within these families included in the study sample were unable to access health facilities.

The negative effects on the lives of Jordanians with disabilities because they were not taken into account during the development of protection policies only indicate the absence of any representation of this group (people with special needs or the caregivers) during the planning of precautionary measures.



UAE:

In a report issued at the beginning of 2021, the Department of Community Development in Abu Dhabi stated that neurodevelopmental disorders, such as autism spectrum disorders (ASD), mental disabilities, and specific learning disorders, are among the most common disabilities in the emirate (considering that Abu Dhabi is one of the most important and largest cities in the United Arab Emirates). It demonstrated that people with disabilities face a number of challenges resulting from the existing environmental, communicative, behavioral and institutional obstacles in the community, notably the lack of comprehensive and integrated educational and social health care systems, which impedes the access of people with disabilities and their families to quality services that meet their individual and diverse needs at affordable prices.

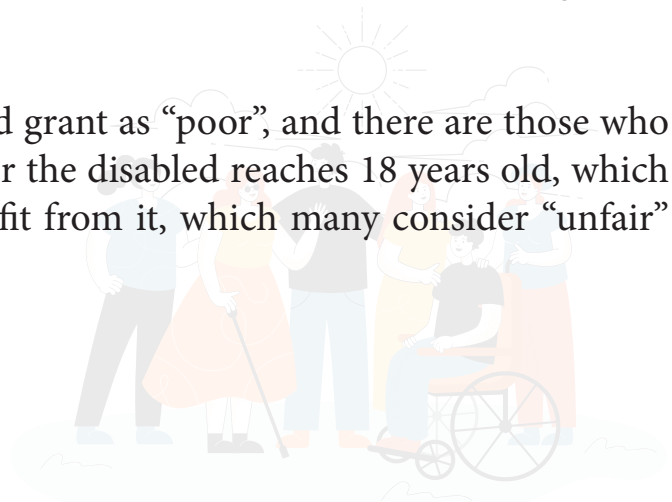
It also indicated that the challenges facing people with disabilities include the lack of equal and equitable opportunities for students with disabilities to access quality inclusive education in regular schools, including a comprehensive support system within the school.

It should be noted that we are speaking here about one of the richest and most stable Arab countries in terms of financial or political conditions, and that we are tackling the results that were published at the height of the fourth wave of Coronavirus.

Algeria:

In a related context, Atika Maamari, President of the Algerian Federation of people with Disabilities, says that the Coronavirus crisis is a real nightmare for them, as it has greatly increased their suffering. She also explained that “the Algerian government has increased the financial grant for the disabled to DZD 10,000 (\$ 80), which is a monthly support that benefits those with a disability of up to 100 %, and many of them still receive a monthly grant of DZD 4000 (about \$ 25), but it still does not enable them to withstand the health requirements and afford the high cost of living.”

Civil society also describes the said grant as “poor”, and there are those who describe it as an ‘ordeal’, as it is used after the disabled reaches 18 years old, which means that the under-aged do not benefit from it, which many consider “unfair” and does not solve their problems.



Iraq:

Ms. Abeer Al-Jalbi, Director-General of the Department of People with Special Needs and Senior Undersecretary of the Ministry of Labor and Social Affairs, pointed out that the wars and crises that the country experienced contributed to the increase in the number of people with disabilities, explaining that “there is no database or accurate statistics regarding them” due to the absence of any population census, and therefore the circulated numbers remain inaccurate. Thus, the Iraqi government remains to date, in 2022, unable to access this group. In addition, the government is unable to plan to take the necessary measures to protect a group whose numbers cannot be estimated.

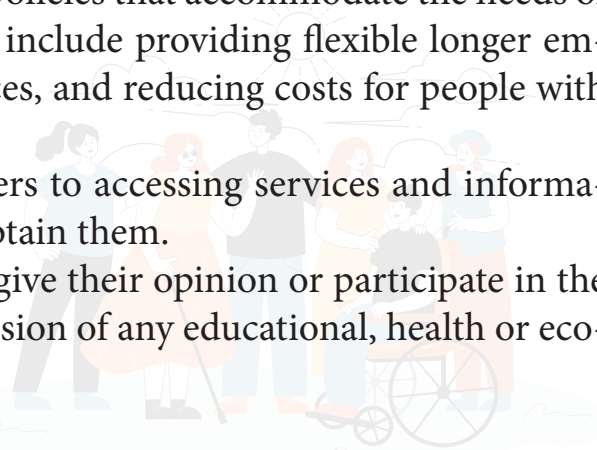
Mauritania:

The 2013 census showed that the percentage of disabled Mauritians among the population of 3,600,000 people at that time was 0.9 %. In 2018, the year preceding the pandemic, Mr. Mohamed Salem Weld Abouh, Secretary-General of the Mauritanian Federation of Disabled, commented on this percentage, saying that these were “inaccurate statistics because the numbers we deal with in the federation are enormous, and if we conducted a comprehensive survey of the disabled in Mauritania, the results would have been terrifying.”

Through the observation of these challenges, a set of common pillars can be inferred from the obstacles and barriers that people with disabilities face in seeking care and protection. These barriers include the following:

Behavioral Barriers

- People with disabilities often face prejudice, stigmatization and discrimination from government service providers and others working in any public facilities.
- Many service providers have limited knowledge and awareness of the rights and health needs of people with disabilities, and they have insufficient training and professional development when it comes to disability.
- Many government services do not include policies that accommodate the needs of people with disabilities. Such policies could include providing flexible longer employment periods, providing outreach services, and reducing costs for people with disabilities.
- Women with disabilities face special barriers to accessing services and information related to their rights and the ways to obtain them.
- People with disabilities are rarely asked to give their opinion or participate in the decision-making process regarding the provision of any educational, health or economic services to people with disabilities.



Physical Barriers

- Health, education, and employment services and activities are often far from where most people live or in an area where transportation options are not accessible.
- It is not possible to use the stairs at the entrances to buildings or service facilities, as well as benefit from the business on floors unreachable by the elevator.
- It is common to have toilets, corridors, entrances and rooms that are not wheelchair friendly, or difficult to navigate for people with mobility impairments.
- Furniture of fixed height, including chairs in the workplace and examination beds in hospitals, may be difficult for people with disabilities to use.

Communication Barriers

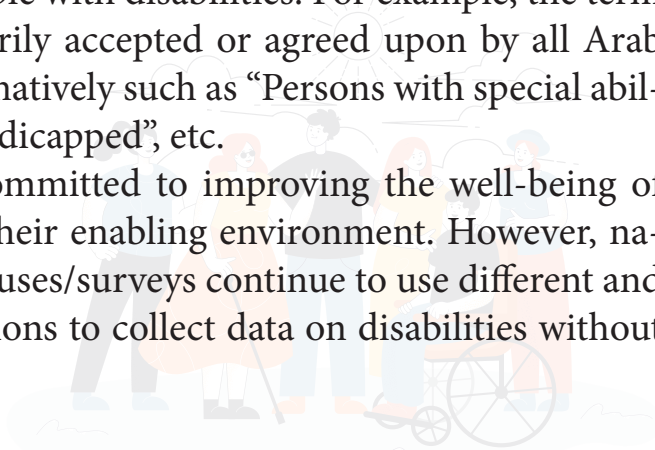
- One of the main barriers that prevents the provision of various services for people with hearing impairments is the limited availability of written materials or sign language interpreters.
- In addition, the information and procedures that are not provided in accessible forms, including Braille or large print, which creates a barrier for people with low vision.

Financial Barriers

- More than half of all people with disabilities within low-income countries cannot afford the costs of proper health care as well as educational services.
- Many people with disabilities also report that they cannot afford the costs required for obtaining various services. Great numbers of this group suffer from poverty and ignorance and have no hope of getting out of this miserable cycle.

“Statistical Discrimination” Barriers

- First off, in order to test something, there has to be agreement on what it is and what it is not and that's where the statistical challenge begins. Although all Arab governments agreed to all the points stated in the Convention on the Rights of Persons with Disabilities in 2006, the Arab national policies and strategies related to disability use different definitions that further complicates the issue and require effort and burdens to obtain data on people with disabilities. For example, the term “People with Disabilities” is not necessarily accepted or agreed upon by all Arab countries, and many terms are used alternatively such as “Persons with special abilities”, “people of determination”, “the handicapped”, etc.
- All the Arab countries are publicly committed to improving the well-being of people with disabilities and enhancing their enabling environment. However, national statistical offices and national censuses/surveys continue to use different and diverse tools, methodologies and definitions to collect data on disabilities without



taking any step to adopt clear and specific names so that agreed solutions can be reached.

- Statistics are still inaccurate regarding the number of people with special needs or the type of disability that affects them due to many factors, especially the social factor, which considers people with disabilities to be nothing but a stain on their families.

Recommendations:

Coronavirus remains one of the toughest and most challenging crises faced by modern humans, if not the most severe health pandemic ever in modern history. The pandemic has certainly left negative imprints on every person with special needs, on one hand. On the other hand, there are undeniable positive movements from governments, NGOs and international organizations, but at a slow pace and with limited possibilities. Subsequently, this study provides urgent recommendations to improve the services provided to this group and to make governments more prepared during difficult times (economically/during health crises) to provide more effective and comprehensive policies and strategies in terms of planning for people with special needs.

- 1) People with disabilities and their families must be involved in planning each of the government programs or civil society programs aimed at protection and integration.
- 2) Comprehensive development programming and humanitarian aid for this group must be invested in heavily, especially investment with the aim of accelerating the integration of the disability perspective into health, educational and social protection systems at all levels.
- 3) Partnerships with local and international civil society organizations must be strengthened so that people with disabilities are included in all development and humanitarian programs and initiatives, from the first moments of setting goals and agreeing on concepts and terminology, all the way to implementation, evaluation and follow-up.
- 4) Unification of the concepts and terminology of the group of people with special needs must be worked on and applied to all national government bodies of the State to facilitate building databases that are free from any unclarity or complexities for this group.
- 5) In health crises such as the time of Coronavirus, governments must be keen to provide free personal protective equipment for this group and their caregivers.
- 6) Education in general and university education in particular provided to these groups must be paid great attention and must be linked to the labor market in order to facilitate the provision of opportunities for them in order to achieve the principle



of equal opportunity and to activate the quota system in the governmental sector and the private sector as well.

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