CORI

country of origin research and information

CORI Thematic Report: Elderly and Disabled Kabul, Mogadishu, Kinshasa, March 2015

Commissioned by the United Nations High Commissioner for Refugees, Division of International Protection.

Any views expressed in this paper are those of the author and are not necessarily those of UNHCR.

Preface

Country of Origin Information (COI) is required within Refugee Status Determination (RSD) to provide objective evidence on conditions in refugee producing countries to support decision making. Quality information about human rights, legal provisions, politics, culture, society, religion and healthcare in countries of origin is essential in establishing whether or not a person's fear of persecution is well founded.

CORI Country Reports are designed to aid decision making within RSD. They are not intended to be general reports on human rights conditions. They serve a specific purpose, collating legally relevant information on conditions in countries of origin, pertinent to the assessment of claims for asylum. Categories of COI included within this report are based on the most common issues arising from asylum applications made on the basis of older age or disability in relation to residency in Kabul, Mogadishu and Kinshasa. This report covers events up to March 2015.

COI is a specific discipline distinct from academic, journalistic or policy writing, with its own conventions and protocols of professional standards as outlined in international guidance such as The Common EU Guidelines on Processing Country of Origin Information, 2008 and UNHCR, Country of Origin Information: Towards Enhanced International Cooperation, 2004.

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CORI is an independent centre providing specialist research resources to support Refugee Status Determination.

CORI works internationally with all parties to RSD, including governments, legal representatives and NGOs, producing commissioned research reports and providing knowledge management services. CORI works to improve standards of COI production through capacity building and training.

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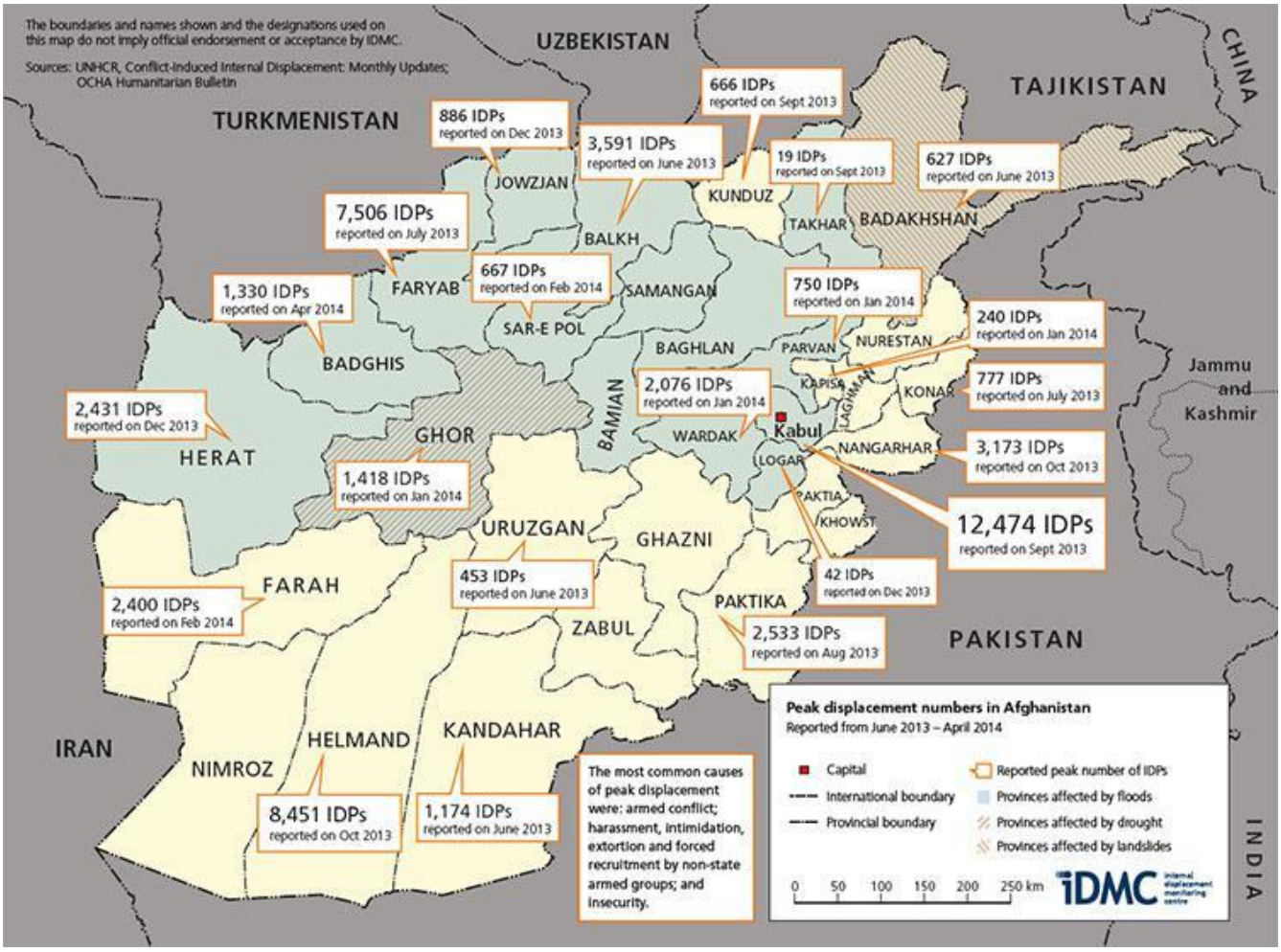
Situation for elderly persons[1] and persons with disabilities[2] in Kabul, Mogadishu, and Kinshasa

A. KABUL

1. Brief overview and general situation

a. Map of the city, showing (where relevant) IDP settlements and other informal settlements (slums)



Map: Peak displacement numbers in Afghanistan reported from June 2013–April 2014 (Internal Displacement Monitoring Centre, 2014).[3]

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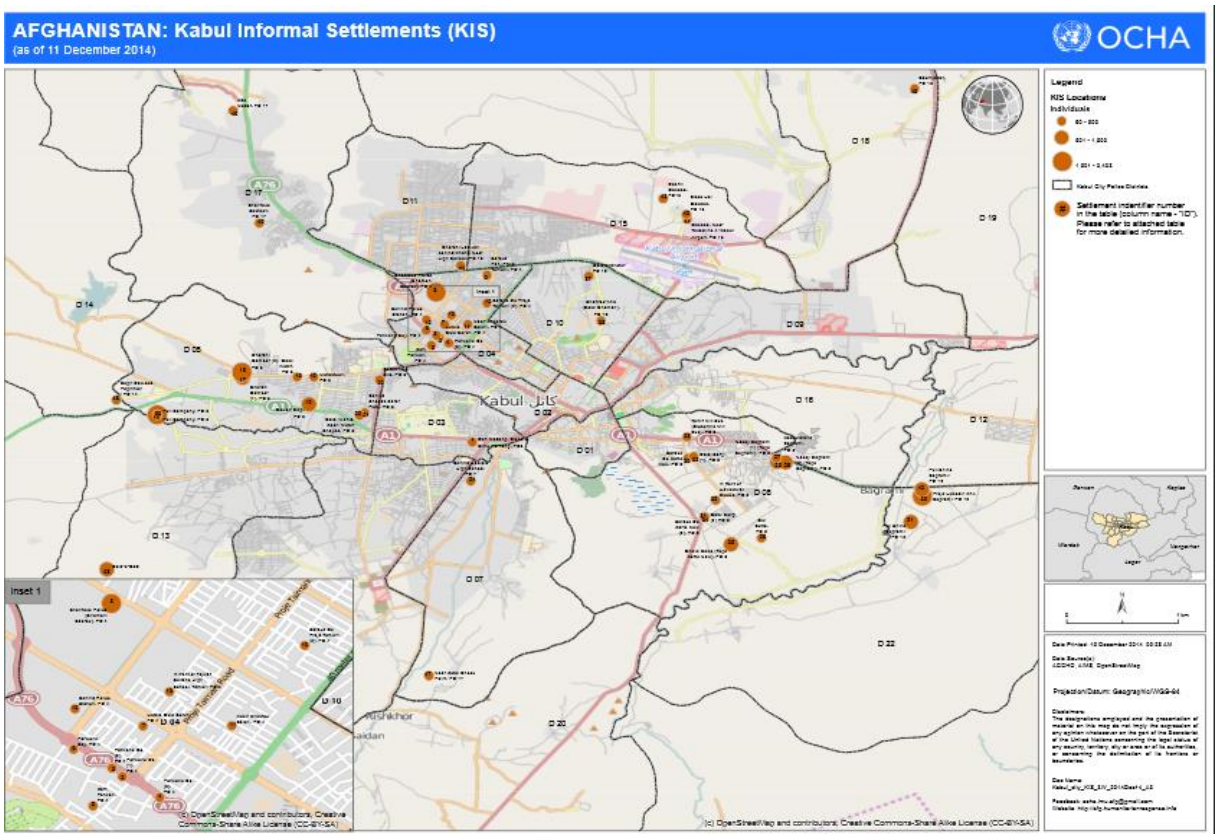
[1]The United Nations and demographers use 60 years to divide younger and older cohorts, but elderly persons can also refer to changing social roles and activities and/or a stage where functional, mental and physical capacity is declining. See: United Nations Populations Fund and HelpAge International, *Ageing in the Twenty-First Century: A Celebration and A Challenge,* 2012, http://www.helpage.org/download/50af6e9c8f44b .

[2]"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," Convention on the Rights of Persons with Disabilities, 2006, http://www.un.org/disabilities/convention/conventionfull.shtml.

[3] Internal Displacement Monitoring Centre, 19 June 2014, http://www.internal-displacement.org/south-and-south-east-asia/afghanistan/2014/peak-displacement-numbers-in-afghanistan-reported-from-june-2013-april-2014, accessed 04 March 2015



Map: Afghanistan: Kabul Informal Settlements (KIS), OCHA, December 2014

b. Safety and security situation

i. General situation (conflict, criminal activity, SGBV, etc.)

In March 2015 *Human Rights Watch* reported that Afghans continue to suffer serious human rights abuses by government and military officials and their agents, and the perpetrators are rarely held to account,

> "More than 13 years after the overthrow of the Taliban government, Afghans continue to suffer serious human rights abuses by government and military officials and their agents. Perpetrators are rarely held to account and the victims are rarely able to gain legal redress. This impunity hinges on the inability or unwillingness of the Afghan government and its institutions, including the military, police, and courts, to challenge the strongmen and militias who operate throughout much of the country. The administration of former President Hamid Karzai installed many powerful warlords and failed to confront others, while many others have been funded by and worked alongside international forces, further entrenching them politically into the fabric of Afghan society. In this way impunity in Afghanistan is both a domestic and foreign problem for which the solution resides not only in Kabul but in foreign capitals such as Washington, DC."[4]

[4] Human Rights Watch, "Today We Shall All Die": Afghanistan's Strongmen and the Legacy of Impunity, 3 March 2015, https://www.hrw.org/report/2015/03/03/today-we-shall-all-die/afghanistans-strongmen-and-legacy-impunity,accessed 4 March 2015

Reporting on the events of 2014, in February 2015 *Amnesty International* stated "There was growing insecurity throughout the country in expectation of the planned withdrawal of 86,000 foreign troops in December, as the mandate of NATO's International Security Assistance Force (ISAF) ended."[5]

In February 2015 the *United Nations Assistance Mission in Afghanistan* (UNAMA) reported there was "a 22 per cent rise in conflict-related deaths and injuries of Afghan civilians in 2014."[6]

> "The intensification of conflict-related violence in Afghanistan took an extreme toll on civilians in 2014, with civilian loss of life and injury reaching unprecedented levels. UNAMA documented 10,548 civilian casualties (3,699 deaths and 6,849 injured), marking a 25 per cent increase in civilian deaths, a 21 per cent increase in injuries for an overall increase of 22 per cent in civilian casualties compared to 2013. In 2014, UNAMA documented the highest number of civilian deaths and injuries in a single year since it began systematically recording civilian casualties in 2009."[7]

In February 2014 the *United Nations Assistance Mission in Afghanistan* (UNAMA) reported there were 8,615 civilian casualties in 2013, marking a seven percent increase in deaths and 17 percent increase in injured compared to 2012,

> "Armed conflict in Afghanistan took an unrelenting toll on Afghan civilians in 2013. The United Nations Assistance Mission in Afghanistan (UNAMA) documented 8,615 civilian casualties (2,959 civilian deaths and 5,656 injured) in 2013, marking a seven percent increase in deaths, 17 percent increase in injured, and a 14 percent increase in total civilian casualties compared to 2012."[8]

Between 1 January 2009 and 31 December 2014, *UNAMA* has documented 47,745 civilian casualties (17,774 killed and 29,971 injured).[9]

In January 2015 *International Crisis Group* stated "unprecedented wave of insurgent attacks continued in Kabul, raising concerns over viability of new govt: suicide bomber 11 Dec killed German citizen, mortally wounded Afghan journalist at French cultural institute; suicide bombers killed at least thirteen Afghan troops in attacks on military transport vehicles 11 and 13 Dec; two NATO troops killed in suicide bombing outside Bagram airbase north of Kabul 12 Dec."[10]

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5 Amnesty International, Amnesty International Report 2014/15 - Afghanistan, 25 February 2015, https://www.amnesty.org/en/countries/asia-and-the-pacific/afghanistan/report-afghanistan/, accessed 28 February 2015

6 United Nations Assistance Mission in Afghanistan (UNAMA), Afghanistan Annual Report 2014 Protection of Civilians in Armed Conflict, February 2015, http://unama.unmissions.org/Portals/UNAMA/human%20rights/2015/2014-Annual-Report-on-Protection-of-Civilians-Final.pdf, accessed 26 February 2015

7 United Nations Assistance Mission in Afghanistan (UNAMA), Afghanistan Annual Report 2014 Protection of Civilians in Armed Conflict, February 2015, http://unama.unmissions.org/Portals/UNAMA/human%20rights/2015/2014-Annual-Report-on-Protection-of-Civilians-Final.pdf, accessed 26 February 2015

8 United Nations Assistance Mission in Afghanistan (UNAMA), Afghanistan Annual Report 2013 Protection of Civilians in Armed Conflict, February 2014, http://unama.unmissions.org/Portals/UNAMA/human%20rights/2015/2014-Annual-Report-on-Protection-of-Civilians-Final.pdf, accessed 22 January 2015

9 United Nations Assistance Mission in Afghanistan (UNAMA), Afghanistan Annual Report 2014 Protection of Civilians in Armed Conflict, February 2015, http://unama.unmissions.org/Portals/UNAMA/human%20rights/2015/2014-Annual-Report-on-Protection-of-Civilians-Final.pdf, accessed 26 February 2015

10 International Crisis Group, Crisis Watch, Afghanistan, 05 January 2015, http://www.crisisgroup.org/en/publication-

In January 2015 *Human Rights Watch* reported that the Taliban stepped up attacks, documenting one attack on a Kabul restaurant and a hotel,

> "Early in the year, the Taliban stepped up attacks on officials and workers associated with the presidential elections, and targeted other civilians and foreigners. On January 17, a suicide attack on a Kabul restaurant, La Taverna, resulted in the deaths of 20 people, including 13 foreign nationals and 7 Afghans. The Taliban claimed responsibility, apparently targeting the restaurant because of its popularity with foreigners. On March 21, gunmen attacked the dining room of the high-security Serena Hotel in central Kabul, killing nine people, including Agence France Presse journalist Sardar Ahmad, his wife, and two of their children. A third child was wounded."[11]

In January 2015 *Agence France-Presse* reported that a Taliban suicide bomb hit a European Union police vehicle in Kabul on Monday, killing at least one passer-by,

> "A Taliban suicide bomb hit a European Union police vehicle in Kabul on Monday, killing at least one passer-by but not wounding any passengers, officials said, days after the NATO combat mission ended in Afghanistan.
>
> The blast, which was heard across the city, was the first major attack since the New Year when US-led NATO forces downgraded from a combat mission to support and training duties helping the Afghan army and police."[12]

In December 2014 *Radio Free Europe/ Radio Liberty* (RFE/RL) reported that one police officer was killed and two others injured in a suicide attack near Kabul's airport. RFERL further reported a suicide attack at a school in December 2014,

> "One police officer has been killed and at least two others injured in a suicide blast on the outskirts of the Afghan capital.
>
> Interior Ministry spokesman Sediq Sediqqi said the explosion took place on December 18 in a village near Kabul's airport.
>
> Sediqqi said the police had been aware of an impending attack and sent a team of officers to prevent the bomber from entering the city in a vehicle laden with explosives, but the man was able to detonate his device.
>
> A December 11 suicide attack at a French-financed school in Kabul killed one German citizen and wounded several other people. Earlier on December 11, a suicide bomber targeted a bus carrying Afghan troops on the outskirts of Kabul, killing six Afghan soldiers and injuring 10 other people."[13]

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type/crisiswatch/crisiswatch-database.aspx?CountryIDs={A860153E-CDC9-46DC-8FF7-7C03740C2DCF}#results, accessed 28 February 2015

11 Human Rights Watch, World Report 2015 - Afghanistan, 29 January 2015, https://www.hrw.org/world-report/2015/country-chapters/afghanistan, accessed 3 February 2015

12 Agence France-Presse: Suicide blast hits EU vehicle in Kabul: officials, 5 January 2015 (published by ReliefWeb), http://reliefweb.int/report/afghanistan/suicide-blast-hits-eu-vehicle-kabul-passer-killed, accessed 22 January 2015

13 Radio Free Europe / Radio Liberty, Suicide Bomber Kills Afghan Policeman, 18 December 2014, http://www.rferl.org/content/suicide-bomber-kills-afghan-policeman/26750014.html, accessed 22 January 2015

In December 2014 the *United Nations Assistance Mission in Afghanistan* (UNAMA) condemned a Taliban suicide attack at a cultural institute in Kabul that killed one person,

> "The United Nations Assistance Mission in Afghanistan (UNAMA) condemns yesterday's suicide attack against a crowd of civilians in Kabul.
>
> On 11 December, a suicide attacker detonated himself amongst a crowd attending a performance at the Institut Français d'Afghanistan, co-located with the Istiqlal High School. The attack killed one civilian and injured at least ten. Authorities confirmed a 16-year-old male carried out the attack."[14]

In September 2014 *BBC* reported a Taliban suicide car bomber killed three NATO soldiers and injured at least 16 civilians,

> "At least three coalition personnel have died after a Taliban suicide car bomber rammed into a foreign military convoy in the Afghan capital Kabul, Nato says.
>
> The blast killed a Polish soldier and two Americans serving with Nato. A fourth member of the Nato force was seriously injured.
>
> At least 16 civilians were also hurt, Afghan government sources say
>
> The BBC's David Loyn in Kabul said the three Nato members were travelling in an armoured vehicle, which was destroyed in the blast.
>
> Our correspondent says the explosion shook buildings across the centre of the capital."[15]

In September 2014, the *North Atlantic Treaty Organization* (NATO*)* confirmed that three NATO members died as a result of the attack,

> "We can confirm three International Security Assistance Force members died as a result of an enemy attack in Kabul today. Currently, Afghan officials and ISAF are reviewing the incident."[16]

At the end of a nine-day visit to Afghanistan, in November 2014 the *United Nations Special Rapporteur on Violence against Women*, *its Causes and Consequences,* reported that pervasive levels of gender-based violence has had a disproportionate impact on the enjoyment of human rights of women and girls,

> "The four decades of prolonged armed conflict across the country has contributed to significant levels of instability, insecurity, violence, rule of law challenges, and poverty

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[14] United Nations Assistance Mission in Afghanistan (UNAMA) Press Statement: UNAMA condemns Taliban suicide attack at cultural institute, 12 December 2014, http://unama.unmissions.org/Default.aspx?ctl=Details&tabid=12254&mid=15756&ItemID=38474, accessed 22 January 2015

[15] BBC, Afghan conflict: Three Nato troops killed in Kabul bomb attack, 16 September 2014, http://www.bbc.com/news/world-asia-29217167, accessed 22 January 2015

[16] North Atlantic Treaty Organization, Casualty Report, ISAF casualties, 16 September 2014, http://www.rs.nato.int/article/casualty-report/isaf-casualties-september-16-2014.html, accessed 22 January 2015

and underdevelopment, which have obstructed the effective realization and enjoyment of human rights for people of Afghanistan. It must be stressed that the insecurity, pervasive levels of gender-based violence and an ever-present climate of fear has had a disproportionate impact on the promotion, protection and fulfillment of human rights of women and girls."[17]

In February 2014 the *US Department of State* (USDOS) reported on the human rights situation in Afghanistan in 2013,

> "The most significant human rights problems were torture and abuse of detainees; increased targeted violence and endemic societal discrimination against women and girls; widespread violence, including armed insurgent groups' killings of persons affiliated with the government and indiscriminate attacks on civilians; and pervasive official corruption.
>
> Other human rights problems included extrajudicial killings by security forces; poor prison conditions; ineffective government investigations of abuses and torture by local security forces; arbitrary arrest and detention, including of women accused of so-called moral crimes; prolonged pretrial detention; judicial corruption and ineffectiveness; violations of privacy rights; restrictions on freedom of speech and press; restrictions on freedom of religion; limits on freedom of movement; underage and forced marriages; abuse of children, including sexual abuse; discrimination and abuses against ethnic minorities; trafficking in persons; discrimination against persons with disabilities; societal discrimination based on race, religion, gender, sexual orientation, and HIV/AIDS status; abuse of worker rights; and sex and labor trafficking.
>
> Widespread disregard for the rule of law and official impunity for those who committed human rights abuses were serious problems. The government did not prosecute abuses by officials consistently or effectively.
>
> The Taliban and other insurgents continued to kill civilians and security force personnel using improvised explosive devices, car bombs, and suicide attacks. The Taliban used children as suicide bombers. Antigovernment elements also threatened, robbed, and attacked villagers, foreigners, civil servants, and medical and nongovernmental organization (NGO) workers."[18]

Reporting on the human rights situation in 2013, in January 2014 the *United Nations High Commissioner for Human Rights* stated that "Violence, discrimination and harmful practices against women remain systemic and entrenched; landmark protections for women, including the 2009 Law on the Elimination of Violence against Women, have been questioned".[19]

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17 Office of the United Nations High Commissioner for Human Rights, Statement by the Special Rapporteur on violence against women finalizes country mission to Afghanistan and calls for sustainable measures to address the causes and consequences of violence against women, including at the individual, institutional and structural level, 12 November 2014, http://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=15284&LangID=E, accessed 27 February 2015

18 United States Department of State, 2013 Country Reports on Human Rights Practices - Afghanistan, 27 February 2014, http://www.state.gov/j/drl/rls/hrrpt/2013/sca/220386.htm, accessed 01 March 2015

19 Office of the United Nations High Commissioner for Human Rights, Report of the United Nations High Commissioner for Human Rights on the situation of human rights in Afghanistan and on the achievements of technical assistance in the field of human rights in 2013, 10 January 2014, http://www.ohchr.org/EN/Countries/AsiaRegion/Pages/HRReports.aspx, accessed 27 February 2015

In November 2013 the *Afghanistan Independent Human Rights Commission* (AIHRC) reported that in the first half of 2013, 4154 cases of violence against women had been registered by 1179 complaints,

> "During the first half of the current year, 4154 cases of violence against women have been registered by 1179 complainants referred to different office of the AIHRC. Therefore, 1179 women have suffered from one or other forms of violence against women during the first six months in 1392."[20]

In November 2013 the *AIHRC* reported that several factors have impacted the geographical distribution of documenting cases of violence against women. Based on these factors, the figures registered show that most cases happened in Kabul,

> "Based on geographical divisions, several factors have their roles in documenting cases of violence against women. These factors are women's accessibility to protective institutions and justice and judicial organs, the prevailing social norms and patterns faced by women and women's security and awareness about their rights. Number of registered cases pertaining violence against women is more in safe provinces, city centers and areas where it is easy to have access to protective organs. However, these figures cannot represent the exact situation of violence against women in the provinces. Thus, the figures and data registered with the AIHRC show that most such cases have happened in Kabul."[21]

In July 2013 the *UN Committee on the Elimination of Discrimination against Women* (CEDAW) expressed concern at the high prevalence of domestic violence, rape, battery and laceration in Afghanistan,

> "The Committee expresses its deep concern at the high prevalence of violence against women in the State party, in particular domestic violence, rape, battery and laceration. It is also concerned at cases of stoning of women."[22]

In June 2010 the *UN Committee on Economic, Social and Cultural Rights* also expressed concern "at the alarming levels of violence against women, in particular domestic violence and so-called honour killings, despite the adoption of the Law to Eliminate Violence against Women in 2009. The Committee is also concerned at the fact that perpetrators of such crimes remain unpunished."[23]

ii. Differentiated impact (on elderly persons and persons with disabilities)

The National Disability Survey in Afghanistan 2005 conducted by *Handicap International*

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[20] Afghanistan Independent Human Rights Commission (AIHRC), Violence against Women in Afghanistan (The first six months of the year- 1392) , 25 November 2013, http://www.refworld.org/pdfid/5297436c4.pdf, accessed 27 February 2015

[21] Afghanistan Independent Human Rights Commission (AIHRC), Violence against Women in Afghanistan (The first six months of the year- 1392) , 25 November 2013, http://www.refworld.org/pdfid/5297436c4.pdf, accessed 27 February 2015

[22] UN Committee on the Elimination of Discrimination Against Women (CEDAW), Concluding observations on the combined initial and second periodic reports of Afghanistan, 23 July 2013, CEDAW/C/AFG/CO/1-2, http://www.refworld.org/docid/51ff5ac94.html, accessed 27 February 2015

[23] UN Committee on Economic, Social and Cultural Rights (CESCR), Consideration of reports submitted by States parties under articles 16 and 17 of the Covenant : concluding observations of the Committee on Economic, Social and Cultural Rights : Afghanistan , 7 June 2010, E/C.12/AFG/CO/2-4, http://www.refworld.org/docid/4ef1fb5e2.html, accessed 27 February 2015

found that 2.7% of the population having a severe impediment and nearly 14% of rural households have a family member who has disabilities and that most of these families are poor.[24] In February 2014 the *US Department of State* (USDOS) reported that this remains the most up to date source of information,

> "Updated and comprehensive data on persons with disabilities continued to be lacking. Handicap International carried out a National Disability Survey in 2005, which remained the most up-to-date source of information. The survey estimated that there were between 800,000 and 900,000 persons with disabilities in the country and that 20 percent of all households had at least one such person. MoLSAMD and NGOs, however, estimated that in 2013 there were two million persons with disabilities in the country, 61 percent of whom were women or children. Approximately 10 percent of persons with disabilities received financial support from the government."[25]

In 2011 a report by *UNHCR* and *The World Bank* showed that 28.3% of urban IDP households in Kabul had a family member who had a disability with 23.3% in Herat and 19.3% in Kandahar. The study found that the prevalence of disability increases with age, around 1% of the child population f and people up to the age of 39 years, 7% for people of ages 60-69 and 30% for people aged 80 or above. The age groups with the highest number of people with disabilities were 10-18 years (1% of this age group) and 70-79 (17% of the age group), these age groups were closely followed by those aged 60-69 and 50-59.[26]

In October 2012 the *Danish Refugee Council* reported that IDP households in Kabul with a family member with a disability are considered to be Extremely Vulnerable Individuals (EVI).[27]

In 2004 the *United Nations Children's Fund* (UNICEF) reported that 3.7% of the population suffer from "various forms of disability."[28]

In January 2015 the *United States Agency for International Development* (USAID) reported there are approximately 1 million persons with disabilities in Afghanistan,

> "After years of war in Afghanistan, there are an estimated one million handicapped people who are in need of assistance ranging from prosthetic devices to training. With a new, more democratically-oriented government in place, disabled Afghans across the country have been demanding acknowledgement of and support for their basic needs. After a recent demonstration in Kabul, the Afghan government agreed to raise a monthly stipend for disabled people from $2 to $5."[29]

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24 Handicap International, Understanding the Challenge Ahead, Executive Summary Report, National Disability Survey in Afghanistan 2005, 2006, http://www.handicap-international.org/uploads/media/Understanding-the-challenge-ahead.pdf, accessed 01 March 2015

25 United States Department of State, 2013 Country Reports on Human Rights Practices - Afghanistan, 27 February 2014 http://www.state.gov/j/drl/rls/hrrpt/2013/sca/220386.htm, accessed 01 March 2015

26 UN High Commissioner for Refugees (UNHCR), Research Study on IDPs in urban settings - Afghanistan, May 2011, available at: http://www.refworld.org/docid/511e51382.html, accessed 12 May 2015

27 Danish Refugee Council, Protection problems in Kabul Informal Settlements, October 2012, http://www.alnap.org/pool/files/report-protection-problems-in-kabul-informal-settlements.pdf, accessed 13 May 2015

28 United Nations Children's Fund (UNICEF), You and Me Together Ability Forever, November 2004, http://www.unicef.org/media/files/PreliminaryfindingsAfghanistandisabilityreport.pdf, accessed 28 February 2015

29 United States Agency for International Development (USAID), Empowering Afghanistan's Disabled Population, Meeting the needs of disabled citizens, 20 January 2015, https://www.usaid.gov/results-data/success-stories/empowering-afghanistans-disabled-population, accessed 28 February 2015

In February 2014 the *US Department of State* (USDOS) reported that the constitution requires the state to assist persons with disabilities, and to protect their rights. *USDOS* reported that the Afghan government continued to implement a five-year plan on awareness raising on the rights of persons with disabilities,

> "The constitution prohibits any kind of discrimination against citizens and requires the state to assist persons with disabilities and to protect their rights, including the rights to health care and financial protection. The constitution also requires the state to adopt measures to reintegrate and ensure the active participation in society of persons with disabilities. The 2010 Law on the Rights and Benefits of Disabled Persons provides for equal rights to, and the active participation of, such persons in society. MoLSAMD continued to implement a five-year national action plan through a memorandum of understanding with the Ministry of Information and Culture to implement public awareness programs on the rights of persons with disabilities through the national media as well as through a memorandum of understanding with the Ministry of Higher Education to provide scholarships for students with disabilities."[30]

In February 2014 *USDOS* reported that insecurity remained a challenge to providing services for persons with disabilities,

> "Insecurity remained a challenge for disability programming. Insecurity in remote areas, where a disproportionate number of persons with disabilities lived, precluded delivery of assistance in some cases. The majority of buildings remained inaccessible to those with disabilities, prohibiting many from benefitting from education, health care, and other services."[31]

In December 2009 the *Afghanistan Independent Human Rights Commission* (AIHRC) reported that thirty years of war have resulted in a rise in the number of persons with disabilities,

> "Thirty years of war in Afghanistan had unfavourable effects and one of these is the rise in the number of persons with disabilities. The Afghan conflict not only physically incapacitated people, but it also had negative implications for the psyche of Afghan public. Afghanistan is a country largely affected by mines in which around 55 people lose their lives in mine-related incidents per month. The death toll was at 138 people per month in 2001, referring to the fall in death toll in previous years. The Afghan government is party to 2003 Ottawa Convention and as such it is bound to complete mine action by 2013 and declare Afghanistan as a mine-free country. According to the UN, 4 million people still live in areas that have not been de-mined. Several national and international institutions are involved in mine action in Afghanistan, but they face such challenges such as inadequate budget and insecurity."[32]

In June 2010 the *UN Committee on Economic, Social and Cultural Rights* regretted that the

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30 United States Department of State, 2013 Country Reports on Human Rights Practices - Afghanistan, 27 February 2014, http://www.state.gov/j/drl/rls/hrrpt/2013/sca/220386.htm, accessed 01 March 2015

31 United States Department of State, 2013 Country Reports on Human Rights Practices - Afghanistan, 27 February 2014, http://www.state.gov/j/drl/rls/hrrpt/2013/sca/220386.htm, accessed 01 March 2015

32 Afghanistan Independent Human Rights Commission (AIHRC), Report on the Situation of Economic and Social Rights in Afghanistan - IV, December 2009, http://vcnv.org/files/HRCP_Afghanistan_Report_LR.pdf, accessed 27 February 2015

adoption of the 2008 Afghanistan National Disability Action Plan does not accurately reflect the current situation of persons with disabilities,

> "The Committee, while taking note of the adoption of the 2008 Afghanistan National Disability Action Plan, regrets that the report does not accurately reflect the current situation of persons with disabilities and characterizes disability mainly as a matter of charity and a medical concern. The Committee is concerned at the lack of sufficient measures to implement the Action Plan."[33]

In June 2010 the *UN Committee on Economic, Social and Cultural Rights* noted with concern that a large proportion of Afghans live in poverty or extreme poverty; amongst those in particular are persons with disabilities,

> "The Committee notes with concern that, notwithstanding the Afghanistan National Development Strategy, a large proportion of Afghans live in poverty or extreme poverty, in particular the inhabitants of rural and deprived urban areas, landless persons, children, families and households headed by women, persons with disabilities, IDPs and refugees."[34]

c. Socio-economic situation

i. General situation (economic climate, food security, etc)

According to the *United Nations Development Programme* (UNDP) in 2014, Afghanistan's Human Development Index value for 2013 is 0.468 —in the low human development category — positioning the country at 169 out of 187 countries and territories.[35]

In December 2014 the *World Food Programme* reported that Afghanistan faces enormous humanitarian challenges; including millions of Afghans living in poverty and environmentally damaged infrastructure and landscape,

> "Afghanistan faces enormous humanitarian challenges after more than three decades of war, civil unrest and recurring natural disasters. Despite recent progress, millions of Afghans still live in severe poverty with a crumbling infrastructure and a landscape that is suffering from environmental damage. This rugged, landlocked country remains one of the world's poorest countries, ranking 169 out of 187 countries in the Human Development Index (2012), due to war, insecurity and a lack of foreign investment. Economic growth is largely driven by foreign assistance amounting to USD70 billion, but socio-economic indicators remain poor. Per capita income is USD595 as per the Human Development Index (2012). The National Risk and Vulnerability Analysis (NRVA) 2011/2012 indicates that 7.6 million people are food insecure, and 5.3 million

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33 UN Committee on Economic, Social and Cultural Rights (CESCR), Consideration of reports submitted by States parties under articles 16 and 17 of the Covenant : concluding observations of the Committee on Economic, Social and Cultural Rights : Afghanistan , 7 June 2010, E/C.12/AFG/CO/2-4, http://www.refworld.org/docid/4ef1fb5e2.html, accessed 27 February 2015

34 UN Committee on Economic, Social and Cultural Rights (CESCR), Consideration of reports submitted by States parties under articles 16 and 17 of the Covenant : concluding observations of the Committee on Economic, Social and Cultural Rights : Afghanistan , 7 June 2010, E/C.12/AFG/CO/2-4, http://www.refworld.org/docid/4ef1fb5e2.html, accessed 27 February 2015

35 United Nations Development Programme (UNDP), Human Development Report 2014, Sustaining Human Progress: Reducing Vulnerabilities and Building Resilience, 2014, http://hdr.undp.org/sites/default/files/hdr14-report-en-1.pdf, accessed 28 February 2015

are also protein deficient. The country suffers from one of the highest infant and maternal mortality rates in the world. Chronic malnutrition is alarmingly high in Afghanistan; 40.9 percent of children under five years are chronically-malnourished (stunted) and one-fifth of Afghan women of childbearing age are underweight. Average life expectancy is 62 years, and adult literacy stands at just 28 percent. Approximately 400,000 people are seriously affected each year by local natural disasters, such as drought and floods.

Insecurity is a major and growing concern. Insurgent activity and military operations have affected food security in some regions, undermined reconstruction efforts and restricted humanitarian interventions. Despite this, WFP remains fully operational in most parts of the country, through three area offices and three sub-offices."[36]

In June 2010 the *UN Committee on Economic, Social and Cultural Rights* noted with concern the high level of malnutrition,

> "The Committee notes with concern the high level of malnutrition and hunger in the State party, as well as the numerous persons who face food insecurity. It regrets the little support received by the agricultural sector and the significant decline in accessibility to food in rural areas since 2006, due to a growing disparity between food prices and income."[37]

ii. Differentiated impact (including impact of food shortages)

In June 2010 the *UN Committee on Economic, Social and Cultural Rights* (CESCR) noted its regret that the 2008 Afghanistan National Disability Plan does not accurately reflect the current situation of persons with disability and characterises disability mainly as a matter of charity and a medical concern,

> "The Committee, while taking note of the adoption of the 2008 Afghanistan National Disability Action Plan, regrets that the report does not accurately reflect the current situation of persons with disabilities and characterizes disability mainly as a matter of charity and a medical concern. The Committee is concerned at the lack of sufficient measures to implement the Action Plan (art. 2)."[38]

In June 2010 *CESCR* recommended that Afghanistan take concrete steps to implement the 2008 Afghanistan National Disability Action Plan and to consider implementing the Convention on the Rights of Person with Disabilities and its Optional Protocol,

> "The Committee recommends that the State party take concrete steps to implement the 2008 Afghanistan National Disability Action Plan without discrimination and, in this regard, consider ratifying the Convention on the Rights of Persons with Disabilities and

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36 World Food Programme (WFP), Afghanistan: Brief. Reporting Period: 01 October – 31 December 2014, 31 December 2014, http://reliefweb.int/sites/reliefweb.int/files/resources/Afghanistan%20CB%204Q2014HQ.pdf, accessed 26 February 2015

37 UN Committee on Economic, Social and Cultural Rights (CESCR), Consideration of reports submitted by States parties under articles 16 and 17 of the Covenant : concluding observations of the Committee on Economic, Social and Cultural Rights : Afghanistan , 7 June 2010, E/C.12/AFG/CO/2-4, para 37, http://www.refworld.org/docid/4ef1fb5e2.html, accessed 2 March 2015

38 UN Committee on Economic, Social and Cultural Rights (CESCR), Consideration of reports submitted by States parties under articles 16 and 17 of the Covenant : concluding observations of the Committee on Economic, Social and Cultural Rights : Afghanistan , 7 June 2010, E/C.12/AFG/CO/2-4, para 17, http://www.refworld.org/docid/4ef1fb5e2.html, accessed 22 January 2015

its Optional Protocol."[39]

In 2013 *HelpAge International* reported "Older people are particularly sensitive to disruptions in food availability and access. It is, therefore, crucial that humanitarian partners have a clear understanding of the position of older people within the population and how this affects their access to food, as well as the specific factors which influence food availability, access and utilisation for older people."[40]

In 2013 *HelpAge International* reported that "for older people and other vulnerable groups the availability of food depends on:

- The availability of food products that suit their nutritional needs and eating habits.
- Some older people may have difficulty in eating hard foods and may require a different food type that is not available at the market or at food distributing centres.
- A disrupted local (village) market, that is, a market to which traders no longer bring food and goods from larger markets, may adversely affect the availability of food to older people and other vulnerable groups.
- A disaster may affect the production or processing of certain key food products that are particular to the dietary needs of older people."[41]

In 2013 *HelpAge International* reported that "for older people and other vulnerable groups, access to food depends on:

- The distance to their nearest market. Older people often tend to use local markets rather than travel to towns. Their ability to get to market to buy food and transport it home may be affected by reduced mobility, even if they have money to buy food.
- Food distribution points run by the state or humanitarian agencies may be too far away or too difficult for older people and other vulnerable groups to reach.
- Older people may not be able to access any existing safety net or social protection programmes.
- Cultural norms within the household dictate who has priority access to food.
- Older people may be the last to receive food (or they may be the first).
- Older people may choose to forgo food so that younger members of the family can eat.
- Families may or may not prioritise older family members' needs in decisions about family spending.
- Older people may or may not participate in family decision-making."[42]

In 2013 *HelpAge International* reported that "for older people and other vulnerable groups, utilisation of food depends on:

- Older people, particularly those with limited mobility, vision and hearing, may require a

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39 UN Committee on Economic, Social and Cultural Rights (CESCR), Consideration of reports submitted by States parties under articles 16 and 17 of the Covenant : concluding observations of the Committee on Economic, Social and Cultural Rights : Afghanistan , 7 June 2010, E/C.12/AFG/CO/2-4, para 17, http://www.refworld.org/docid/4ef1fb5e2.html, accessed 22 January 2015

40 HelpAge International, Food security among crisis affected older people in Afghanistan, 2013, http://www.refworld.org/publisher,HELPAGE,COUNTRYREP,AFG,525baf4b4,0.html, accessed 27 February 2015

41 HelpAge International, Food security among crisis affected older people in Afghanistan, 2013, http://www.refworld.org/publisher,HELPAGE,COUNTRYREP,AFG,525baf4b4,0.html, accessed 27 February 2015

42 HelpAge International, Food security among crisis affected older people in Afghanistan, 2013, http://www.refworld.org/publisher,HELPAGE,COUNTRYREP,AFG,525baf4b4,0.html, accessed 27 February 2015

carer or support with food preparation, collection of such essentials as water and fuel, and the storage of food commodities.

- Older people may have specific nutritional requirements because of chronic disease or malnutrition.
- Older people may be unable to utilise the kinds of food provided in food distributions. For example, those who have lost teeth may find it hard to chew hard foods, or they may find some foods difficult to digest. Access to fuel and cooking utensils may be essential to make food edible for older people."[43]

In 2013 *HelpAge International* reported that in community-level needs assessments in response to humanitarian crisis, the needs and suggestions of other family members, apart from men, including older people and people with disabilities, are not always incorporated in the findings,

> "A needs assessment is one of the most critical steps in a humanitarian agency's response to a crisis. The quality of the assessment determines to a large extent the quality of programming. It is important to recognise that a needs assessment can take different forms, ranging from the analysis of secondary data where access is limited to the analysis of detailed primary and secondary data where contexts allow.
>
> In Afghanistan, community-level needs assessments are largely carried out through consultation with leaders of Community Development Committees (CDCs), Shura and government officials. When household surveys are conducted, the interview is mostly held with the head of the households – both males and females of various ages. Since community leaders and specialist key informants in positions of authority in Afghanistan are generally adult men, this can introduce a significant bias. In such processes, the needs and suggestions of other family members, especially women, children, older people and people with disabilities are not always incorporated in the findings. Such "invisibility" in assessment processes will, therefore, be automatically transferred into the ranking of needs and priorities."[44]

In 2013 *HelpAge International* reported that there are opportunities to ensure inclusion of older people, for example, the use of "selection committees". *HelpAge* International reported that despite such attempts, older people remain excluded,

> "While assessments form an integral part of programme design and the targeting of assistance, there are further opportunities to ensure inclusion of older people. In Afghanistan, one method is the use of "selection committees" designed to draw on community understanding of vulnerability to target assistance to those most in need. However, despite such attempts, older people remain excluded in many instances."[45]

In 2013 *HelpAge International* reported that a major challenge for the inclusion of older people in food distributions is the fact that only 60% of Afghan nationals have national identity cards –

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43 HelpAge International, Food security among crisis affected older people in Afghanistan, 2013, http://www.refworld.org/publisher,HELPAGE,COUNTRYREP,AFG,525baf4b4,0.html, accessed 27 February 2015

44 HelpAge International, Food security among crisis affected older people in Afghanistan, 2013, http://www.refworld.org/publisher,HELPAGE,COUNTRYREP,AFG,525baf4b4,0.html, accessed 27 February 2015

45 HelpAge International, Food security among crisis affected older people in Afghanistan, 2013, http://www.refworld.org/publisher,HELPAGE,COUNTRYREP,AFG,525baf4b4,0.html, accessed 27 February 2015

the primary source of identification for Afghan citizens. *HelpAge International* reported that the issue becomes critical for older people, or persons with disabilities, and evidence showed that no specific provision was made to ensure food items reached those who cannot access distribution sites.

> "A major challenge for the implementation of large-scale interventions in Afghanistan is the lack of identification. The primary source of identification for Afghan citizens is Tazkera or National Identity Cards (NIC), however, at present only 60 per cent of Afghan nationals have identity cards, posing major challenges for verifying the identity of beneficiaries. The issue becomes critical for older people, those who are infirm and people with disabilities, or those who are otherwise housebound. They are often forced to send representatives to collect the food ration or cash to which they are entitled. In the absence of proper identification, it is very challenging to establish the identity of the beneficiary and their representative, implying protection risks for older or disabled people who may ultimately never receive the assistance.
>
> Evidence from Afghanistan found in most cases no specific provision was made to ensure food items reached beneficiaries who cannot access distributions site. As per local cultural practices, able-bodied men from within the communities assist those with mobility problems to transport food, however, this is not a standardised practice, and there is no monitoring of whether assistance reaches its intended beneficiary."[46]

2. Access to services for elderly persons and persons with disabilities

a. Availability, accessibility and quality of basic and specialized services

i. Health care, including specialized medical services

The *Global AgeWatch Index* was created by elder advocacy group HelpAge International and the U.N. Population Fund in part to address a lack of international data on the extent and impact of global aging. The index, released on the U.N.'s International Day of Older Persons, compiles data from the U.N., World Health Organization, World Bank and other global agencies, and analyzes income, health, education, employment and age-friendly environment in each country.[47] In October 2014 Afghanistan ranks lowest on the Global AgeWatch Index, at 96 overall (out of 96 countries).[48]

According to the GlobalAge Watch Index 2014, 1.2 million people over 60, 43% of people over 50 are satisfied with the local public transportation systems. Old age poverty rate - 7.2% of people aged 60+ have an income of less than half the country's median income.[49]

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46 HelpAge International, Food security among crisis affected older people in Afghanistan, 2013, http://www.refworld.org/publisher,HELPAGE,COUNTRYREP,AFG,525baf4b4,0.html, accessed 27 February 2015

47 Global AgeWatch, About Global AgeWatch, http://www.helpage.org/global-agewatch/about/about-global-agewatch/, accessed 2 March 2015

48 Global AgeWatch Index 2014, AgeWatch Report Card, Afghanistan, http://www.helpage.org/global-agewatch/population-ageing-data/country-ageing-data/?country=Afghanistan, accessed 02 March 2015

49 Global AgeWatch Index 2014, AgeWatch Report Card, Afghanistan, http://www.helpage.org/global-agewatch/population-ageing-data/country-ageing-data/?country=Afghanistan, accessed 02 March 2015

In its national report submitted to the UN Human Rights Council to be examined in the Universal Periodic Review in February 2009 *Afghanistan* stated,

> "Article 53 of Constitution has assigned the GoA to ensure necessary measures for rehabilitation of disabled and handicaps and to enable them to regain their active participation in government and public life. To this effect, Law of Disabled Rights was adopted and enforced. Afghanistan has about 1,000,000 people who were disabled during the conflict years. Great majority of them are faced with grave problems of life. The State cannot extend sufficient aid to them to alleviate their problems. The disabled face many problems with the small salary that they receive. Also, it requires that the GoA should take measures in this area; however, the GoA is not able to fulfill its obligations because of the weakness of national economy."[50]

In its national report submitted to the UN Human Rights Council to be examined in the Universal Periodic Review in February 2009 *Afghanistan* stated that the State has adopted measures to provide necessary assistance and support to *inter alia* the elderly and persons with disabilities,

> "In conformity with provisions of Article 53 of the Constitution of Afghanistan the State is legally bound to adopt measures for their active participation in society. The state has guaranteed the right of the retired and should provide necessary assistance and support to the elderly, women without family support, the disabled, handicapped, and destitute orphans. Among achievements, to this effect support to a total of 9,312 orphan boys and girls in 54 orphanages throughout the country should be mentioned. These centers have been equipped with boarding, recreation, and educational facilities. Similarly, a total of 369 kindergartens are functioning throughout the country and special schools have been established for disabled children. Also, the state has provided for operation of a number of private banks, and has provided small loans to a number of citizens. At rural level, the GoA has also taken measures to create vocational employment for the rural citizens through village councils and to improve the lives of the people through rural development. Despite all these efforts, the GoA does not have the ability to provide to social security due to shortage of resources and facilities. There are a wide range of problems in the area of social welfare and most of the citizens, especially in the rural areas, rarely have access to social and welfare services, and this has created a consumer economy in the country."[51]

In September 2013 *Women Living Under Muslim Laws* (an international solidarity network that provides information, support and a collective space for women whose lives are shaped, conditioned or governed by laws and customs said to derive from Islam) reported that there are interrelated concerns and challenges that are faced by ageing women in Afghanistan,

> "Afghan women continue to have very low status in society and are denied rights and

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50 Afghanistan, National Report Submitted in Accordance with Paragraph 15 (A) of The Annex to Human Rights Council Resolution 5/1: Afghanistan, Human Rights Council, 24 February 2009, para 52, http://www.refworld.org/topic,50ffbce51b1,50ffbce5208,49b5042e2,0,UNHRC,,AFG.html, accessed 01 March 2015

51 Afghanistan, National Report Submitted in Accordance with Paragraph 15 (A)of The Annex to Human Rights Council Resolution 5/1: Afghanistan, Human Rights Council, 24 February 2009, para 52, http://www.refworld.org/topic,50ffbce51b1,50ffbce5208,49b5042e2,0,UNHRC,,AFG.html, accessed 01 March 2015

opportunities for empowerment throughout their life spectrum. Within such an oppressive context which is aggravated by inept governance, lack of security, and massive poverty, Afghanistan may be the worst place for a woman to spend her twilight years.

There are interrelated concerns and challenges that are faced by ageing women in the country, which are: (1) low life expectancy; (2) diminished value as a human being; (3) inadequate welfare support; (4) absence of health services; (5) lack of studies/data for policy and action; (6) absence of activism for the population of ageing women; (7) gender biased attitudes of society towards them; and (8) greater vulnerability to violence and disasters.

These are only a few of the many challenges that ageing women in Afghanistan are experiencing and could not be taken as a substitute for a comprehensive study on the subject. A research on the situation of the ageing population in the country, with special attention to the plight of ageing women, must be conducted within the immediate future to create evidences that would support policy advocacy and programming for them. It is still a long way to go, but the first steps must begin now."[52]

In 2006 *Handicap International* reported that in 2003 a health services delivery policy was established by the Ministry of Public Health. *Handicap International* reported that the comprehensive development of service-provision activities has been slow and is in need of guidance,

"The Ministry of Public Health (MoPH) has been assigned the task of addressing the health needs of the Afghan population. In 2003, this ministry established a health services delivery policy called the Basic Package of Health Services (BPHS) which outlined seven areas of priority in: maternal and newborn health, child health and immunisation, public nutrition, communicable diseases (tuberculosis and malaria), mental health, disabilities, and finally, the supply of essential drugs. They were grouped into three tiers according to priority. Due to lack of knowledge on the scope of the problems, lack of resources and insufficient capacity to integrate services, both mental health and disabilities were associated with secondary tier interventions. With the revision of the BPHS in 2004 and 2005, the provision of mental health and rehabilitative services for disabled Afghans was elevated to first-tier interventions. Despite this, comprehensive development of service-provision activities has been slow and is in need of guidance."[53]

In 2006 *Handicap International* reported that the health expenses of people with disabilities can be considerable,

"Health expenses of persons with disability can be considerable and can weigh upon the finances of the household. Results in this field indicate that a larger percentage of non-disabled persons (39.7%) state that they do not have any expenses for health, compared to 20.1% persons with disabilities. In addition, 39.2% of persons with

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52 Women Living Under Muslim Laws, Afghanistan: Critical concerns and challenges of ageing women, 13 September 2013, http://www.wluml.org/news/afghanistan-critical-concerns-and-challenges-ageing-women, accessed 02 March 2015

53 Handicap International, National Disability Survey in Afghanistan, Executive Summary Report: Understanding the Challenge Ahead, 2006, http://www.handicap-international.org/uploads/media/Understanding-the-challenge-ahead.pdf, accessed 04 March 2015

> disabilities report that they spend between 626 AFAs (12 USD) and 4165 AFAs (85 USD) on health care, compared to only 24.8% of non-disabled persons. This same type of difference is seen for the highest category of expenses, 4166 AFAs and above: here persons with disability are 17.8% to face such high expenses while non-disabled are only 3.9%"[54]

In 2006 *Handicap International* reported that persons with a disability spend more on their health than the non-disabled but face more constraints and difficulties. *Handicap International* reported that distance to health facilities and cost are barriers,

> "Persons with disability are currently spending more for their health and using the health facilities more than non-disabled. Nevertheless, they face more constraints and difficulties in benefiting from a better health. Ensuring access to health services is a priority. A major issue is to address barriers to access public health services such as distance to health facilities and cost. For people with reduced mobility, assistive devices –standardised, well-made, well-fitting, using local materials whenever possible and repairable locally – should be made available countrywide. Availability of generic drugs at the lowest possible price is also a challenge."[55]

ii. Education

In October 2014 the *Global AgeWatch Index* reported that 5.2% of the population aged over 60 have completed secondary or higher education. *Global AgeWatch Index* reported that, "Education is a proxy of lifetime accumulation of skills and competencies that shows social and human capital potential inherent among older people."[56]

In its national report submitted to the UN Human Rights Council to be examined the Universal Periodic Review, in February 2009 *Afghanistan* stated that the constitution provides that all citizens are entitled to free education until they graduate from universities in state sponsored institutions,

> "58. Article 43 of the Constitution on education reads: "All citizens of Afghanistan are entitled to free education until they graduate from universities in state sponsored institutions. Primary education is compulsory until ninth grade." Student population which reached to one million during the Taliban and was limited only for boys, now in 2008 exceeds six million, one third of which are girls, and school curriculum has been widened to include general sciences aswell. It should be noted that during the Taliban all school curricula was confined only to religious subjects. The establishment of private schools and universities is also an important achievement for right to education.
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> 59. Serious challenges lies ahead of education sector in Afghanistan. For example destruction of schools by the terrorist groups during 2008 year caused 650 schools to be burned in south and southwest provinces depriving 300,000 children from school.

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54 Handicap International, National Disability Survey in Afghanistan, Executive Summary Report: Understanding the Challenge Ahead, 2006, http://www.handicap-international.org/uploads/media/Understanding-the-challenge-ahead.pdf, accessed 04 March 2015

55 Handicap International, National Disability Survey in Afghanistan, Executive Summary Report: Understanding the Challenge Ahead, 2006, http://www.handicap-international.org/uploads/media/Understanding-the-challenge-ahead.pdf, accessed 04 March 2015

56 Global AgeWatch Index 2014, AgeWatch Report Card, Afghanistan, http://www.helpage.org/global-agewatch/population-ageing-data/country-ageing-data/?country=Afghanistan, accessed 02 March 2015

> Other challenges include shortage of qualified teachers, especially female teachers, shortage of financial and technical resources leading to low salary for teachers"[57]

Reporting on the human rights situation in 2013, in February 2014 the *US Department of State* (USDOS) reported that people with disabilities faced numerous challenges,

> "Persons with disabilities faced challenges, such as limited access to educational opportunities; an inability to access government buildings, including Kabul International Airport; a lack of economic opportunities; and social exclusion. Persons with disabilities were mistreated in society and even by their own families as there was a common perception that persons had disabilities because they or their parents had "offended God.""[58]

In October 2012 the *Danish Refugee Council* reported that a lack of transport can be a barrier to accessing education,

> "Disabled children can be integrated if their impairment can be compensated i.e. by transport, but if their condition needs more attention than teachers can provide, they will likely get discouraged and abandon classes." [59]

In April 2011 the *UN Committee on the Rights of the Child* (CRC) expressed serious concern at the extent of maltreatment of children with disabilities in families and institutions. It recommended ensuring that those children were not exposed to violence or neglect and had access to education, including inclusive education,

> "The Committee welcomes the National Strategy for Children with Disabilities (2008) and the Law on the Rights and Privileges of People with Disabilities and Martyrs' Families (2010), which should ensure access to education and health services, and promote the participation of children with disabilities. The Committee is however concerned about the limited measures taken so far to implement the law and the strategy, and in particular to collect reliable data on children and their disabilities and support families raising children with disabilities. The Committee also expresses serious concern at the extent of maltreatment of children with disabilities in families and institutions, including psychiatric medication and deprivation of education for the majority of children with disabilities, in spite of the goals set in the above-mentioned National Strategy for Children with Disabilities."[60]

According to the Kabul-based NGO, *Accessibility Organization for Afghan Disabled* (AOAD) ninety five per cent of children with disabilities do not attend school due to inaccessibility,

> "Ninety five percent of children with disabilities in Afghanistan do not attend schools

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57 Afghanistan, National Report Submitted in Accordance with Paragraph 15 (A) of The Annex to Human Rights Council Resolution 5/1: Afghanistan, Human Rights Council, 24 February 2009, para 58-59, http://www.refworld.org/publisher,UNHRC,,AFG,49b5042e2,0.html, accessed 01 March 2015

58 United States Department of State, 2013 Country Reports on Human Rights Practices - Afghanistan, 27 February 2014, http://www.state.gov/j/drl/rls/hrrpt/2013/sca/220386.htm, accessed 01 March 2015

59 Danish Refugee Council, Protection problems in Kabul Informal Settlements (KIS), October 2012, http://www.alnap.org/pool/files/report-protection-problems-in-kabul-informal-settlements.pdf, accessed 13 May 2015

60 UN Committee on the Rights of the Child (CRC), Consideration of reports submitted by States parties under article 44 of the Convention : Convention on the Rights of the Child : concluding observations : Afghanistan, 8 April 2011, CRC/C/AFG/CO/1, para 49, http://www.refworld.org/docid/4dc7bd492.html, accessed 22 January 2015

due to inaccessible environment. The level of literacy rate for adults and children with disabilities is very low because of the less attention and lack of literacy education facilities in the country.

The students with disabilities thus who are graduated from higher education remained jobless and is very difficult to find jobs due to the lack of support from the local and central government. The government of Afghanistan in the law gave 3% employment quota for disabled Afghan for being working in both government and private sectors but the policy is not implemented yet."[61]

AOAD reported that children with disabilities do not have equal access to education, health and employment,

"In Afghanistan, access to education for all children (especially children with disability) is limited due to the present security situation. There are limited schools building accessible with ramps but entire adaptation such access to classes, toilet, and kitchens are not accessible and very difficult for children and youth with disabilities to attend in the schools independently.

Based on AOAD's field research and surveys, young children and children with disabilities do not have equal access to education, health and employment.[62]

In November 2012 *Mine Action Coordination Centre of Afghanistan* reported that the vast majority of infrastructure remains inaccessible to people with disabilities,

"The vast majority of infrastructure in Afghanistan remains inaccessible to people with physical disabilities. Resolving physical impediments to buildings and key public sites is therefore critical to ensuring both landmine/ERW survivors and other PWD are able to fully participate in community life. Schools, parks, hospitals, clinics, training sites, government buildings and places of religious worship shall be made accessible and physical barriers either removed or corrected according to internationally recognized Best Practice design and implementation standards."[63]

iii. Water and sanitation

In June 2010 the *UN Committee on Economic, Social and Cultural Rights* (CESCR) noted with noted "with concern that a high percentage of the population in Afghanistan lack basic services such as drinking water, waste removal, sanitary facilities and electricity, and that due to the lack of sewage systems, water sources are contaminated and unsafe, thus causing serious health problems."[64]

In March 2012 *HydrateLife*, a Blog that reports on global water and sanitation problems

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61 Accessibility Organization for Afghan Disabled, Disability and Education, http://www.aoad-af.org/, accessed 28 February 2015

62 Accessibility Organization for Afghan Disabled, Organizational Action, http://www.aoad-af.org/, accessed 28 February 2015

63 Mine Action Coordination Centre of Afghanistan, Victim Assistance, November 2012, http://www.mineactionstandards.org/fileadmin/MAS/documents/nmas-national-standards/afghanistan/AMAS_09.02_Victim_Assistance.pdf, accessed 28 February 2015

64 UN Committee on Economic, Social and Cultural Rights (CESCR), Consideration of reports submitted by States parties under articles 16 and 17 of the Covenant : concluding observations of the Committee on Economic, Social and Cultural Rights : Afghanistan , 7 June 2010, E/C.12/AFG/CO/2-4, http://www.refworld.org/docid/4ef1fb5e2.html, accessed 27 February 2015

reported that 80% of Kabul's population lack access to safe drinking water and 95% lack access to improved sanitation facilities. *HydrateLife* reported that the damage and destruction of infrastructure from conflict has resulted in these high numbers,

> "In Kabul, with a population of 6 million, 80% of the people lack access to safe drinking water, and 95% lack access to improved sanitation facilities.
>
> One of the many reasons for these numbers being so appalling is because their infrastructure has been damaged or destroyed by years of war. From 1992 to 1996 fighting between different mujahidin groups led to indiscriminate shelling of Kabul and other cities which destroyed most of the water infrastructure, including pump stations used to get fresh water. Then in 1996 the Taliban took over, leading to a lull in the violence. However, the Taliban did little to rebuild the infrastructure in Kabul and elsewhere, instead focusing on imposing their version of Islamic law. In 2001 the Taliban was pushed from power by coalition forces, and Afghanistan has been at war ever since, giving it no time to rebuild."[65]

In 2013 UNICEF reported that raised single vault latrines are commonly used within Afghanistan and that water quality is poor,

> "Water quality is a much overlooked element of water supply in Afghanistan even though it has been established that some water sources have chemicals of health significance (particularly arsenic, fluoride and nitrate) in concentrations significantly above the safe levels for health for long term consumption as established by the World Health Organisation. Many water points, both unimproved and improved have been shown to be faecally contaminated and there are a number of other water quality issues such as those relating to salinity and the hardness of the water. Efforts have gone into establishing national water quality standards and work has started to build capacities of national and sub-national laboratories of the MoPH and the MRRD for surveillance and monitoring."[66]

iv. Shelter

In its national report submitted to the UN Human Rights Council to be examined in the Universal Periodic Review in February 2009, *Afghanistan* stated that the rights to shelter is protected in the constitution,

> "The Constitution of Afghanistan provides for the right to shelter and obliges the government to take necessary measures to supply and distribute public land to deserving citizens in conformity with law within available resources. Rapid growth of urban dwellings and accommodating new groups of returnees and displaced persons, expansion of poverty and slums in the cities have been exacerbated the shelter problem in Afghanistan. The GoA with financial support of the World Bank has launched a shelter project in Dehsabz district of Kabul to build 20,000 houses and alleviate pressures from other 20 districts of the capital, despite this; serious problems

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65 HydrateLife, Afghanistan's Water Crisis, 28 March 2012, http://www.hydratelife.org/?p=105, accessed 02 March 2015

66 UNICEF, WASH components of the situation analysis of children and women, Afghanistan, 31 August 2013, https://www.humanitarianresponse.info/system/files/documents/files/WASH%20SitAn%20-%20FINAL%20-%2031_8_13.pdf, accessed 14 May 2015

> still exist in this area. Shelter problem is quite complicated in rural areas as well. 70 per cent of rural populations inherit their houses, 10 per cent live in their relatives houses and less than 10 per cent have purchased their own houses in villages, 2 per cent of villagers do not have their own houses and 40 per cent of them rent houses for living."[67]

In February 2009 *Afghanistan* further stated, "In order to provide access to shelter for citizens, the GoA has just adopted the law of shelter loan. Despite all these efforts, there are many citizens of Afghanistan whose properties have been seized by powerful people and so the conflict over land is one of the serious problems of the people. Although the GoA has launched 24 programs to build townships for the returnees, the problem still persists seriously. The issue of construction of buildings without meeting required standards is also a problem facing people."[68]

In June 2010 the *UN Committee on Economic, Social and Cultural Rights* (CESCR) expressed its deep concern about the acute shortage of adequate housing in Afghanistan, especially in the densely populated urban areas where the disadvantaged and marginalized individuals and groups live, such as older persons and people with disabilities,

> "The Committee is deeply concerned about the acute shortage of adequate housing in the State party, including sound housing units, especially in the densely populated urban areas where the disadvantaged and marginalized individuals and groups, such as poor families, IDPs, older persons and people with disabilities, live in informal settlements, shelters and camps which lack basic infrastructure and basic facilities and services."[69]

b. Livelihood opportunities

i. Access to labour markets (formal and informal)

In October 2014 the *Global AgeWatch Index* reported that 47% of the population aged 55-64 is employed.[70]

In June 2010 the *UN Committee on Economic Social and Cultural Rights* (CESCR) expressed its concern at the lack of relevant and reliable employment statistics and the lack of employment opportunities for young people, returnees, and internally displaced persons,

> "The Committee is concerned at the fact that the unemployment situation in the State party is difficult to quantify due to the lack of relevant and reliable labour statistics and labour market information.

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67 Afghanistan, National Report Submitted in Accordance with Paragraph 15 (A) of The Annex to Human Rights Council Resolution 5/1: Afghanistan, Human Rights Council, 24 February 2009, para 54, http://www.refworld.org/publisher,UNHRC,,AFG,49b5042e2,0.html, accessed 01 March 2015

68 Afghanistan, National Report Submitted in Accordance with Paragraph 15 (A) of The Annex to Human Rights Council Resolution 5/1: Afghanistan, Human Rights Council, 24 February 2009, para 55, http://www.refworld.org/publisher,UNHRC,,AFG,49b5042e2,0.html, accessed 01 March 2015

69 UN Committee on Economic, Social and Cultural Rights (CESCR), Consideration of reports submitted by States parties under articles 16 and 17 of the Covenant : concluding observations of the Committee on Economic, Social and Cultural Rights : Afghanistan , 7 June 2010, E/C.12/AFG/CO/2-4, para 38, http://www.refworld.org/docid/4ef1fb5e2.html, accessed 22 January 2015

70 Global AgeWatch Index 2014, AgeWatch Report Card, Afghanistan, http://www.helpage.org/global-agewatch/population-ageing-data/country-ageing-data/?country=Afghanistan, accessed 02 March 2015

> The Committee is concerned at the lack of employment opportunities for young people, returnees and internally displaced persons (IDPs), in particular in the agricultural sector."[71]

The *Development and Ability Organization,* a Kabul-based NGO, reported that landmine survivors and other people with disabilities need educational and employment opportunities,

> "Persons with disabilities including mine victims are among the poorest people of Afghanistan and many were the sole breadwinners of their families. These people often experience a loss of the independence and ability to earn a livelihood. Thus while mines impact and other causes of disabilities heavily on the individual, they often have serious repercussions for the victims' families. Landmines Survivors and other persons with disabilities desperately need educational and employment opportunities that enable them to contribute to or provide for alienation within the workplace, but also face the current job shortage in Afghanistan that has left all Afghans with limited employment opportunities and choices."[72]

In 2006 *Handicap International* reported that the employment rate is lower for people with disabilities than for non-disabled in Afghanistan. *Handicap International* reported that 27.8% of persons with disability aged 15-64 cannot work due to their health condition,

> "The employment rate is lower for persons with disability than for non-disabled in many countries, as is the case in Afghanistan. The difference of level of employment between the two groups is statistically significant. The same observation goes for people in charge of household tasks. Disability impedes both professional activities and household tasks. In the first case, men are more concerned; in the second, women are in majority. Moreover, 27.8% of persons with disability aged 15 to 64 cannot work inside or outside the house due to severity of their health condition."[73]

In 2006 *Handicap International* reported that many barriers remain for people with disabilities, especially women in seeking a job to earn a living. *Handicap International* reported that the labour market provides few opportunities for people with disabilities and an active employment policy would be a first step towards inclusion for people with disabilities in the labour market,

> "When asked, the first thing persons with disability seek is a job to earn their living. While progress is being made towards employment for persons with disability, many barriers remain, especially for women with disabilities and persons living in remote rural areas. The labour market, dominated by the agricultural sector, provides few opportunities for the most impaired, and especially for women if they are disabled. Yet, the practice of a paid activity is a clincher for social recognition, thus self-esteem and independence. Nevertheless, average income of persons with disability is lower and

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71 UN Committee on Economic, Social and Cultural Rights (CESCR), Consideration of reports submitted by States parties under articles 16 and 17 of the Covenant : concluding observations of the Committee on Economic, Social and Cultural Rights : Afghanistan , 7 June 2010, E/C.12/AFG/CO/2-4, paras 21-22, http://www.refworld.org/docid/4ef1fb5e2.html, accessed 2 March 2015

72 Development and Ability Organization, About DAO, http://www.daoafghanistan.org/adu.htm, accessed 2 March 22015

73 Handicap International, National Disability Survey in Afghanistan, Executive Summary Report: Understanding the Challenge Ahead, 2006, http://www.handicap-international.org/uploads/media/Understanding-the-challenge-ahead.pdf, accessed 04 March 2015

the level of unemployment is higher than that for non-disabled. Even if the level of employment for persons with physical or sensorial disability (mainly men) and for war survivors is as high as for non-disabled persons, the level of income remains lower for the former. An active employment policy based, among other measures, on a general obligation of employment of a certain percentage of persons with disability, both in public and private sectors, is a first step towards inclusion in the labour market."[74]

ii. Access to other opportunities to earn sufficient income to meet minimum standard of living conditions, including self-employment / business opportunities; financial support from private charities, NGOs, etc.

In 2006 *Handicap International* reported that people with disabilities engage in work such as street vendors, shopkeepers with other jobs with unstable wages and status. Handicap International reported that people with disabilities make up a slightly higher proportion of "self-employed activities,"

> "When they have work, persons with disability occupy jobs that have more or less a similar status as the non-disabled. Persons with disability are less present in professions requiring physical strength, of course: farmers, construction workers, drivers, mechanics... Yet they are in significantly higher proportion working as street vendors, shopkeepers and other little jobs, with unstable wages and no status. Non-disabled persons constitute a larger proportion of landowners or mortgagers, while persons with disability are more often occasional workers. Persons with disability are also in slightly higher proportion in self-employed activities, which is often the term used for shopkeepers or street vendors."[75]

iii. Availability and access to social security and state pensions

In August 2011 the *Afghanistan Independent Human Rights Commission* stated that there is no social security provision for those not working for the government,

> "In Afghanistan there is no social security provision such as, pension benefit for older person of non-governmental organizations, self-employed persons in the informal economy, part-time workers, home workers and casual workers.
>
> Due to poor economy, countries such as Afghanistan, Bangladesh, India, Pakistan and some other Asian countries provide social security benefits only to person with disabilities and very poor destitute persons and disaster effected people."[76]

In October 2014 the *Global AgeWatch Index* reported that 10% of people over 65 are receiving a pension.[77]

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74 Handicap International, National Disability Survey in Afghanistan, Executive Summary Report: Understanding the Challenge Ahead, 2006, http://www.handicap-international.org/uploads/media/Understanding-the-challenge-ahead.pdf, accessed 4 March 2015

75 Handicap International, National Disability Survey in Afghanistan, Executive Summary Report: Understanding the Challenge Ahead, 2006, http://www.handicap-international.org/uploads/media/Understanding-the-challenge-ahead.pdf, accessed 4 March 2015

76 Afghanistan Independent Human Rights Commission, Older Persons and Multiple Discrimination, August 2011, http://social.un.org/ageing-working-group/documents/Older%20person%20%28Afghanistan%29.pdf, accessed 02 March 2015

77 Global AgeWatch Index 2014, AgeWatch Report Card, Afghanistan, http://www.helpage.org/global-agewatch/population-ageing-data/country-ageing-data/?country=Afghanistan, accessed 02 March 2015

In September 2013 *Women Living Under Muslim Laws* reported that despite the fact that the Afghan Constitution provides that the rights of elderly and people with disabilities the government does not allocate sufficient resources for the pension and care of the elderly,

> "In policy, the State explicitly commits to assist in the care of needy elders. Article 53, Section 2 of the Afghan Constitution provides that, "The State guarantees the rights and privileges of pensioners and disabled and handicapped individuals and as well renders necessary assistance to needy elders, women with caretakers, and needy orphans in accordance with the law."
>
> Yet, the government does not allocate sufficient resources for the pension and care of needy elders. This was acknowledged in paragraph 16 of the combined first and second reports of the Afghanistan government on the implementation of the Convention on the Elimination of all forms of Discrimination against Women (CEDAW) which states that, "The government has granted the pensions and gives the needed financial support to the elders, poor women…. However, due to shortage of financial resources, the government is not able to provide sufficient social services." The neediest elders receive no more than the equivalent of $5 dollars a month. And as long as millions of dollars are being spent to fight a senseless battle with anti-government elements, our people could never expect the government to consider social security of the elders as a priority."[78]

In June 2010 the *UN Committee on Economic, Social and Cultural Rights* noted with concern that Afghanistan has not put in place a basic security system and therefore a large number of disadvantaged individuals including older persons are not entitled to any protection,

> "The Committee notes with concern that the State party has not yet put into place a basic social security system and that therefore a large number of disadvantaged and marginalized individuals and groups, including older persons, self-employed persons, women, in particular single mothers, IDPs, returnees and refugees are not entitled to any protection."[79]

c. Social support mechanisms

i. Role of extended families /clans /tribal networks in providing support

In an interview conducted by CORI in February 2015, *Dr Majid Turmusani*[80] Disabilities Procedural Implementation Consultant at Louis Berger based in Ottawa, Canada, reported that a protective attitude towards people with disabilities by families exists, but can mean that the government does not offer support,

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78 Women Living Under Muslim Laws, Afghanistan: Critical concerns and challenges of ageing women, 13 September 2013, http://www.wluml.org/news/afghanistan-critical-concerns-and-challenges-ageing-women, accessed 02 March 2015

79 UN Committee on Economic, Social and Cultural Rights (CESCR), Consideration of reports submitted by States parties under articles 16 and 17 of the Covenant : concluding observations of the Committee on Economic, Social and Cultural Rights : Afghanistan , 7 June 2010, E/C.12/AFG/CO/2-4, para 26, http://www.refworld.org/docid/4ef1fb5e2.html, accessed 2 March 2015

80 Majid Turmusani, PhD is a researcher and policy planner. Dr Turmusani specializes in disability and development issues with international policy research experience. He has worked on a number of international development projects in Jordan, Yemen, Kosovo, Afghanistan, UK and Canada. His work also has a focus on wider socio-economic development issues such as poverty and employment, culture and religion, community based rehabilitation (CBR), research & evaluation, policy planning and strategy development, and human rights. http://independent.academia.edu/MajidTurmusani, accessed 03 March 2015

> "The family network is more active in rural areas, in a tribal society the family has great influence over the members, especially if they are disabled. It is true that there is a kind of protection attitude to towards the disabled in communities. This is good but it results in the government somewhat washing its hands of the problem. The State has responsibility and should assume its obligations." [81]

In 2004 *Dr Majid Turmusani* stated that families are left alone to care for their family members with disabilities in the absence of state support,

> "With the absence of welfare system such as the case in Afghanistan, families are left alone to care for their disabled members, consuming time and resources that many cannot afford. The state "transitional government" in this case does exploit family resources instead of extending the required support for all citizens. It becomes apparent that the family needs external support and that can best be extended when available in their localities."[82]

In 2004 Dr Majid Turmusani reported that the presence of a child with disability affects the whole life of a family, especially the mother who is traditionally responsible to care for other family members,

> "The impact of having impairment does not only affect disabled persons themselves but also their surrounding environment. The presence of disabled child for example affects the whole life of a family as well as the life of local community at large. Parents namely mothers are, especially affected by the presence of a disabled member within the family. This is especially true in a traditional society such as Afghanistan where responsibility of care is often left to female members of the family (i.e. mothers)."[83]

In September 2013 *Women Living Under Muslim Laws* (WLUML) reported that the care for elderly people continues to be in the hands of families. WLUML reported that as Afghan families are headed by men, ageing women have a limited voice,

> "In this scenario, the care for elders in Afghanistan continues to be in the hands of families. Unfortunately, Afghan families are ruled by men. All women, including the female elders, are expected to submit to the full authority of the family head - or face the risk of verbal, economic, psychological, and physical violence. Ageing women have limited voice in the family. Their engagement outside of the home is restricted, and they are denied of rights and opportunities for quality life that ageing women enjoy in other societies. Their life is characterized by confinement to household activities, bereft of social, recreational and other stimulating activities – almost like being in a prison with a death sentence."[84]

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81 CORI Interview with Dr Majid Turmusani conducted via Skype. 21 February 2015

82 Disability World, Issue No 23 May-April 2004, Afghanistan: Community Based Approach to Parents with Disabled Children: Reality or Ambition?, 2004, http://www.disabilityworld.org/04-05_04/children/afghanistan.shtml, accessed 03 March 2015

83 Disability World, Issue No 23 May-April 2004, Afghanistan: Community Based Approach to Parents with Disabled Children: Reality or Ambition?, 2004, http://www.disabilityworld.org/04-05_04/children/afghanistan.shtml, accessed 03 March 2015

84 Women Living Under Muslim Laws, Afghanistan: Critical concerns and challenges of ageing women, 13 September 2013, http://www.wluml.org/news/afghanistan-critical-concerns-and-challenges-ageing-women, accessed 02 March 2015

ii. Charities, NGOs and other organizations (including religious groups/organizations) that provide support to elderly persons and persons with disabilities

In February 2015 the *Swedish Committee for Afghanistan* reported they had trained 121 people with disabilities in several vocational courses,

> "Swedish Committee for Afghanistan trained 121 persons with disabilities including 50 females in several vocational courses in Ghazni, Logar and Maidan Wardak provinces. Funded by the SCA with nearly seven million Afs, the vocational courses included tailoring, carpentry and furniture making.
>
> The graduates upon completion of nine-month long training were awarded certificates along with kits and financial support in launching their own businesses.
>
> Mohammad Nabi, who received training in carpentry, said after his father's death, he was the only bread-winner for his family. "I won't face difficulties now like I did before."[85]

In 2013 *HelpAge International* reported "a number of agencies have adopted more sophisticated approaches for understanding levels of vulnerability in the community and overcoming some of the pitfalls associated with community targeting." HelpAge International highlighted the work of Oxfam GB and ActionAid as examples of sophisticated approaches for understanding levels of vulnerability in the community,

> "Oxfam GB, along with its partner Organization for Humanitarian Welfare measures vulnerability based on the number of dependents in a household versus the household's ability to work and resources. Beneficiaries in the project are selected using this criteria resulting in a number of older men and women being selected as primary beneficiaries. For example, since many older men and women could not participate in cash-for-work interventions, they were assisted with unconditional cash transfers.
>
> -During its 2011 drought response, ActionAid delivered cash by M-PAISA (mobile phone) using Participatory Vulnerability Analysis to support beneficiary selection resulting in 80 per cent of the 1,600 beneficiaries being selected from four categories: widows, older people, people with disabilities and landless farmers."[86]

The *Afghanistan Landmine Survivors' Organisation* (ALSO) was established in July 2007 based on the needs of people with disabilities as a non-profit, non-religious, non- government organization registered in the Ministry of Economy of Afghanistan.[87]

Handicap International works to improve the lives of people with disabilities, particularly landmine victims. *Handicap International* works to increase the capacity of rehabilitation

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85 Swedish Committee for Afghanistan, Persons with disabilities to initiate self-employment, 25 February 2015, http://www.swedishcommittee.org/news?post_id=4245, accessed 26 February 2015

86 HelpAge International, Food security among crisis affected older people in Afghanistan, 2013, http://www.refworld.org/docid/525baf4b4.html, accessed 27 February 2015

87 Afghanistan Landmine Survivors' Organisation, http://www.afghanlandminesurvivors.org/, accessed 22 January 2015

centres,

> "Handicap International's goal in Afghanistan is to improve the lives of people with disabilities, particularly those that have received injuries as a result of landmine accidents. We aim to increase the capacity of rehabilitation services that are accessible, ensure that people with disabilities are included in local and national level initiatives and to reduce the number of people killed and injured in landmine accidents by promoting safety messages.
>
> Our first activities in Afghanistan started in 1987 when we began providing rehabilitation services for landmine victims at an orthopaedic-fitting centre in Kandahar. The rehabilitation centre now supports thousands of people each year whilst our network of volunteers work with communities to raise awareness about the danger of landmines and refer those in need to the rehabilitation centre. We currently support people and communities in the provinces of Kandahar, Herat, Helmand and Kabul."[88]

Accessibility Organization for Afghan Disabled (AOAD) "works with schools, communities, the government authorities and business communities to advocate for equalization and rights of persons with disability, providing equal participation in the schools for comprehensive education facilities to all the children and people with disabilities through accessible entrance way and excellent social behaviors."[89]

In December 2013 the *United Nations Development Programme* (UNDP) reported that the *Accessibility Organization for Afghan Disabled* is one of the members of the Civil Society Advisory Committee (CSAC) to UNDP Afghanistan,

> "The Afghan civil society is ready to play a meaningful role in supporting UNDP efforts for building a strong and resilient Afghanistan with institutions that foster accountability and good governance, and deliver quality development results for the citizens". This was stated by Abdul Khaliq Zazai, head of the Accessibility Organization for Afghan Disabled (AOAD), one of the members of the Civil Society Advisory Committee (CSAC) to UNDP Afghanistan that met for its inaugural consultation, here today.
>
> Fifteen national and international representatives were selected out of the leading civil society organizations that are active across a range of development and humanitarian programmes in Afghanistan to be part of this advisory body, following an intense process of consultation, taking into account their different areas of expertise, a balance of men and women, and the inclusion of youth representatives. Prominent among those present included the Afghan Women's Network (AWN), Afghanistan Research and Evaluation Unit (AREU), Agency Coordinating Body for Afghan Relief (ACBAR), The Liaison Office (TLO) and the Aga Khan Foundation (AKF) - Aga Khan Development Network (AKDN)."[90]

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88 Handicap International, Where we Work: Afghanistan, http://www.handicap-international.org.uk/where_we_work/asia/afghanistan, accessed 28 February 2015

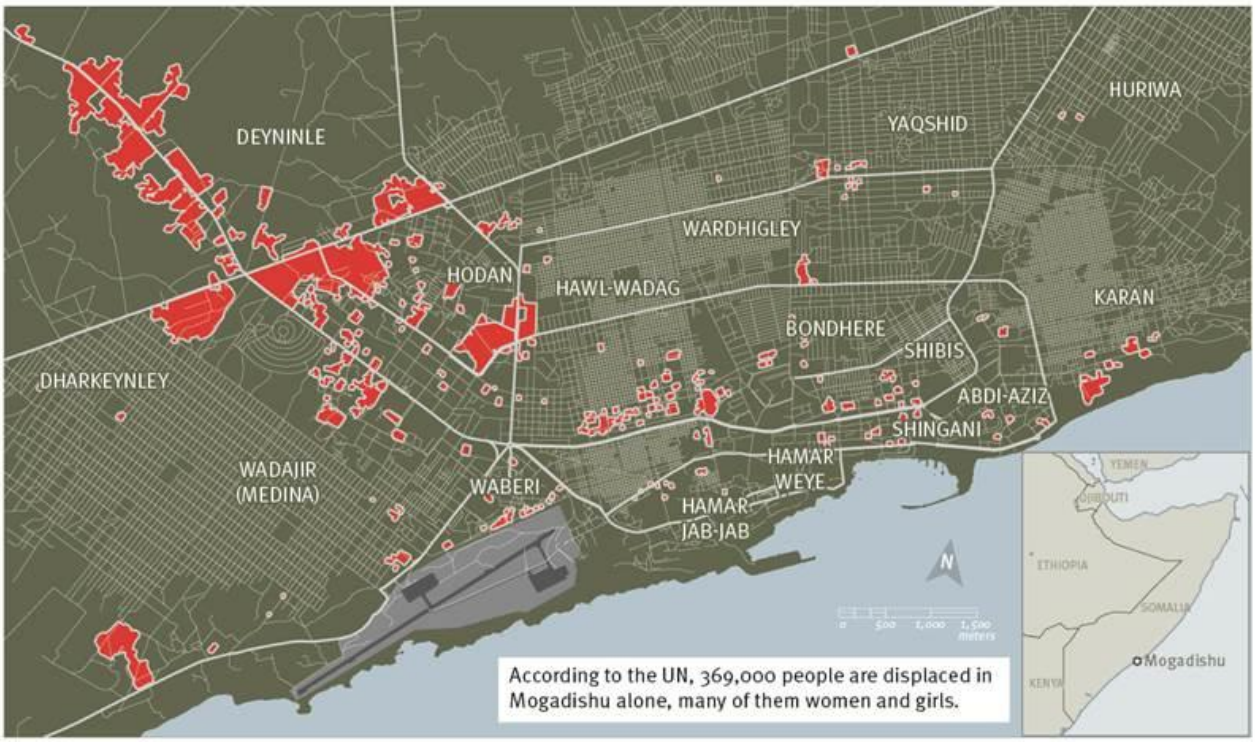
89 Accessibility Organization for Afghan Disabled (AOAD), http://www.aoad-af.org/, accessed 28 February 2015

90 United Nations Development Programme (UNDP) Press Releases, Civil Society Advisory Committee to UNDP Afghanistan launched, 18 December 2013, http://www.af.undp.org/content/afghanistan/en/home/presscenter/pressreleases/2013/12/18/CSAC-launched.html, accessed 28 February 2015

B. MOGADISHU

1. Brief overview and general situation

a. Map of the city, showing (where relevant) IDP settlements and other informal settlements (slums)



Map: IDP Settlements in Mogadishu (Human Rights Watch, 2014).[91]

b. Safety and security situation

i. General situation (conflict, criminal activity, SGBV, etc.)

Reporting on events in 2014, in February 2015 *Amnesty International* reported "Armed conflict continued between pro-government forces, the African Union Mission in Somalia (AMISOM) and the Islamist armed group al-Shabaab in southern and central Somalia. Pro-government forces continued an offensive to take control of key towns. Over a hundred thousand civilians were killed, injured or displaced by armed conflict and generalized violence during the year. All parties to the conflict were responsible for serious violations of human rights and humanitarian law, including AMISOM. Armed groups continued to forcibly recruit people, including children, and to abduct, torture and unlawfully kill people; rape and other forms of sexual violence were widespread. Aid agencies' access remained constrained by fighting,

[91] Human Rights Watch, "Here, Rape is Normal" - A Five-Point Plan to Curtail Sexual Violence in Somalia, 13 February 2014, https://www.hrw.org/report/2014/02/13/here-rape-normal/five-point-plan-curtail-sexual-violence-somalia, accessed 04 March 2015

insecurity and restrictions imposed by parties to the conflict. Journalists and media workers were attacked and harassed. One journalist was killed. Perpetrators of serious human rights abuses continued to enjoy impunity."[92]

In February 2015 *Amnesty International* reported that civilians continued to be killed and wounded indiscriminately in 2014 and there was an increase in suicide attacks involving improvised explosive devices and grenades,

> "Civilians continued to be killed and wounded indiscriminately in crossfire during armed clashes; in suicide attacks and in attacks involving improvised explosive devices (IEDs) and grenades. 2014 saw an increase in such attacks as well as on high profile targets. Al-Shabaab retained the ability to stage lethal attacks in the most heavily guarded parts of Mogadishu, killing or injuring hundreds of civilians. Two deadly attacks took place at Villa Somalia during the year, following a number of such attacks in 2013. In August, a complex attack was carried out on a national security detention facility, killing two civilians. At least 10 people were killed in an attack on parliament in May. Government and AMISOM offensives led to increases in abuses by all parties to the conflict. Air strikes continued to be carried out."[93]

In February 2015 *Amnesty International* reported that civilians were directly targeted in Mogadishu,

> "Civilians remained at risk of targeted attacks and killings in Mogadishu. During Ramadan in July, recorded assassination attempts reached their highest level since al-Shabaab lost control of most parts of Mogadishu in 2010. On 27 July, a businessman was shot and killed by unknown armed men in his shop in Bakara market. On 23 September, a woman was shot and killed in Heliwa district. She had worked as a cook for SNAF forces in Mogadishu."[94]

In February 2015 the *Armed Conflict Location and Event Data Project* (ACLED) a dataset designed for disaggregated conflict analysis and crisis mapping at the University of Sussex, reported that levels of violence in Somalia have gradually declined since a peak in July 2013, however the data suggests an intensification of violence conflict,

> "While violence overall has witnessed a gradual decline since a peak in July 2013, this has been punctuated by upswings in violence, and a concomitant increase in reported fatalities, suggesting an intensification of violent conflict."[95]

In April 2013 *ACLED* reported that Al-Shabaab is not the only violent actor in Mogadishu, which demonstrates that violence is "proliferating in a fractious conflict environment,"

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92 Amnesty International, Amnesty International Report 2014/15 - Somalia, 25 February 2015, https://www.amnesty.org/en/countries/africa/somalia/report-somalia/, accessed 28 February 2015

93 Amnesty International, Amnesty International Report 2014/15 - Somalia, 25 February 2015, https://www.amnesty.org/en/countries/africa/somalia/report-somalia/, accessed 28 February 2015

94 Amnesty International, Amnesty International Report 2014/15 - Somalia, 25 February 2015, https://www.amnesty.org/en/countries/africa/somalia/report-somalia/, accessed 28 February 2015

95 Armed Conflict Location and Event Data Project (ACLED), Conflict Trends (No. 34) Real-Time Analysis of African Political Violence, February 2015, http://www.acleddata.com/wp-content/uploads/2015/02/ACLED-Conflict-Trends-Report-No.-34-February-2015_pdf.pdf, accessed 2 February 2015

> "Al Shabaab's sustained presence and persistent attacks in Mogadishu have been discussed above. However, Al Shabaab is far from the only violent actor in the city. Analysis of interaction data reveals a very high level of violence perpetrated by unidentified armed groups. Some of this violence can certainly be attributed to Al Shabaab operatives or aligned militants who do not claim official responsibility for attacks or are not apprehended (thereby suggesting that the level of sustained violence by Al Shabaab in the city discussed above is actually underestimated).
>
> However, the diffuse nature of the violence and the fact that militants are not identified with an organised group indicates that violence is proliferating in a fractious conflict environment."[96]

In February 2015 *Reuters* news agency reported that Al-Shabaab claimed responsibility for an attack on the Presidential palace in Mogadishu on 26 February 2015,

> "Somalia's al Shabaab militants said they carried out a mortar attack on the presidential palace in the capital Mogadishu on Thursday, but there were no immediate reports of casualties.
>
> [ ]
>
> "We attacked the palace with mortar shells today. Several landed inside the palace," Al Shabaab's military operation spokesman told Reuters"[97]

In February 2015 the *UN News Centre* reported that a terrorist attack was carried out on the Central Hotel in Mogadishu on 20 February 2015 and was claimed by Al-Shabaab,

> "Secretary-General Ban Ki-moon and the United Nations Security Council have joined the head of the UN Assistance Mission in Somalia (UNSOM) in strongly condemning today's deadly terrorist attack on the Central Hotel in Mogadishu, which was claimed by Al-Shabaab.
>
> The attack resulted in the death and injury of dozens of people, including senior members of the Somali Federal Government, said the UN officials, adding that many of those killed and wounded were gathered for Friday prayers."[98]

In February 2015 *Al Jazeera* reported that at least 25 people were killed in the attack, including two members of parliament. *Al Jazeera* reported that the Central Hotel was hit by two bomb explosions, followed by heavy gunfire. *Al Jazeera* reported that Al Shabaab claimed responsibility in a phone call,

> "At least 25 people were killed, including two members of parliament, and 40 injured in an attack by al-Shabab fighters on a luxury hotel in the Somali capital Mogadishu,

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96 Armed Conflict Location and Event Data Project (ACLED),Country Report: Somalia, April 2013, http://www.acleddata.com/wp-content/uploads/2013/04/ACLED-Country-Report_Somalia_April-2013.pdf, accessed 26 February 2015

97 Reuters Africa, Somalia's al Shabaab say fire mortars at presidential palace, 26 February 2015, http://www.reuters.com/article/2015/02/26/us-somalia-security-idUSKBN0LU19G20150226, accessed 26 February 2015

98 UN News Centre, UN condemns 'cruel and despicable' Al-Shabaab attack on Mogadishu hotel, 20 February 2015, http://www.un.org/apps/news/story.asp?NewsID=50139#.VOzG0HysWSo, accessed 24 February 2015

police sources say.

The Central Hotel in the heart of Mogadishu was hit by two car bomb explosions, followed by heavy gunfire after attackers stormed into the building, police officers said.

Al Jazeera has learned that the deputy mayor of Mogadishu, as well as two members of parliament were killed.A government spokesman told Al Jazeera that contrary to earlier reports, the deputy prime minister was unhurt. Al-Shabab claimed responsibility for the raid in a phone call to Al Jazeera."[99]

In February 2015 *the Wall Street Journal* reported that at least 10 people were killed, including politicians. *The Wall Street Journal* stated that the attack is a reminder that al-Shabaab is able to move freely in the city and target high-level officials,

"Militants assaulted a hotel popular with government officials in Somalia's capital of Mogadishu on Friday, blasting their way into the compound with car bombs and killing at least 10 people, including top politicians.

Somalia's al-Shabaab militants claimed responsibility for the attack, the latest reminder that al-Shabaab is able to move freely in the highly fortified city and target even high-level officials. As the government seizes more territory from al-Shabaab in the countryside, it has struggled to translate those gains into improved security and stability".[100]

The attack was also condemned by the *African Union*,[101] *UN Secretary General Ban Ki-Moon* in a statement released by his spokesperson,[102] and *the Special Representative of the UN Secretary-General for Somalia* (SRSG),

"The Special Representative of the UN Secretary-General for Somalia (SRSG), Nicholas Kay, condemns, in the strongest terms, today's attack on the Central Hotel in Mogadishu that resulted in the death and injury of dozens of people, including senior members of the Federal Government of Somalia. Al-Shabaab has claimed responsibility for the attack.

"I condemn today's appalling attack against innocent civilians and dedicated government officials, many of whom were gathered for Friday prayers," said SRSG Kay.

"Such an indiscriminate attack against the Somali people is a cruel and despicable crime intended to rob Somalis of their hope for a better future," SRSG Kay added. "We

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99 Al Jazeera, Al-Shabab stages deadly attack on Somalia luxury hotel, 21 February 2015, http://www.aljazeera.com/news/2015/02/deaths-attack-luxury-hotel-somalia-capital-mogadishu-150220103959237.html, accessed 24 February 2015

100 The Wall Street Journal, Militants Attack Hotel in Somali Capital, Killing At Least 10, 20 February 2015, http://www.wsj.com/articles/explosions-at-hotel-in-somali-capital-1424434179, accessed 24 February 2015

101 Africa Union, Communique: 487th Peace and Security Council of the African Union meeting on the situation in Somalia, 20 February 2015, http://www.peaceau.org/en/article/communique-487th-peace-and-security-council-of-the-african-union-meeting-on-the-situation-in-somalia, accessed 2 February 2015

102 United Nations, Secretary General Ban Ki-moon, Statement: Statement Attributable to the Spokesman for the Secretary-General on the Attack on the Central Hotel in Mogadishu, 20 February 2015, http://www.un.org/sg/statements/index.asp?nid=8413, accessed 24 February 2015

> remain resolute in our support for the Somali people. Despite such inhuman atrocities, Somalis are successfully rebuilding their government institutions and security forces after more than two decades of state failure and conflict. The United Nations in Somalia will continue to work to help Somalis realise their hopes and aspirations for a peaceful and stable future.""[103]

In January 2015, the *BBC* reported that "Since the Islamist Al-Shabab group lost control of the capital in 2011; security has improved in the city - although its fighters still stage suicide attacks."[104]

In November 2014 the *UN Office for the Coordination of Humanitarian Affairs* (UNOCHA) reported that more than 5,000 weapon-related injuries have been treated in nine hospitals in Mogadishu in since January 2014,

> "Since January 2014, more than 5,000 weapon-related injuries have been treated in nine hospitals in Mogadishu, Kismayo, Doolow, Mudug, and Baidoa. In October, 619 weapon-related injuries were reported at the facilities; a 13 per cent increase compared to the previous month
>
> Following a number of incidences of explosions reported in Mogadishu, there was a 23 per cent increase in civilian injuries. In total, more than 500 casualties were reported in Mogadishu and treated at the four major WHO supported hospitals during October."[105]

In January 2015 the *BBC* reported that a car bomb exploded, killing three people,

> "A car bomb has exploded in the Somali capital outside the gates of a hotel where Turkish delegates were preparing for the visit of their president.
>
> Three people were killed in the attack, including two security officers and a hotel employee, police told the BBC."

In January 2015 *Agence France-Presse* reported that Al –Shabaab carried out a suicide car bomb attack near the international airport in Mogadishu,

> "A huge suicide car bomb blast shook Somalia's capital Mogadishu on Sunday near the heavily-fortified international airport, killing four people, officials said.
>
> A police official said the bomber rammed an explosives-laden vehicle into another car, setting off a huge blast that was heard across the coastal city.
>
> A military spokesman for Somalia's Al-Qaeda-affiliated Shebab, Sheikh Abdul Aziz Abu

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103 United Nations Assistance Mission in Somalia, UN Special Representative for Somalia condemns attack on Central Hotel in Mogadishu, 20 February 2015, https://unsom.unmissions.org/Default.aspx?tabid=6254&ctl=Details&mid=9770&ItemID=35657&language=en-US, accessed 24 February 2015

104 BBC, Somali car bomb explodes outside Mogadishu hotel, 22 January 2015, http://www.bbc.com/news/world-africa-30935867, accessed 29 January 2015

105 UN Office for the Coordination of Humanitarian Affairs, Humanitarian Bulletin: Somalia, October 2014, issued 24 November 2014, http://reliefweb.int/sites/reliefweb.int/files/resources/OCHA%20Somalia%20Humanitarian%20Bulletin%20October%202014.pdf, accessed 29 January 2015

Musab, confirmed that the militants had carried out the attack."[106]

In January 2015 *Security Council Report*, an independent not-for-profit organisation that provides information about the activities of the UN Security Council reported that the in December 2014 Al-Shabaab carried out an attack on a UN convoy in Mogadishu,

> "On 3 December, Al-Shabaab attacked a UN convoy in Mogadishu, which resulted in several deaths among people nearby."[107]

In December 2014 the *UN Security Council* released a statement condemning the attacks,

> "The members of the Security Council are outraged by today's terrorist attack in Mogadishu, which has caused numerous deaths and injuries and damaged a United Nations convoy, for which Al-Shabaab has claimed responsibility. The members of the Security Council condemned the attack in the strongest terms."[108]

In May 2014 the *BBC* reported that Al Shabaab attacked the Somali parliament in Mogadishu, leaving at least 10 people dead,

> "Islamist militants from the Al-Shabab movement have attacked the Somali parliament in Mogadishu, leaving at least 10 people dead."[109]

In May 2014 the *BBC* reported that in February, Al-Shabab militants attacked the presidential palace in Mogadishu, leaving at least 16 people dead.[110]

In an interview conducted with CORI in February 2015, *Mohammed Ali Farah*, the CEO and Founder of Mogadishu-based NGO the Somali Disability Empowerment Network (SODEN)[111] reported that while security has improved since the transitional government took over, Al Shabaab continue terrorist activities such as suicide bombing,

> "The security in Mogadishu has improved since the transitional government took over, however Al Shabaab continues to carry out terrorism activities via suicide bombing. Every explosion results in more civilians becoming disabled. In addition, there is a high level of gender-based violence against poor refugee women in the camps. Disabled young women are more vulnerable to such attacks. A recent report by Human Rights Watch revealed that the African Union Mission in Somalia (AMISON) troops have committed crimes of sexual violence such as rape against young vulnerable girls in

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106 Agence France-Presse, Four killed in suicide car bombing in Somali capital, 4 January 2015, http://www.arabnews.com/news/684351, accessed 29 January 2015

107 Security Council Report, Somalia: January 2015 Monthly Forecast, January 2015, http://www.securitycouncilreport.org/monthly-forecast/2015-01/somalia_17.php?print=true, accessed 29 January 2015

108 UN Security Council, Security Council Press Statement on Terrorist Attack in Mogadishu, 3 December 2014, SC/11681-AFR/3034, http://www.un.org/press/en/2014/sc11681.doc.htm, accessed 29 January 2015

109 BBC, Somalia parliament attacked by al-Shabab in Mogadishu, 24 May 2014, http://www.bbc.com/news/world-africa-27554498, accessed 29 January 2015

110 BBC, Somalia parliament attacked by al-Shabab in Mogadishu, 24 May 2014, , http://www.bbc.com/news/world-africa-27554498, accessed 29 January 2015

111 The Somalia Disability Empowerment Network (SODEN) is a Mogadishu-based non-profit, non-governmental organization that assists the mobility challenged individuals to build better lives through social integration, skill development, and useful representation in all aspects of life. For further information see: http://www.somalidisability.org/about-us/

Mogadishu."[112]

Reporting on the human rights situation in 2013, in February 2014 the *US Department of State* (USDOS) reported that Al-Shabaab continued to kill civilians and often used suicide attacks, mortar attacks and improvised explosive devices. *USDOS* reported that Al-Shabaab carried out a number of attacks in Mogadishu,

> "Al-Shabaab continued to kill civilians, including politically motivated killings that targeted civilians affiliated with the government, and attacks on humanitarians, NGO employees, the UN, and diplomatic missions. They often used suicide attacks, mortar attacks, and improvised explosive devices. Al-Shabaab also killed prominent peace activists, community leaders, clan elders, and their family members for their roles in peace building, and beheaded persons it accused of spying for and collaborating with Somali national forces and affiliated militias.
>
> Al-Shabaab attacks included, but were not limited to, an April 14 attack on the Mogadishu Supreme Court complex that killed at least 34 persons and injured 58 more, a June 19 attack on the UN compound in Mogadishu that killed 22 persons, a September 7 attack on the Village Restaurant in Mogadishu that killed at least 18 civilians, and a November 8 car bomb attack at a hotel in Mogadishu that killed 10 persons. During the April 14 incident, nine al-Shabaab members attacked the Supreme Court complex. A separate car bomb struck a Turkish aid group responding to the court attack."[113]

In January 2015 *Human Rights Watch* reported that tens of thousands of displaced people remain in dire conditions in Mogadishu and are subjected to evictions, sexual violence, and clan-based discrimination,

> "Tens of thousands of displaced people remain in dire conditions in Mogadishu and are subjected to evictions, sexual violence, and clan-based discrimination at the hands of government forces, allied militia, and private individuals including camp managers. Government plans to relocate displaced communities to the outskirts of Mogadishu stalled, but forced evictions by private individuals and the authorities increased in July and August."[114]

In February 2014 *Human Rights Watch* reported that the women and girls of Mogadishu's displaced population suffer sexual abuse by armed men,

> "Maryam, a 37-year-old single mother, said that the night before her interview with Human Rights Watch, she could hear a woman being attacked at the camp for internally displaced persons (IDPs) where she lives with her six children in Somalia's capital, Mogadishu. The episode brought back the trauma of her own experiences of sexual assault. Maryam said that rape had become even more pervasive at the camp

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[112] CORI Interview with Mohamed Ali Farah (SODEN) conducted via written correspondence in response to written questions. 21 February 2015

[113] United States Department of State, 2013 Country Reports on Human Rights Practices - Somalia, 27 February 2014, http://www.state.gov/j/drl/rls/hrrpt/2013/af/220158.htm, accessed 1 March 2015

[114] Human Rights Watch, World Report 2015 - Somalia, 29 January 2015, https://www.hrw.org/world-report/2015/country-chapters/somalia, accessed 03 February 2015

> in Wadajir district of the capital and the situation for women had deteriorated since she herself was raped there in 2012. "In our camp when we saw someone, we used to say, 'Hi, how are you.' Now when we see each other we ask, 'Were you raped today?'"[115]

In February 2014 *Human Rights Watch* reported that the insecurity of IDP camps poses among the gravest risks of sexual violence for women and girls in Mogadishu,

> "The insecurity of IDP camps, particularly at night, poses among the gravest risks of sexual violence for women and girls in Mogadishu. Many of the women interviewed by Human Rights Watch were living in shelters made of cloth and plastic sheeting, which are easily accessible to an intruder. Others had been living in temporary shelters that are structurally flimsy and constructed from wood, cardboard and cloth, often without doors. In two incidents reported to Human Rights Watch, displaced women who lived in more solidly built houses were attacked outside of their homes while carrying out daily chores. Some of the IDP settlements are physically isolated, situated on the outskirts of the city. While others were in the center of Mogadishu and sometimes on main thoroughfares, they had no form of protection."[116]

In February 2014 *Human Rights Watch* documented twenty-one incidents of sexual exploitation and abuse by African Union Mission in Somalia (AMISOM) soldiers,

> "Human Rights Watch documented twenty-one incidents of sexual exploitation and abuse by AMISOM soldiers occurring primarily on two AMISOM bases in Mogadishu: the AMISOM base camp largely controlled by the UPDF and the base camp of the BNDF contingent at the compound of the Somali national university."[117]

In November 2014 *Amnesty International* reported that rape and other forms of sexual violence are continuing unabated, and such incidents are pervasive in IDP camps,

> "Rape and other forms of sexual violence are continuing unabated. Conditions in settlements of internally displaced persons (IDPs) remain extremely poor where such incidents are pervasive, including allegations of rape by members of government security forces and AMISOM. Amnesty International is continuing to document rape and other forms of sexual violence against women and girls on key transport routes in Somalia. Perpetrators operate in a situation of ongoing lawlessness, allowing state and non-state actors to behave with impunity."[118]

In October 2014 the *Foreign Affairs Council of the European Union* expressed concern at reports of continuing reports of humanitarian law and human rights violations,

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[115] Human Rights Watch, "Here, Rape is Normal" - A Five-Point Plan to Curtail Sexual Violence in Somalia, 13 February 2014, https://www.hrw.org/report/2014/02/13/here-rape-normal/five-point-plan-curtail-sexual-violence-somalia, accessed 29 January 2015

[116] Human Rights Watch, "Here, Rape is Normal" - A Five-Point Plan to Curtail Sexual Violence in Somalia, 13 February 2014, https://www.hrw.org/report/2014/02/13/here-rape-normal/five-point-plan-curtail-sexual-violence-somalia, accessed 29 January 2015

[117] Human Rights Watch, "Here, Rape is Normal" - A Five-Point Plan to Curtail Sexual Violence in Somalia, 13 February 2014, https://www.hrw.org/report/2014/02/13/here-rape-normal/five-point-plan-curtail-sexual-violence-somalia, accessed 29 January 2015

[118] Amnesty International, Somalia: EU must keep focus on human rights for Somalia's future, 18 November 2014, AFR 52/007/2014, https://www.amnesty.org/en/documents/afr52/007/2014/en/, accessed 26 February 2015

> "The EU remains concerned by continuing reports of humanitarian law and human rights violations, including extrajudicial killings, violence against women and children, recruitment and use of children, attacks against journalists and arbitrary detentions. The fight against impunity for these crimes is essential."[119]

In October 2014 the *Foreign Affairs Council of the European Union* expressed concern at the allegations of sexual exploitation and abuse by African Union forces in Somalia,

> "The EU is, however, concerned by allegations of sexual exploitation and abuse by African Union Forces in Somalia and firmly condemns all crimes of sexual violence in situations of conflict, of whatever nature. It welcomes the commitment of the African Union and the troop contributing countries to investigate these allegations and ensure accountability of their troops. It also underlines the need for AMISOM troops to receive appropriate information and pre-deployment training in relation to human rights principles, including gender equality and sexual violence and be properly informed of the sanctions in place should any abuse be perpetrated."[120]

In February 2014 the *US Department of State* (USDOS) reported that gender-based violence remained a problem and sexual violence was committed against women in IDP camps around Mogadishu,

> "Gender-based violence, including sexual assault and gang rape of female IDPs, remained a problem. Many of the victims were children. Perpetrators included security forces, and attackers were usually armed. Women and children living in IDP settlements in Bosaaso and Galkayo, Puntland State, Hargeisa, Somaliland, and along the Afgoye corridor reported a large number of alleged rapes to UN implementing partners. Government forces and allied militias committed sexual violence, including rape, against women in and around Mogadishu IDP camps."[121]

ii. Differentiated impact (on elderly persons and persons with disabilities)

In an interview conducted with CORI in February 2015, *Mohammed Ali Farah*, the CEO and Founder of Mogadishu-based NGO the Somali Disability Empowerment Network (SODEN) reported that people with a disability are at higher risk with their limited ability and accessibility to transportation,

> "Mogadishu has been a war torn country for over two decades, and over the years the people that have suffered most have been the elderly, persons with a disability, children and women. Generally people with disability are at a higher risk because of their limited physical ability and accessibility to transportation, and because of this they have made up the majority of victims. Social stigma and discrimination against people with a disability exists, however the elderly are respected in society."[122]

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119 Foreign Affairs Council of the European Union, Council conclusions on Somalia Foreign Affairs Council meeting Luxembourg, 20 October 2014, http://www.consilium.europa.eu/en/workarea/downloadasset.aspx?id=40802189407, accessed 26 February 2015

120 Foreign Affairs Council of the European Union, Council conclusions on Somalia Foreign Affairs Council meeting Luxembourg, 20 October 2014 http://www.consilium.europa.eu/en/workarea/downloadasset.aspx?id=40802189407, accessed 26 February 2015

121 United States Department of State, 2013 Country Reports on Human Rights Practices - Somalia, 27 February 2014, http://www.state.gov/j/drl/rls/hrrpt/2013/af/220158.htm, accessed 1 March 2015

122 CORI Interview with Mohamed Ali Farah (SODEN), conducted via written correspondence in response to written questions. 21 February 2015

In February 2014 the *US Department of State* (USDOS) stated "Without a public health infrastructure, there were few specialized institutions to provide care or education for the mentally ill. It was common for such persons to be chained to a tree or restrained within their homes."[123]

c. Socio-economic situation

i. General situation (economic climate, food security, etc.)

In February 2015 *Amnesty International* stated "Somalia's humanitarian situation deteriorated rapidly due to the ongoing conflict, drought and reduced humanitarian access with conditions as bad or worse than before the 2011 famine. As of September, about 42% of the population were in crisis or needed assistance."[124]

In January 2015 the *Food Security and Nutrition Analysis Unit*, an organisation initiated by the World Food Programme OFDA to undertake food security and information analysis in Somalia reported that over 730,000 people across Somalia face acute food insecurity despite improvements in some areas.[125]

In December 2014 the *UN Office for the Coordination for Humanitarian Affairs* (UNOCHA) reported that there has been a serious deterioration of the humanitarian situation in Somalia,

> "After two years of incremental improvements, a mix of drought, insecurity, surging food prices, increasing malnutrition, access constraints and funding shortages have led to a serious deterioration of the humanitarian situation in Somalia."[126]

UNOCHA reported that over 1 million people in Somalia are unable to meet their basic food requirements, about 3.2 million women and men in Somalia need emergency health services, while 2.8 million women and men require improved access to water, sanitation and hygiene.[127]

In February 2015 *Oxfam* reported that at the end of 2014 there were 3 million Somalis in need of urgent humanitarian assistance including 1.1 million displaced Somalis. *Oxfam* predicted that acute food insecurity is expected to persist,

> "At the end of December 2014, there were over 3 million Somalis in need of urgent humanitarian assistance with one million people estimated to be unable to meet their minimum food requirements – this is a 20 percent increase compared to the same time

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123 United States Department of State, 2013 Country Reports on Human Rights Practices - Somalia, 27 February 2014, http://www.state.gov/j/drl/rls/hrrpt/2013/af/220158.htm, accessed 29 January 2015

124 Amnesty International, Amnesty International Report 2014/15 - Somalia, 25 February 2015, https://www.amnesty.org/en/countries/africa/somalia/report-somalia/, accessed 28 February 2015

125 Food Security and Nutrition Analysis Unit – Somalia, FSNAU-FEWS NET Technical Release, 29 January 2015, http://www.fsnau.org/in-focus/fsnau-fews-net-technical-release-january-29-2015, accessed 26 February 2015

126 UN Office for the Coordination of Humanitarian Affairs (UNOCHA), 2015 Humanitarian Needs Overview: Somalia, November 2014, 04 December 2014, https://docs.unocha.org/sites/dms/Somalia/Somalia%202015%20Humanitarian%20Needs%20Overview%20-%20FINAL.pdf, accessed 29 January 2015

127 UN Office for the Coordination of Humanitarian Affairs (UNOCHA), 2015 Humanitarian Needs Overview: Somalia, November 2014, 04 December 2014, https://docs.unocha.org/sites/dms/Somalia/Somalia%202015%20Humanitarian%20Needs%20Overview%20-%20FINAL.pdf, accessed 29 January 2015

last year. Of these, there are some 1.1 million displaced Somalis who continue to live in substandard conditions in overcrowded settlements. Oxfam through its partners have supported over one million people in Somalia during 2014-15. Our work includes providing water, sanitation and promotion of public health for people displaced in Kismayo in the South. We continue to communicate public health information to 90,000 people via mobile phone, especially against polio and cholera. Acute food insecurity is expected to persist in most parts of the country, with displaced people remaining the most vulnerable. Oxfam will be looking to secure much needed funds for further lifesaving interventions."[128]

In July 2014 the *African Commission on Human and Peoples' Rights* adopted a Resolution on the Food Crisis in Somalia,

> "Concerned by the lack of rapid and appropriate response to this warning at a time when there are already signs of a drought and increase in food prices;
>
> Further concerned by the humanitarian situation of thousands of people, in particular the situation of malnutrition among children in camps for displaced persons;
>
> The Commission:
>
> Welcomes the measures taken and the efforts of United Nations specialized agencies and some NGOs to prevent and combat famine in several regions of Somalia, in particular areas affected by the activities of armed groups;
>
> Urges the Somali authorities to take the necessary measures to address the crisis and achieve self-sufficiency and food security;
>
> Further urges the warring parties to open humanitarian corridors to enable the unimpeded delivery of humanitarian assistance to the civilian population;
>
> Calls on the international community and all African Union Member States to take the necessary measures to assist people affected by famine and those at risk."

In an interview conducted with CORI in February 2015, *Mohammed Ali Farah*, the CEO and Founder of Mogadishu-based NGO the Somali Disability Empowerment Network (SODEN) reported that "There are often famines in Somalia and as Mogadishu is the capital and contains the majority of the population there is a high level of malnutrition and food insecurity."[129]

In October 2014 the *Foreign Affairs Council of the European Union* expressed concern at the deteriorating humanitarian crisis in Somalia,

> "The EU expresses deep concern at the deteriorating humanitarian crisis in Somalia due to drought, continued conflict, restricted flow of commercial goods into areas

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[128] Oxfam, Emergencies Updates 13 January to 5 February 2015, available from http://reliefweb.int/report/world/emergencies-updates-13-january-5-february-2015, accessed 26 February 2015

[129] CORI Interview with Mohamed Ali Farah (SODEN), conducted via written correspondence in response to written questions. 21 February 2015

affected by military operations and surging food prices and urges all parties to allow safe, timely and unhindered humanitarian access to all areas by humanitarian agencies."[130]

ii. Differentiated impact (including impact of food shortages)

In February 2014 the *US Department of State* reported that Somalia did not enforce the constitutional provision on equal rights for those with disabilities,

> "The provisional federal constitution provides equal rights before the law for those with disabilities and prohibits the state from discriminating against those with disabilities. This provision was not enforced. The provisional federal constitution does not specific whether this provision applies specifically to physical, intellectual, mental, or sensory disabilities. It does not discuss discrimination by nongovernment actors, including in relation to employment, education, air travel and transportation, or healthcare. No laws provide for access to buildings, information, and communications for persons with disabilities."[131]

In December 2014 the *Institute of Education for Disabled People in Somalia* (IEDP) reported that food distribution for people with disabilities served nearly 3,000 people in the Banadir region.[132]

In February 2015 *World Vision,* a Christian relief and development organization, reported on the case of a woman reportedly 108 years old and her mentally challenged son,

> "War has no mercy even to the elderly.
>
> Halimo Mohammed Cabdi who is said to be about 108 years has been on the run for a long time due to the long drawn conflict in Somalia.
>
> In 2011 she found herself in Kulmiye displacement camp in Baidoa – mainly because the drought ravaged all her family assets in addition to the risk of the war between African Union troops and Al Shabab terrorist group.
>
> She moved from Bakool region to Baidoa and found a devastating situation – she had no home and not even the privacy of going to the toilet.
>
> Life was unbearable for her and her only son who is mentally challenged. The displacement was in a bush - no sanitation facility and basic services like clean water were rampant. Open defecation was the norm.
>
> Her community's traditional copy mechanism especially the reliance on social support networks and credit systems were stretched beyond reasonable limits.

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130 Foreign Affairs Council of the European Union, Council conclusions on Somalia Foreign Affairs Council meeting Luxembourg, 20 October 2014, http://www.consilium.europa.eu/en/workarea/downloadasset.aspx?id=40802189407, accessed 26 February 2015

131 United States Department of State, 2013 Country Reports on Human Rights Practices - Somalia, 27 February 2014, http://www.state.gov/j/drl/rls/hrrpt/2013/af/220158.htm, accessed 29 January 2015

132 Institute of Education for Disabled People in Somalia, Food distribution for the disabled people in Mogadishu, 16 December 2014, http://iedsom.org/2014/12/16/food-distribution-for-the-disabled-people-in-mogadsihu/, accessed 24 February 2015

The displaced constructed traditional pit latrine made up of sticks, torn plastic sheet, nylon rope and old clothes. The top cover was two poles in the two sides of the pit, sticks and cartons. This kind of pit latrine was very dangerous especially for children and the disabled. Without supervision, children and disabled could easily fall down into the latrine pit. This also gave no privacy to people like Halima who had to be helped in to the toilet.

But now Halima's life has changed just a little better. At least she says she has a dignified life even though she still lives in poor displacement camp. Now she has a proper toilet and can do help herself in privacy thanks to the intervention of World Vision and its local partner Golweyne Relief and Rehabilitation (GRRN) who used OFDA funding to make the lives Halima and 21000 displaced people in Baidoa a little bearable.

"Thanks to God, we got our privacy and our dignity back," said Halima.

The intervention included rehabilitation of shallow wells, building latrines in the camps, distribution of dignity kits, water storage cans and soap and education around proper hygiene.

These efforts have recorded a significant improvement in sanitation and decrease in diarrhea and dysentery.

An interesting outcome of the project was the effect it had on the female population taking the lead chore of the household and promotes hygiene promotion activities. This had a number of repercussions in that it gave them the opportunity to engage other communal activities.

Halimo proudly showed us their new latrine. She says that the assistance that her community is receiving is improving their living conditions, making life in the camps a little bearable.

Her neighbour and member of the IDP camp said in regards to access to latrine;

"Before we received any help my children used to the nearby bushes anytime of the day. Since I needed privacy, I helped myself only at dawn or at dusk. It was quite frustrating," one of Halimo's neighbors told us. "We thank those who build these latrines for us. Our privacy is preserved, our dignity is restored and our security is improved because we no longer have to go to the bushes.""[133]

In an interview conducted with CORI in February 2015, *Mohammed Ali Farah*, the CEO and Founder of Mogadishu-based NGO the Somali Disability Empowerment Network (SODEN) reported that while there is not much of a differentiated impact with regards to famine, the main difference is the capability of movement. *Mohammed Ali Farah* stated that people with disabilities suffer from discrimination, social exclusion and harassment,

[133] World Vision Somalia, Baidoa: Dignity restored for the displaced even amidst war, 10 February 2015, http://www.wvi.org/somalia/article/baidoa-dignity-restored-displaced-even-amidst-war, accessed 26 February 2015

> "When it comes to famine and food insecurity there is no significant differentiation between the situation of elderly and that of the disabled. Both the elderly and the disabled face the challenge of food insecurity however the disabled have the added challenge of a lack of capability of movement. For example if there is a queue for food distribution, disabled persons may be bullied and pushed out of line, or they may be robbed. Occasionally, some NGOs will collect food under a disability project but in reality it never reaches them. Persons with a disability suffer from discrimination, social exclusion and direct harassment."[134]

In an interview conducted with CORI in February 2015, *Abdullahi Hassan Hussein*, the Chairperson of the Mogadishu-based Horn of Africa Disability Forum (HADF) reported that the socio-economic situation of people with disabilities (PWD) is very difficult; more than 80% of PWD are unemployed. *Abdullahi Hassan Hussein* further stated that most elderly PWD live in abject poverty and live in IDP camps,

> "The socio-economic situation of persons with disabilities is very challenging; more than 80% of the disabled are unemployed.
>
> Most elderly persons with disabilities live in abject poverty as there is no pension fund or government subsidy available to care for elderly disabled persons. Many of them live in the IDP camps where they face great humanitarian problems and are left alone to beg in the streets and markets where they there is a risk of conflict and violence."[135]

2. Access to services for elderly persons and persons with disabilities

a. Availability, accessibility[136] and quality of basic and specialized services

i. Health care, including specialized medical services

In October 2014 the *Global AgeWatch Index* reported there are 0.5 million people over 60 in Somalia, and 4.5% of population is over 60.[137]

Reporting on the human rights situation in 2013, in February 2014 the *US Department of State* (USDOS) reported that legal provisions that provide rights for people with disabilities were not enforced,

> "The provisional federal constitution provides equal rights before the law for those with

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134 CORI Interview with Mohamed Ali Farah (SODEN), conducted via written correspondence in response to written questions. 21 February 2015

135 CORI Interview with Abdullahi Hassan Hussein (HADF), conducted via written correspondence in response to written questions. 24 February 2015

136 For this compilation accessibility and access should be viewed in the context of equality and non-discrimination for elderly persons and persons with disabilities, as well as any obstacles and barriers that impede access to services for persons with disabilities. See also Article 9 of the Convention on the Rights of Persons with Disabilities.

137 Global AgeWatch Index 2014, AgeWatch Report Card, Somalia, http://www.helpage.org/global-agewatch/population-ageing-data/country-ageing-data/?country=Somalia, accessed 02 March 2015

disabilities and prohibits the state from discriminating against those with disabilities. This provision was not enforced. The provisional federal constitution does not specific whether this provision applies specifically to physical, intellectual, mental, or sensory disabilities. It does not discuss discrimination by nongovernment actors, including in relation to employment, education, air travel and transportation, or healthcare. No laws provide for access to buildings, information, and communications for persons with disabilities."[138]

In December 2014 the *UN Office for the Coordination for Humanitarian Affairs* (UNOCHA) reported that the coverage and quality of basic social services is extremely low,

> "The coverage and quality of basic social services in Somalia is extremely low, mainly due to the absence or low capacity of existing government structures. The healthcare system in Somalia remains weak, poorly resourced and inequitably distributed. Health expenditure remains very low and there is a critical shortage of capacity for the health workforce. Immunization for measles is low at only 30 per cent coverage countrywide. Only 3 per cent of births are registered and the infant mortality rate is 53 per 1,000 live births."[139]

In February 2015 the *Global Polio Eradication Initiative*[140] (GPEI) reported that Somalia marked six months without a case of polio in February 2015. GPEI reported that the outbreak in April 2013 paralysed 199 children against the backdrop of *inter alia* "barely functioning health systems",

> "Six months have passed since the most recent case of polio was reported in the Horn of Africa. The outbreak, which was first reported in April 2013, paralysed 199 children over 2013 and 2014 against the backdrop of insecurity, barely functioning health systems, large population movements and very low levels of routine immunization spanning over the last 20 years."[141]

In an interview conducted with CORI in February 2015, *Mohammed Ali Farah*, the CEO and Founder of Mogadishu-based NGO the Somali Disability Empowerment Network (SODEN) stated that there is no specific health access or medical services for elderly people or people with disabilities,

> "There is no specific medical service or access to medical services policy for neither the elderly, nor the disabled. The majority of health services in Mogadishu are private and treatments require payment in advance. As persons with a disability are often poor and cannot afford the fees, overall they have a very poor quality of health service

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138 United States Department of State, 2013 Country Reports on Human Rights Practices - Somalia, 27 February 2014, http://www.state.gov/j/drl/rls/hrrpt/2013/af/220158.htm, accessed 01 March 2015

139 UN Office for the Coordination of Humanitarian Affairs (UNOCHA), 2015 Humanitarian Needs Overview: Somalia, November 2014, 4 December 2014, https://docs.unocha.org/sites/dms/Somalia/Somalia%202015%20Humanitarian%20Needs%20Overview%20-%20FINAL.pdf, accessed 29 January 2015

140 The Global Polio Eradication Initiative is a public-private partnership led by national governments and spearheaded by the World Health Organization (WHO), Rotary International, the US Centers for Disease Control and Prevention (CDC), and the United Nations Children's Fund (UNICEF). Its goal is to eradicate polio worldwide. For further information see: http://www.polioeradication.org/AboutUs.aspx#sthash.d3CorvkR.dpuf

141 Global Polio Eradication Initiative, Somalia marks six months without a case of polio, 24 February 2015, http://www.polioeradication.org/mediaroom/newsstories/Somalia-marks-six-months-without-a-case-of-polio/tabid/526/news/1208/Default.aspx, accessed 24 February 2015

available to them."[142]

In an interview conducted with CORI in February 2015, *Abdullahi Hassan Hussein*, the Chairperson of the Mogadishu-based Horn of Africa Disability Forum (HADF) stated "There are no free public medical services operating in the country to care for elderly people and disabled persons in general."[143]

In an interview conducted with CORI in February 2015, *Abdullahi Hussein Osman*, the Chairperson of the Institute for Education of Disabled People in Somalia (IEDP)[144] reported that "people with disabilities face many barriers to good health. Studies shows that individuals with disabilities are more likely than people without disabilities to lack access to health services. In my opinion in Somalia people with disabilities do not have access to health care services."[145]

ii. Education

In December 2014 the *UN Office for the Coordination for Humanitarian Affairs* (UNOCHA) stated that "In terms of education, south central Somalia has no functioning national system of education."[146]

In February 2014 the *US Department of State* (USDOS) reported "Without a public health infrastructure, there were few specialized institutions to provide care or education for the mentally ill. It was common for such persons to be chained to a tree or restrained within their homes."[147]

In an interview conducted with CORI in February 2015, *Mohammed Ali Farah*, the CEO and Founder of Mogadishu-based NGO the Somali Disability Empowerment Network (SODEN) stated that people with disabilities in Mogadishu do not have access to public or private schools and that elderly people may have access but might face age discrimination,

> "While education is the most important aspect in society, unfortunately disabled individuals in Mogadishu do not have access to public or private schools. Disabled children grow up without education. There is no school or educational centres in Mogadishu that have a disability access system nor is there any educational facility that has specific classes for persons with disabilities. Elderly people may have access to education but can face age discrimination."[148]

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142 CORI Interview with Mohamed Ali Farah (SODEN), conducted via written correspondence in response to written questions. 21 February 2015

143 CORI Interview with Abdullahi Hassan Hussein (HADF), conducted via written correspondence in response to written questions. 24 February 2015

144 Institute of Education for Disabled People in Somalia is an indigenous international organization based in Nairobi Kenya with sub-offices in Banadir, Lower Shabelle and Galgadud region, Somalia. The overall goal of IEDP is to address issues, concerns, needs and social-economic welfare of the disabled persons in the region. For further information see: http://iedsom.org/about-us/

145 CORI Interview with Abdullahi Hussein Osman (IEDP) conducted via written correspondence in response to written questions. 23 February 2015

146 UN Office for the Coordination of Humanitarian Affairs (UNOCHA), 2015 Humanitarian Needs Overview: Somalia, November 2014, 4 December 2014, https://docs.unocha.org/sites/dms/Somalia/Somalia%202015%20Humanitarian%20Needs%20Overview%20-%20FINAL.pdf, accessed 29 January 2015

147 United States Department of State, 2013 Country Reports on Human Rights Practices - Somalia, 27 February 2014, http://www.state.gov/j/drl/rls/hrrpt/2013/af/220158.htm, accessed 1 March 2015

148 CORI Interview with Mohamed Ali Farah (SODEN), conducted via written correspondence in response to written questions. 21 February 2015

In an interview conducted with CORI in February 2015, *Abdullahi Hassan Hussein*, the Chairperson of the Mogadishu-based Horn of Africa Disability Forum (HADF) stated that people with disabilities face several challenges in accessing education,

> "Education is very hard to access for people with disabilities; there are no public schools, all schools are private and require fees."[149]

In an interview conducted with CORI in February 2015, *Abdullahi Hussein Osman*, the Chairperson of the Institute for Education of Disabled People in Somalia (IEDP) reported,

> "In Somalia most mainstream schools exclude children with disabilities. As a result most disabled children miss out on an education altogether. For those that do get an education, the majority have to pay high fees."[150]

iii. Water and sanitation

In February 2015 *Oxfam* reported that in previous years there were a number of challenges relating to the lack of water in IDP camps, including conflicts over fetching water were a major threat for displaced people,

> "Zahra Abdi, a mother of five children, has been living in Horseed Internally Displaced Persons' (IDP) settlement of Hodan district in Mogadishu, Somalia, for the last three years.
>
> "In the beginning here, I remember facing a number of challenges. First there was lack of water and in addition, there was no water source near the camp. Every morning I would trek a distance of about 1 kilometre to buy water and I could only afford to buy one or two jerry-cans of water per day, an amount which was far below my household water requirements," describes Zahra.
>
> Life was very difficult. People used to fetch contaminated water from a shallow well 1 Kilometre away from their makeshift shelters. Every woman and child in the camp had to do so. They used to pay 1,000 Somalia Shillings (0.05 USD) per 20 litre jerry-can of poorly handled water.
>
> On the other hand, conflicts over fetching water were a major threat for displaced people. Skirmishes, which were sometimes violent ones, were usually over which group of IDPs would be first in line to fetch water and which group will be last."[151]

In February 2015 *Oxfam* further reported that as a result of a water and sanitation project developed by the Humanitarian Initiative Just Relief Aid (HIJRA), an African humanitarian organization, and Oxfam, clean water is now available in IDP camps,

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149 CORI Interview with Abdullahi Hassan Hussein (HADF), conducted via written correspondence in response to written questions. 24 February 2015

150 CORI Interview with Abdullahi Hussein Osman (IEDP) conducted via written correspondence in response to written questions. 23 February 2015

151 Oxfam, How clean water has changed the lives of displaced families in Somalia, 16 February 2015, https://www.oxfam.org/en/somalia/how-clean-water-has-changed-lives-displaced-families-somalia, accessed 26 February 2015

> "As a result of a water and sanitation project developed by HIJRA in partnership with Oxfam, clean water is now available in the IDP camps. This means a reduced risk of illnesses and less time away from work for the adults and from school for the children.
>
> The difference made by this project to people's lives is profound and visible. It saves lives. Clean drinking water allows IDPs to be more secure and frees women to work or care for their children.
>
> "Chlorinated clean drinking water is now accessible near my shelter. Currently, I fetch at least five jerry-cans of water – which is a total of 100 litres of water per day. For me and for my family of five, life has changed. Access to water is no longer difficult. From the savings I made of Somali Shillings 3,000 a day, I started small trade selling food stuffs and vegetable on top of a small table. I view our future with lots of optimism and encouragement,"says Zahra."[152]

In January 2015 *Humanitarian Initiative Just Relief Aid* (HIJRA), an African humanitarian organization reported that it "continues to pump hundreds of thousands of gallons of safe drinking water to those most in need in Jaamacadda zone of Hodan district – Mogadishu."[153]

In January 2015 *HIJRA* further reported it has been supporting water, sanitation and hygiene programmes in Jaamacadda camp,

> "While clean water is important, proper sanitation and hygiene is also an important part of healthy living in the camp. Additional HIJRA support for water, sanitation and hygiene, includes jerry cans to collect water, soap, latrines, and public health promotion activities. There are also sanitary packages provided for the women in Jaamacadda. "Cleanliness is half of the faith," says Ahmed Farah, HIJRA Public Health Promoter."

In an interview conducted with CORI in February 2015, *Mohammed Ali Farah*, the CEO and Founder of Mogadishu-based NGO the Somali Disability Empowerment Network (SODEN) stated,

> "Clean water is not available in every part of Mogadishu. Disabled people who live in the refugee camps face the challenge of a lack of water and because of their limited physical ability they sometimes have to crawl long distances to find water. Elderly people have better access to water as they can travel long distances more easily."[154]

In an interview conducted with CORI in February 2015, *Abdullahi Hassan Hussein*, the Chairperson of the Mogadishu-based Horn of Africa Disability Forum (HADF) stated that "most disabled people are poor and have no running clean water in their homes. It is very difficult for them to fetch water from the water mills in the IDP camp areas."[155]

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[152] Oxfam, How clean water has changed the lives of displaced families in Somalia, 16 February 2015, https://www.oxfam.org/en/somalia/how-clean-water-has-changed-lives-displaced-families-somalia, accessed 26 February 2015

[153] Humanitarian Initiative Just Relief Aid (HIJRA), Impact Of Clean Drinking Water in Jaamacadda IDP settlements – Mogadishu, 29 January 2015, http://www.hijra.or.ke/voices-from-the-field/345-hijra-continues-to-provide-clean-drinking-water-in-jaamacadda-idp-settlements-mogadishu?device=iphone, accessed 26 February 2015

[154] CORI Interview with Mohamed Ali Farah (SODEN), conducted via written correspondence in response to written questions. 21 February 2015

[155] CORI Interview with Abdullahi Hassan Hussein (HADF), conducted via written correspondence in response to written questions. 24

In an interview conducted with CORI in February 2015, *Abdullahi Hussein Osman*, the Chairperson of the Institute for Education of Disabled People in Somalia (IEDP) reported,

> "Disabled people in Somalia do not receive water and sanitation facilities support."[156]

iv. Shelter

In an interview conducted with CORI in February 2015, *Mohammed Ali Farah*, the CEO and Founder of Mogadishu-based NGO the Somali Disability Empowerment Network (SODEN) stated,

> "There are thousands of disabled people without shelter; they mainly sleep on the roads in the public area and the large markets (for example Bakaaro) where they beg for small change during the day. There are also some homeless poor elderly people on the roads of Mogadishu."[157]

In an interview conducted with CORI in February 2015, *Abdullahi Hassan Hussein*, the Chairperson of the Mogadishu-based Horn of Africa Disability Forum (HADF) stated that,

> "Unemployment has forced most disabled people to seek shelter in the IDP camps and in empty national buildings and institutions for the last two decades. In 2014 the government evicted more than 22,000 people from their homes. 731 of these people were disabled."[158]

In an interview conducted with CORI in February 2015, *Abdullahi Hussein Osman*, the Chairperson of the Institute for Education of Disabled People in Somalia (IEDP) stated there is "no shelter in Mogadishu for disability people."[159]

In February 2015 the *Office of the United Nations High Commissioner for Refugees* (UNHCR) reported that forced evictions remain a critical protection concern in Mogadishu. *UNHCR* reported that over 32,500 individuals (the vast majority being IDPs) have been forcibly evicted in Mogadishu,

> "Forced evictions remain a critical protection concern in Mogadishu, but also in other parts of Somalia, predominantly urban areas. From January to December 2014, over 32,500 individuals of whom the vast majorities (over 90%) are IDPs have been forcibly evicted from public and private land and buildings in Mogadishu. Over 17,000 people remain at imminent risk of forced evictions in the capital. Throughout 2014, reports of forced evictions were highest in Mogadishu's Hodan district given its prime location and recently, improved security and accessibility. Dayniile also witnessed forced

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February 2015

156 CORI Interview with Abdullahi Hussein Osman (IEDP) conducted via written correspondence in response to written questions. 23 February 2015

157 CORI Interview with Mohamed Ali Farah (SODEN), conducted via written correspondence in response to written questions. 21 February 2015

158 CORI Interview with Abdullahi Hassan Hussein (HADF), conducted via written correspondence in response to written questions. 24 February 2015

159 CORI Interview with Abdullahi Hussein Osman (IEDP) conducted via written correspondence in response to written questions. 23 February 2015

> evictions mainly as a result of conflict over ownership of land. Albeit on a smaller scale, forced evictions were further reported in Wadajir, Hamar Jajab, Hamar Weyne, Shangaani, Bondheere and Wardhigley districts of Mogadishu. Reports of forced evictions were highest in the month of October and whilst analysis on trends is ongoing, at this stage, facts to justify increased reports of forced eviction in the month of October remain difficult to establish."[160]

In February 2015 *UNHCR* reported that contested ownership of land/building, including public land, remains a major cause of forced evictions. UNHCR reported that IDPs are usually only identified orally of evictions and the majority moved to the outskirts of Mogadishu, or other IDP settlements,

> "Contested ownership of land/building, including public land, remains a major cause of forced evictions. IDPs commonly are only notified orally of evictions. In some cases, no form of notification is provided. The majority of those forcibly evicted moved to the outskirts of Mogadishu, in particular Sarakustra and Tabelaha, where living conditions are deplorable, services are limited and insecurity and human rights violations are commonly reported. Others, especially those with established social links in surrounding areas, sought refuge in nearby IDP settlements, closer to their sources of livelihood."[161]

In February *2015 Amnesty International* also reported that tens of thousands of people were forcibly evicted from government and private property. *Amnesty International* reported many moved to the outskirts of Mogadishu,

> "In Mogadishu, tens of thousands of people were forcibly evicted from government and private property. Many of them moved to the outskirts of Mogadishu, including the Afgooye corridor, where there was little security provision or access to services. There were reports of increases in rape and other forms of sexual violence against women and girls in these areas. An IDP policy framework drafted in April was not adopted."[162]

In February 2015 *UNHCR* identified elderly and people with disabilities as persons with specific needs affected by the forced evictions,

> "Persons with specific needs affected by the forced evictions include single/women headed households, children, elderly and persons with disabilities."[163]

b. Livelihood opportunities

i. Access to labour markets (formal and informal)

In October 2014 the *Global AgeWatch Index* reported that 51.3 % of the population aged 55-

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[160] Office of the UN High Commissioner for Refugees (UNHCR), Forced evictions in Mogadishu 1 Jan – 1 Dec 2014, 1 February 2015, http://reliefweb.int/country/som?page=2#content, accessed 26 February 2015

[161] Office of the UN High Commissioner for Refugees (UNHCR), Forced evictions in Mogadishu 1 Jan – 1 Dec 2014, 1 February 2015, http://reliefweb.int/country/som?page=2#content, accessed 26 February 2015

[162] Amnesty International, Amnesty International Report 2014/15 - Somalia, 25 February 2015, https://www.amnesty.org/en/countries/africa/somalia/report-somalia/, accessed 28 February 2015

[163] Office of the UN High Commissioner for Refugees (UNHCR), Forced evictions in Mogadishu 1 Jan – 1 Dec 2014, 1 February 2015, http://reliefweb.int/country/som?page=2#content, accessed 26 February 2015

64 are employed.[164]

In an interview conducted with CORI in February 2015, *Mohammed Ali Farah*, the CEO and Founder of Mogadishu-based NGO the Somali Disability Empowerment Network (SODEN) stated that there are no work opportunities for people with a disability in Mogadishu,

> "There are absolutely no work opportunities for people with disability in Mogadishu. For example, I am one of the educated disabled persons and I advocate for disability rights in Mogadishu. I have applied for different jobs sufficiently and I have never been successful. This illustrates that there is little opportunity for the people with disability in both formal and informal sectors in Mogadishu.
>
> There are no any government policies helping to improve access to labour markets for both elderly and persons with a disability."[165]

In an interview conducted with CORI in February 2015, *Abdullahi Hassan Hussein*, the Chairperson of the Mogadishu-based Horn of Africa Disability Forum (HADF) stated that,

> "There has been no national policy for disabled people to date but the IEDP centre has been advocating for the design and implementation for such a policy."[166]

In an interview conducted with CORI in February 2015, *Abdullahi Hussein Osman*, the Chairperson of the Institute for Education of Disabled People in Somalia (IEDP) stated "No, there is no opportunity for people with disabilities and elder people in Mogadishu."[167]

Abdullahi Hussein Osman (IEDP) also stated that he didn't know of any government policies to improve access to labour markets in Somalia.[168]

ii. Access to other opportunities to earn sufficient income to meet minimum standard of living conditions, including self-employment / business opportunities; financial support from private charities, NGOs, etc.

In December 2014 the *Institute of Education for Disabled People in Somalia* reported that more than 60 people with disabilities came out on the streets of Mogadishu showing their support for the new Prime Minister Dr. Omer Abdirashid Ali who has promised to give people with disabilities the chance to participate politically and to raise the national employment rate,

> "The people with disabilities in Somalia made congratulation gathering to the new prime minister Dr. Omer Abdirashid Ali for his promise for the disabled people in the media on Friday night stating his cabinet to be inclusive for all were the disabled

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164 Global AgeWatch Index 2014, AgeWatch Report Card, Somalia, http://www.helpage.org/global-agewatch/population-ageing-data/country-ageing-data/?country=Somalia, accessed 02 March 2015

165 CORI Interview with Mohamed Ali Farah (SODEN), conducted via written correspondence in response to written questions. 21 February 2015

166 CORI Interview with Abdullahi Hassan Hussein (HADF), conducted via written correspondence in response to written questions. 24 February 2015

167 CORI Interview with Abdullahi Hussein Osman (IEDP) conducted via written correspondence in response to written questions. 23 February 2015

168 CORI Interview with Abdullahi Hussein Osman (IEDP) conducted via written correspondence in response to written questions. 23 February 2015

> people will be given chance for political participation which they have right as well as the national employment more than ten percentage.
>
> More than 60 persons with disabilities carrying banner and the picture of the new prime minster Dr. Omer Abdirashid Ali came out the streets in Mogadishu at the Hoyoyinka building opposite the national theater where they send message to the prime minster to take care the rights and the role of the disabled people in his new cabinet."[169]

In an interview conducted with CORI in February 2015, *Mohammed Ali Farah*, the CEO and Founder of Mogadishu-based NGO the Somali Disability Empowerment Network (SODEN) stated,

> "Some elderly and disabled people sit on the streets of Mogadishu to ask for small change or discarded food in order to maintain a living.
>
> There are not many charities or organizations that advocate for disability issues in Mogadishu. However, there was a project that our organization (SODEN) implemented to generate income for persons with a disability which helped build their capacity to start a small business."[170]

In an interview conducted with CORI in February 2015, *Abdullahi Hassan Hussein*, the Chairperson of the Mogadishu-based Horn of Africa Disability Forum (HADF) stated that,

> "There are some NGOs and charity organizations that provide occasional support by supplying dry food aid. The IEDP centre feeds 150 persons every day; both disabled people and their children with support from the Turkish Red Cresent society."[171]

In an interview conducted with CORI in February 2015, *Abdullahi Hussein Osman*, the Chairperson of the Institute for Education of Disabled People in Somalia (IEDP) stated "Most disabled people and the elderly depend on their families and friends rather than NGO support."[172]

In February 2015 *Abdullahi Hussein Osman* further stated that "People with disabilities and elderly people sit on the roadside and beg. There is no regular or permanent alternative livelihood opportunity."[173]

iii. Availability and access to social security and state pensions

In an interview conducted with CORI in February 2015, *Mohammed Ali Farah*, the CEO and

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169 Institute of Education for Disabled People in Somalia, Somali people with disabilities welcome the new prime minster Dr. Omer Abdulrashid, 30 December 2014, http://iedsom.org/2014/12/30/somali-people-with-dsiabilities-welcome-the-new-prime-minster-dr-omer-abdulrashid, accessed 24 February 2015

170 CORI Interview with Mohamed Ali Farah (SODEN), conducted via written correspondence in response to written questions. 21 February 2015

171 CORI Interview with Abdullahi Hassan Hussein (HADF), conducted via written correspondence in response to written questions. 24 February 2015

172 CORI Interview with Abdullahi Hussein Osman (IEDP) conducted via written correspondence in response to written questions. 23 February 2015

173 CORI Interview with Abdullahi Hussein Osman (IEDP) conducted via written correspondence in response to written questions. 23 February 2015

Founder of Mogadishu-based NGO the Somali Disability Empowerment Network (SODEN) stated that social security, welfare, or state pension are not available or specified for elderly people or persons with a disability in Mogadishu,

> "There is no social security, welfare, state pension that is available or specified for elderly people or persons with a disability in Mogadishu. The government as well as society neglect people with a disability."[174]

In an interview conducted with CORI in February 2015, *Abdullahi Hassan Hussein*, the Chairperson of the Mogadishu-based Horn of Africa Disability Forum (HADF) stated that,

> "No pension fund or social security is available in Somalia and the international humanitarian aid agencies have also denied their role to care for disabled and elderly people."[175]

In an interview conducted with CORI in February 2015, *Abdullahi Hussein Osman*, the Chairperson of the Institute for Education of Disabled People in Somalia (IEDP) stated "Since the collapse of the military regime in Somalia there has been no social security and state pension policy"[176]

c. Social support mechanisms

i. Role of extended families /clans /tribal networks in providing support

In an interview conducted with CORI in February 2015, *Mohammed Ali Farah*, the CEO and Founder of Mogadishu-based NGO the Somali Disability Empowerment Network (SODEN) stated that the role of the extended family varies depending on the wealth of the individual's family,

> "The role of the extended family providing support to the disabled and elderly varies depending on the wealth of individual's family and also their relationship. Otherwise, there is no tribal network or clan system to help the elderly or the disabled. In my opinion I think all disabled people make up on tribe as they all collectively face discrimination and social exclusion on a daily basis."[177]

In an interview conducted with CORI in February 2015, *Abdullahi Hassan Hussein*, the Chairperson of the Mogadishu-based Horn of Africa Disability Forum (HADF) stated that,

> "Many of the disabled persons depend on extended families - approximately 31%."[178]

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174 CORI Interview with Mohamed Ali Farah (SODEN), conducted via written correspondence in response to written questions. 21 February 2015

175 CORI Interview with Abdullahi Hassan Hussein (HADF), conducted via written correspondence in response to written questions. 24 February 2015

176 CORI Interview with Abdullahi Hussein Osman (IEDP) conducted via written correspondence in response to written questions. 23 February 2015

177 CORI Interview with Mohamed Ali Farah (SODEN), conducted via written correspondence in response to written questions. 21 February 2015

178 CORI Interview with Abdullahi Hassan Hussein (HADF), conducted via written correspondence in response to written questions. 24 February 2015

In an interview conducted with CORI in February 2015, *Abdullahi Hussein Osman*, the Chairperson of the Institute for Education of Disabled People in Somalia (IEDP) stated,

> "Some disabled people are living with their parents and others rent a wheel barrow every morning to reach the market places in order to beg."[179]

ii. Charities, NGOs and other organizations (including religious groups/organizations) that provide support to elderly persons and persons with disabilities

In February 2014 the *US Department of State* reported that local organizations received negligible support from local authorities,

> "Local organizations advocated for the rights of persons with disabilities with negligible support from local authorities."[180]

In December 2014 the *Institute of Education for Disabled People in Somalia* (IEDP) reported that the International Day of People with Disability was marked in Mogadishu in an event organised by Horn Africa Disability Forum Network which included the participation of 100 people; 60 of which were people with disabilities,

> "The people with disabilities in Somali marked international day of the persons with disabilities in variety places in the country. HADF horn Africa disability forum network based in Somalia organized large ceremony to participate 100 persons 60 from the PWDs people with disabilities and 40 from the respected groups in the community. The government, civil society, youth and religious groups
>
> The ceremony was held in Mogadishu at HAYAT hotel KM 4 which is jointly organized by the HADF network, SNDC Somali national disability council and the ministry of the labor and social where the minister and the directors as well as the Somali national TV and Radio director Mr. Al-adalo participated the ceremony."[181]

In December 2014 the *Institute of Education for Disabled People in Somalia* (IEDP) reported that a one day consultation meeting for the disabled people's rights with the Somali Government was held by the Horn Africa Disability Forum Network and the Somali National Disability Consultation (SNDC). *IEDP* reported that education, health care, employment and access of political and legislation in the country were discussed by participants,

> "On Sunday 30 November 2014 disabled people rights consultation was held in Mogadishu by the HADF Horn Africa Disability Forum with cooperation of the SNDC Somali national disability consultation. The meeting was consultations and discussions about the rights of the persons with disabilities as public service and participation of the political. This project was partial funded by the UNSOM and implemented HADF.

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179 CORI Interview with Abdullahi Hussein Osman (IEDP) conducted via written correspondence in response to written questions. 23 February 2015

180 United States Department of State, 2013 Country Reports on Human Rights Practices - Somalia, 27 February 2014, http://www.state.gov/j/drl/rls/hrrpt/2013/af/220158.htm, accessed 29 January 2015

181 Institute of Education for Disabled People in Somalia (IEDP), Commemoration ceremony for the 3 December 2014 international disabled people held in Mogadishu, 03 December 2014, http://iedsom.org/2014/12/03/commemoration-ceremony-for-the-3-december-2014-international-disabled-people-held-in-mogadishu/, accessed 24 February 2015

> The meeting was participated by 30 persons 15 from the PWDs persons with disabilities and DPOs disabled people organizations and DG from the ministry of the labor/social with labor and training department officers and members from the political parts. And Banadir region education directory who was member of the participants and other youth organization who made their contribution in the meeting was held in Mogadishu at Hotel Hayat KM4 where participants made discussions about three issue the right of the disabled people for education, health care, employment and access of political and legislation in the country."[182]

In an interview conducted with CORI in February 2015, *Mohammed Ali Farah*, the CEO and Founder of Mogadishu-based NGO the Somali Disability Empowerment Network (SODEN) stated that there are a few NGOs based in the UK that work in partnership with SODEN,

> "There are a few NGO's such as East Africa Disability Aid (EADA) which is based in the UK and works as a partnership with our organisation (SODEN). EADA helps to provide mobility access such as wheelchairs and crutches to support persons with a disability. There is also an organisation called Somali National Disability that is supported by the Somali government but it is not in operation at the present."[183]

In an interview conducted with CORI in February 2015, *Abdullahi Hassan Hussein*, the Chairperson of the Mogadishu-based Horn of Africa Disability Forum (HADF) stated that,

> "Religious charities provide elderly and disabled people with periodic support during the Holy Raman month."[184]

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[182] Institute for Education of Disabled People in Somalia, One Day Consultation Meeting for the Disabled People Rights with Somali Government, 30 November 2014, http://iedsom.org/2014/11/30/one-day-consultation-meeting-for-the-disabled-people-rights-with-somali-government/, accessed 24 February 2015

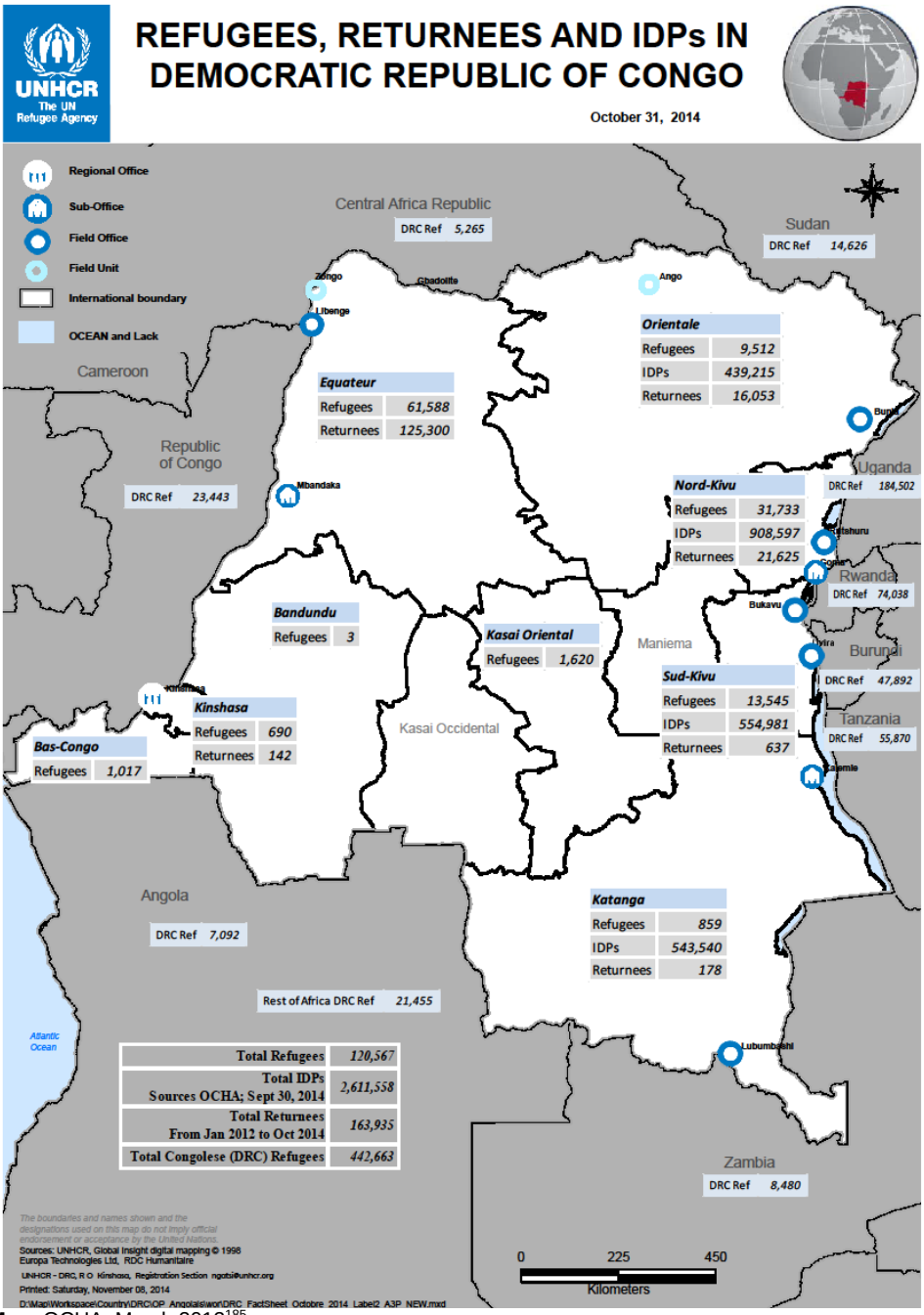
[183] CORI Interview with Mohamed Ali Farah, (SODEN), conducted via written correspondence in response to written questions. 21 February 2015

[184] CORI Interview with Abdullahi Hassan Hussein (HADF), conducted via written correspondence in response to written questions. 24 February 2015

C. KINSHASA

1. Brief overview and general situation

a. Map of the city, showing (where relevant) IDP settlements and other informal settlements (slums)



Map: OCHA, March 2012[185]

[185] OCHA, RD Congo Province de Kinshasa, March 2012, http://reliefweb.int/map/democratic-republic-congo/rdcongo-reference-map-province-de-kinshasa-carte-administrative-mars, accessed 12 May 2015

b. Safety and security situation

Information concerning the situation in eastern DRC was found during the research period for this report, however little information was found relating to conditions in Kinshasa within the sources consulted during the time frame for this research.

i. General situation (conflict, criminal activity, SGBV, etc.)

In February 2015 *Amnesty International* reported that rape and other forms of sexual violence against women and girls remained endemic throughout DRC,

> "Rape and other forms of sexual violence against women and girls remained endemic, not only in areas of conflict, but also in parts of the country not affected by armed hostilities. Acts of sexual violence were committed by armed groups, by members of the security forces and by unarmed civilians. The perpetrators of rape and other sexual violence enjoyed virtually total impunity.
>
> Mass rapes, in which dozens of women and girls were sexually assaulted with extreme brutality, were committed by armed groups and by members of the security forces during attacks on villages in remote areas, particularly in North Kivu and Katanga. Such attacks often also involved other forms of torture, killings and looting.
>
> Between 4 and 17 July, Mai Mai Simba combatants reportedly raped at least 23 women and girls in Mangurejipa village and mining sites located in surrounding areas in Lubero territory, North Kivu.
>
> In October, dozens of women and girls were raped in Kansowe village, Mitwaba territory, Katanga province by special commando soldiers of the Congolese army deployed there to fight the Mai Mai Bakata Katanga armed group.
>
> Between 3 and 5 November, at least 10 women were raped, allegedly by FDLR fighters, in Misau and Misoke villages, Walikale territory, North Kivu province."[186]

In January 2015 the *World Food Programme* (WFP) reported that ongoing instability in the DRC continues to have a regional impact. WFP reported there is a total of nearly 600,000 IDPs,

> "Ongoing instability in the DRC continues to have a regional impact, threatening peace and security in the Great Lakes region and beyond."[187]

In January 2015 the *Armed Conflict Location and Event Data Project (*ACLED) a dataset designed for disaggregated conflict analysis and crisis mapping at the University of Sussex, reported that conflict in DRC declined in 2014,

> "Conflict in Congo continued to decline in 2014. There are only minor differences in

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[186] Amnesty International, Amnesty International Report 2014/15 - Democratic Republic of the Congo, 25 February 2015, https://www.amnesty.org/en/countries/africa/democratic-republic-of-the-congo/, accessed 28 February 2015

[187] World Food Programme, WFP Democratic Republic of the Congo, Brief, Reporting period: 01 October–31 December 2014, http://reliefweb.int/sites/reliefweb.int/files/resources/CountryBrief_RBC_Republic-of-Congo_2014-Q4.pdf, accessed 03 March 2015

events totals between 2012, 2013 and 2014, but fatality totals dropped substantially in 2014. While activity totals are largely similar, the violence composition changed to reveal increases of violence against civilians by FARDC, political militias and local communal militias. Government activity against militias increased in 2014; intra-militia competition was not as fierce as in 2013, as these varied groups focused instead of increasing acts of violence against civilians. Militias continue to be the most significant threat to civilians in DR-Congo, although rebels (e.g. ADF) kill more than double the number of people per event than militias."[188]

In January 2015 *ACLED* identified the following "hotspots" of armed violent activity in 2014,

> "Hotspots of armed violent activity in 2014 include Walikale, Irumu, Oicha, Beni and Gombe, whereas in 2013, Rutshuru, Walikale, Goma and Masisi were most active (although zones of highest fatalities differ from activity hotspots)"

In January 2015 *Human Rights Watch* reported that the government of the DRC has used unlawful and excessive force to crack down on protests in January in Kinshasa. *Human Rights Watch* reported that 36 people were killed during demonstrations in Kinshasa,

> "The government of the Democratic Republic of Congo has used unlawful and excessive force to crack down on protests since January 19, 2015, Human Rights Watch said today. The demonstrators were protesting proposed changes to the electoral law that many Congolese believed would permit President Joseph Kabila to stay in office beyond his mandated two-term limit.
>
> Human Rights Watch confirmed that 36 people, including one police officer, were killed during the demonstrations in Kinshasa, Congo's capital. Of these, Congo's security forces fatally shot at least 21 people."[189]

According to the *International Federation for Human Rights*, 42 people were killed in the protests.[190]

In January 2015 the *UN News Service* reported that UN Secretary-General Ban Ki-Moon called for calm and restraint on all sides involved in clashes in Kinshasa in January,

> "Amid the deteriorating situation in the Democratic Republic of the Congo (DRC), where the capital, Kinshasa, is gripped by clashes between demonstrators and security forces, Secretary General Ban Ki-moon today urged maximum restraint on all sides, while the head of United Nations peacekeeping operations briefed the Security Council on broader efforts to help stabilize the vast country.
>
> In a statement issued by his spokesperson, the Secretary-General expressed his

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188 Armed Conflict Location and Event Data Project (ACLED), Conflict Trends (No. 33) Real-Time Analysis of African Political Violence, January 2015, http://www.acleddata.com/wp-content/uploads/2015/01/ACLED-Conflict-Trends-Report-No.-33-January-2015_updated.pdf, accessed 26 February 2015

189 Human Rights Watch, DR Congo: Deadly Crackdown on Protests, 24 January 2015, https://www.hrw.org/news/2015/01/24/dr-congo-deadly-crackdown-protests, accessed 03 February 2015

190 International Federation for Human Rights, DRC: 42 already dead in protests against the proposed electoral law, 21 January 2015, https://www.fidh.org/International-Federation-for-Human-Rights/Africa/democratic-republic-of-congo/16850-drc-42-already-dead-in-protests-against-the-proposed-electoral-law, accessed 03 February 2015

concern about the unrest in Kinshasa and other cities following the adoption of a draft raft electoral law by the National Assembly, currently under further review in the Senate.
"He deplores the loss of lives and injuries caused so far and calls on the national security forces and demonstrators to refrain from further violence and exercise maximum restraint," said the statement."[191]

In February 2015 the *Special Rapporteur on Human Rights Defenders* and the *Special Rapporteur on Prisons and Conditions of Detention in Africa* (both of the African Commission on Human and Peoples' Rights) expressed deep concern at the human rights situation in DRC, in particular the number of arrests and detentions following the protests in relation to the electoral bill,

> "The Special Rapporteur on Human Rights Defenders in Africa, Mrs. Reine Alapini-Gansou, and the Special Rapporteur on Prisons and Conditions of Detention in Africa, Commissioner Med S.K. Kaggwa, are deeply concerned by the deteriorating human rights situation in DRC, in particular the number of arrests and detentions following the protests that took place after the adoption on 17 January 2015, by Parliament of the Bill to amend the 2006 Electoral Law (the Bill).
>
> The Special Rapporteurs have received information that violence and abuses were committed by Security Officers during the various protests against the Bill that took place across the country. The Special Rapporteurs call on the Congolese authorities to investigate these allegations and take the necessary disciplinary and judicial measures."[192]

In January 2015 *Human Rights Watch* reported that the Congolese police launched an operation in November 2013 to remove gang members from the streets in Kinshasa,

> "In the capital, Kinshasa, the Congolese police launched "Operation Likofi" in November 2013 to remove gang members known as "kuluna" from the streets. During the operation, the police extrajudicially executed at least 51 young men and boys and forcibly disappeared 33 others. Police dragged some of victims out of their houses at night and shot them dead before taking their bodies away."[193]

ii. Differentiated impact (on elderly persons and persons with disabilities)

In October 2014 the Global AgeWatch Index reported that there are 3.1 million people over 60 in the DRC and 4.5% of the population is over 60.

In May 2014 *CBM*, an international Christian development organisation, reported that impacts are conflict are greater for people with a disability,

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[191] UN News Service, DR Congo: Ban urges calm in Kinshasa; peacekeeping chief backs gradual drawdown of UN mission, 22 January 2015, http://www.un.org/apps/news/story.asp?NewsID=49873#.Vel1ZJdUWR8, accessed 03 February 2015

[192] African Commission on Human and Peoples' Rights, Joint Press Release by the Special Rapporteur on Human Rights Defenders and the Special Rapporteur on Prisons and Conditions of Detention in Africa on the Human Rights Situation Following the Events Surrounding the Amendment of the Electoral Law in the Democratic Republic of Congo, 12 February 2015, http://www.achpr.org/press/2015/02/d250/, accessed 03 March 2015

[193] Human Rights Watch, World Report 2015 - Democratic Republic Of Congo, 29 January 2015, http://www.hrw.org/world-report/2015/country-chapters/democratic-republic-congo, accessed 03 February 2015

> "Impacts of conflict are greater for people with disability especially those staying in the camps as a result of conflicts. These people face a multitude of problems which tend to be exacerbated by their disability if left unchecked. There are thousands of such persons in camps who are unidentified and therefore forgotten."[194]

Following a visit to Maluku camp in May 2014, in June 2014 *CBM* reported that the assessment identified additional needs of people with disabilities in the camp, such as the challenge of food distribution, insecurity, and mobility,

> "The CBM lead assessment also identified additional needs of persons with disabilities in the camp. Food distribution is sometimes a problem for people with reduced mobility although family members can be a sufficient source support. The Red Cross DRC is however available to support them since they have resources in place to support women, children (also supported by UNICEF) and vulnerable people.
>
> The insecurity of persons with disability was also highlighted.
>
> Mobility for wheelchair users within the camp also remains a concern.
>
> Reporting these challenges is being encouraged to ensure quick responses to identified barriers.
>
> Moreover, special attention should also be given during the departure of persons with disabilities and their families to their final destination. This constituted part of the request by CBM to the humanitarian organisations working in the Maluku Camp."[195]

In July 2013 the *UN Committee on the Elimination of Discrimination Against Women* (UN CEDAW) expressed concern about the lack of adequate protection and assistance for disadvantaged groups of women such as elderly women and women with disabilities,

> "The Committee is concerned about the lack of adequate protection and assistance for disadvantaged groups of women such as:
>
> [ ]
>
> Women refugees, women albinos, girls living in the street, elderly women and women with disabilities."[196]

In April 2013 *Refugees International* reported that the needs of elderly and people with disabilites are unique and substantial and food and security are two of the biggest challenges, particularly for the elderly,

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194 CBM, Assessing the needs of persons with disability in camps, 5 June 2014, http://www.cbm.org/The-needs-of-persons-with-disability-in-camps-450262.php, accessed 04 March 2015

195 CBM, Assessing the needs of persons with disability in camps, 5 June 2014, http://www.cbm.org/The-needs-of-persons-with-disability-in-camps-450262.php, accessed 04 March 2015

196 UN Committee on the Elimination of Discrimination Against Women, Concluding observations of the Committee on the Elimination of Discrimination against Women, Democratic Republic of the Congo, CEDAW/C/COD/CO/6-7, July 2013, para 35, http://tbinternet.ohchr.org/_layouts/treatybodyexternal/Download.aspx?symbolno=CEDAW/C/COD/CO/6-7&Lang=En, accessed 29 January 2015

> "Displaced persons in eastern DRC are in desperate need of support. Food and security remain two of the biggest challenges, particularly for the elderly. As the humanitarian community looks for ways to improve assistance, it is critical that they consider the specific needs and conditions of vulnerable groups like the elderly and disabled. Their needs are unique and substantial, and they often have trouble accessing the existing support systems available within the camps."[197]

In July 2013 *UN CEDAW* recommended that the State Party "provide protection and assistance to other women who face multiple forms of discrimination, including internally displaced women, refugee women, women albinos, girls living in the street, elderly women and women with disabilities and ensure that these women have access, without discrimination, to health care, education, clean water, sanitation and income-generating activities."[198]

In December 2009 the *UN Economic, Social and Cultural Committee* regretted that the DRC did not provide sufficient information in its report to the Committee as to the situation of people with disabilities. The Committee noted with concern that in the absence of appropriate social services, most adults with disabilities resort to begging and their children are excluded from access to education and health care,

> "The Committee, while noting the new provisions of the labour code concerning people with disabilities, regrets that insufficient information was provided in the State party report as to the concrete situation of persons with disabilities and the relevant laws which apply to them, including safeguards against abuse and neglect. The Committee notes with concern that in the absence of appropriate social services, most adults with disabilities have to resort to begging and their children are excluded from access to education and health care."[199]

> "The Committee draws attention to its general comment No. 5 (1994) on persons with disabilities and urges the State party to adopt comprehensive anti-discrimination legislation that provides persons with disabilities with judicial and social-policy programmes which enable them to live an integrated, self-determined and independent life. The Committee also urges the State party to consider ratifying the Convention on the Rights of Persons with Disabilities and the Optional Protocol thereto. The State party is invited to provide detailed information in its next periodic report on persons with disabilities, including children and women, with regard to their enjoyment of economic, social and cultural rights."[200]

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197 Refugees International, Congo's Elderly Act As Caregivers – But Who Will Care for Them?, 15 April 2013, http://www.refintl.org/blog/congo%E2%80%99s-elderly-act-caregivers-%E2%80%93-who-will-care-them, accessed 4 March 2015

198 UN Committee on the Elimination of Discrimination Against Women, Concluding observations of the Committee on the Elimination of Discrimination against Women, Democratic Republic of the Congo, July 2013, para 36, http://tbinternet.ohchr.org/_layouts/treatybodyexternal/Download.aspx?symbolno=CEDAW/C/COD/CO/6-7&Lang=En, accessed 29 January 2015

199 UN Committee on Economic, Social and Cultural Rights (CESCR), Consideration of reports submitted by States parties under articles 16 and 17 of the Covenant : Concluding observations of the Committee on Economic, Social and Cultural Rights - Democratic Republic of the Congo, 16 December 2009, E/C.12/COD/CO/4, para 18, http://www.refworld.org/publisher,CESCR,,COD,4ef9fee12,0.html, accessed 05 February 2015

200 UN Committee on Economic, Social and Cultural Rights (CESCR), Consideration of reports submitted by States parties under articles 16 and 17 of the Covenant : Concluding observations of the Committee on Economic, Social and Cultural Rights - Democratic Republic of the Congo, 16 December 2009, E/C.12/COD/CO/4, para 18, http://www.refworld.org/publisher,CESCR,,COD,4ef9fee12,0.html, accessed 05 February 2015

Handicap International reports that civil war over the last twenty years has caused millions of deaths and injuries and massive population displacement,

> "The DRC is among the poorest countries in Africa, where 89% of people live on less than $2 per day. An estimated 10 million Congolese have disabilities. Over the last 20 years, civil war in eastern DRC has resulted in millions of deaths and injuries and massive population displacement. Faced with the DRC's staggering needs, Handicap International employs its full spectrum of services, from rehabilitation and preventive care to emergency assistance."[201]

c. Socio-economic situation

i. General situation (economic climate, food security, etc.)

The Democratic Republic of the Congo ranks second to last out of 187 countries on the 2013 UNDP Human Development Index,

> "Congo (Democratic Republic of the)'s HDI value for 2012 is 0.304—in the low human development category—positioning the country at 186 out of 187 countries and territories. The rank is shared with Niger. Between 1980 and 2012, Congo (Democratic Republic of the)'s HDI value increased from 0.286 to 0.304, an increase of 6 percent or average annual increase of about 0.2 percent."[202]

In March 2015 *Reuters Africa* reported that DRC's economy grew at 9.5% in 2014, according to its Prime Minister. Reuters Africa reported that DRC vies to be Africa's top copper producer and also has vast reserves of gold, diamonds and cobalt,

> "Democratic Republic of Congo's economy grew at 9.5 percent in 2014, one of its best performances since 1960, the year it secured independence, Prime Minister Augustin Matata Ponyo said on Tuesday.
>
> Matata Ponyo said the government was targeting double-digit growth for 2015, without giving a more detailed forecast. Late last year, he predicted 2015 growth would be 10.4 percent.
>
> "According to the United Nations Development Programme, if we maintain this rate of wealth creation, the Congolese economy could become 'emerging' in 13 years," he told reporters, referring to a classification system of economies used by the International Monetary Fund (IMF).
>
> The government figures are more optimistic than those of the IMF from December, which estimated growth of 9.0 percent in 2014 and 9.1 percent for 2015, largely based on an expansion of mining output.

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201 Handicap International, Democratic Republic of Congo, http://www.handicap-international.us/democratic_republic_of_congo, accessed 04 March 2015

202 United Nations Development Programme (UNDP), Human Development Report 2013 The Rise of the South: Human Progress in a Diverse World Explanatory note on 2013 HDR composite indices Congo (Democratic Republic of the Congo), http://hdr.undp.org/sites/default/files/Country-Profiles/COD.pdf, accessed 03 March 2015

> Congo vies with Zambia to be Africa's top copper producer, having produced a record 1.03 million tonnes last year, and also has vast reserves of gold, diamonds and cobalt."[203]

In January 2015 the *UN Children's Fund (UNICEF)* reported that an estimated 2,250,000 children are affected by severe acute malnutrition,

> "Health and nutrition emergencies continue to threaten children's survival in DRC: severe acute malnutrition (SAM) affects an estimated 2,250,000 children."[204]

In January 2015 *UNICEF* reported that cholera remains a significant concern and during the second half of 2014, 15 health zones reported measles outbreaks,

> "Cholera remains a significant concern even though prevention and preparedness activities have had some positive impact, with 33 per cent fewer cases of the disease reported through October 2014 than were reported in the same period in 2013. But despite these gains, there were 14,065 cholera cases reported in 2014, representing almost 20 per cent of all cases in West and Central Africa. Large-scale measles vaccination campaigns were conducted in 7 provinces in 2014; this should reduce the incidence of measles outbreaks significantly in 2015. However, because of logistical and security constraints and weaknesses in routine vaccination systems, numerous children remain unvaccinated. During the second half of 2014, 15 health zones reported measles outbreaks."[205]

In January 2015 the *World Food Programme* (WFP) reported that over the reporting period 1 October – 31 December 2014, there were significant humanitarian demands but limited resources in DRC. *WFP* stated that its portfolio was re-prioritised to provide assistance to the acutely vulnerable people in conflict-affected parts of the country,

> "With significant humanitarian demands but limited resources in DRC, WFP reviewed its programmes in the country through consultations with key stakeholders and a joint UNICEF -WFP-UNHCR high-level Mission in January 2014. As a result, WFP's portfolio was re-prioritized to provide assistance to the acutely vulnerable people in conflict - affected parts of the country. WFP launched PRRO 200540 in July 2013, which aims to provide life- saving food assistance for internally displaced persons (IDPs) and refugees, including in areas where violence remains a problem; support early recovery of people returning to their areas of origin; ensure children attend school by providing emergency school feeding to displaced children; reduce malnutrition through nutritional support to children aged 6 -59 months, and pregnant/nursing women; and support access to markets and education."[206]

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203 Reuters Africa, Democratic Republic of Congo economy grew at 9.5 pct in 2014 –PM, 03 March 2015, http://af.reuters.com/article/investingNews/idAFKBN0LZ11H20150303, accessed 04 March 2015

204 United Nations Children's Fund (UNICEF), Democratic Republic of the Congo, January 2015, http://www.unicef.org/appeals/drc.html#3, accessed 03 March 2015

205 United Nations Children's Fund (UNICEF), Democratic Republic of the Congo, January 2015, http://www.unicef.org/appeals/drc.html#3, accessed 03 March 2015

206 World Food Programme, WFP Democratic Republic of the Congo, Brief, Reporting period: 01 October–31 December 2014, http://reliefweb.int/sites/reliefweb.int/files/resources/CountryBrief_RBC_Republic-of-Congo_2014-Q4.pdf, accessed 03 March 2015

In November 2014 the *World Health Organisation* reported that the Ebola virus had been eradicated in DRC.[207]

In December 2009 the *UN Committee on Economic, Social and Cultural Rights* noted with grave concern that 75 per cent of the population lives in extreme poverty,

> "The Committee notes with grave concern that although the State party has adopted a Poverty Reduction Strategy, 75 per cent of the population continues to live in extreme poverty. The Committee is also concerned about the continuous decline in the standard of living and life expectancy. The Committee expresses its concern that 83 percent of the population have no access to safe drinking water, while 70 per cent have no access to hygienic sanitation facilities and only 1 per cent of the population have access to electricity, owing mainly to the mismanagement of the Inga Hydroelectric facilities."[208]

ii. Differentiated impact (including impact of food shortages)

In July 2014 *Foreign Policy* reported that the outlook is not good for those with serious disabilities and that there is "no good data" on the number of those with disabilities in Congo,

> "The outlook is increasingly grim for those with serious disabilities. The government wants them out of the camps as another step in closing the book on 20 years of war, but in a country that offers virtually no services for its disabled, the NGO-packed environs of Goma is one of the only places where it is possible to live with some dignity. There is no good data on the number of disabled people in Congo, but after such a long period of war, it is almost certainly higher than the 10 percent figure that is the norm in most societies."[209]

In March 2012 the *Inter Press Service* reported that the outlook for people living with disabilities in DRC remains bleak,

> "The outlook for people living with disabilities in the Democratic Republic of Congo remains bleak, despite a variety of efforts to improve their lot and bring them in from the margins of society.
>
> "There are roughly 9.1 million people with disabilities in Congo, 11 percent of the total population of 60 million," said Patrick Pindu, coordinator of the National Federation of Associations of People Living with a Disability in Congo (FENAPHACO).
>
> Pindu, who was speaking on the occasion of the first "Day of Sharing and Solidarity", organised in Kikwit, in southwestern DRC in February, said, "Amongst people with disabilities, 90 percent are illiterate, 93 percent are jobless and 96 percent live in an

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207 World Health Organization (WHO), WHO declares end of Ebola outbreak in the Democratic Republic of Congo, 21 November 2014, http://www.who.int/mediacentre/news/statements/2014/drc-ends-ebola/en/, accessed 04 March 2015

208 UN Committee on Economic, Social and Cultural Rights (CESCR), Consideration of reports submitted by States parties under articles 16 and 17 of the Covenant : Concluding observations of the Committee on Economic, Social and Cultural Rights - Democratic Republic of the Congo, 16 December 2009, E/C.12/COD/CO/4, para 29, http://www.refworld.org/publisher,CESCR,,COD,4ef9fee12,0.html, accessed 03 March 2015

209 Foreign Policy, In Congo, a Disabled Peace: Security is improving in the eastern part of the country -- so why are many refugees worse off than before?, 31 July 2014, http://foreignpolicy.com/2014/07/31/in-congo-a-disabled-peace/, accessed 04 March 2015

unhealthy and inhumane environment.""[210]

In 2012 *Disabled Peoples International* reported that due to civil unrest, famine, disease and poverty DRC has one of the highest prevalence rates of leprosy in the world,

> "Democratic Republic of Congo is a country located in the African Great Lakes region Central Africa. Located in a humid tropical climate with a rainy season which lasts eight months, DR Congo is home to one of the highest rates of prevalence of Leprosy in the world. Due to generations of civil unrest, famine, disease, and the resulting cyclic poverty, leprosy is highly prevalent in the DR Congo. Poor infrastructure has also resulted in difficult access to the many isolated, leprosy-affected areas throughout the country, particularly in the north- west."[211]

2. Access to services for elderly persons and persons with disabilities

a. Availability, accessibility and quality of basic and specialized services

i. Health care, including specialized medical services

In July 2014 the *United Nations Working Group on the Universal Periodic Review* reported that delegation of the Democratic Republic of the Congo stated it was that the process of ratifying the Convention on the Rights of Persons with Disabilities was under way.[212]

In September 2014 *Médecins Sans Frontières/Doctors Without Borders* (MSF) reported that the wholesale lack of basic health services led to numerous outbreaks in 2013,

> "MSF works to make care more widely available and responds to health emergencies in DRC, where the wholesale lack of basic health services again led to numerous outbreaks, while conflict in the east continued to kill, displace, and injure civilians."[213]

In December 2009 the *UN Committee on Economic, Social and Cultural Rights* noted with concern that many deaths have been caused by preventable and treatable illnesses,

> "The Committee is deeply concerned that 4 million people have died since the conflict began and that most deaths were caused by preventable and treatable illnesses. The Committee expresses grave concern that most of the health districts are no longer functioning, leaving 37 per cent of the population totally deprived of any form of health care. The Committee is also concerned that when structures do exist, due to user fees health care is not readily accessible resulting in alarming levels of infant, under-five

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210 Inter Press Service, Rights- DR Congo: Disabled Left to Fend for Themselves, 08 March 2012, http://www.ipsnews.net/2012/03/rights-dr-congo-disabled-left-to-fend-for-themselves/, accessed 03 March 2015

211 Disabled Peoples International, Democratic Republic of Congo, 2012, http://www.disabledpeoplesinternational.org/Democratic, accessed 03 March 2015

212 United Nations Working Group on the Universal Periodic Review, Report of the Working Group on the Universal Periodic Review, Democratic Republic of the Congo, 07 July 2014, http://www.refworld.org/docid/53eb19594.html, accessed 03 March 2015

213 Médecins Sans Frontières/Doctors Without Borders (MSF), US Annual Report 2013, September 2014, http://cdn.doctorswithoutborders.org/sites/usa/files/attachments/msf_ar2013_final.pdf, accessed 04 March 2015

and maternal mortality and low vaccination coverage."[214]

ii. Education

In February 2014 the *US Department of State* (USDOS) reported that the constitution provides that all citizens have access to public services, regardless of disability, and provides that disabled persons are afforded specific government protection; however *USDOS* reported that the government did not enforce these provisions effectively,

> "The constitution prohibits discrimination against persons with physical, intellectual, or mental disabilities; stipulates that all citizens regardless of disability have access to public services, including education; and provides that persons with disabilities be afforded specific government protection. The constitution and law do not address sensory disabilities. The law states that private, public, and semi-public companies may not discriminate against qualified candidates based on intellectual, sensorial, and physical disabilities. The government did not enforce these provisions effectively, and persons with disabilities often found it difficult to obtain employment, education, and government services."[215]

In February 2014 *USDOS* reported that no special provisions are required by law of educational facilities to accommodate the special needs of the people with disabilites, however some schools received private and limited public funds to provide education and vocational training,

> "The law does not mandate access to government buildings or services for persons with disabilities. While persons with disabilities may attend public primary and secondary schools and have access to higher education, no special provisions are required of educational facilities to accommodate their special needs. Some schools for persons with disabilities, including persons with visual disabilities, received private and limited public funds to provide education and vocational training."[216]

CBM, an international Christian development organisation supports a project that provides educational support for children living with disabilities in Kinshasa,

> "Villages Bondeko is a collection of 15 centres providing educational support for children living with disabilities in Kinshasa in rehabilitation of the deaf, physically and psychosocial disabilities.
>
> The centres have the potential to expand to deal with the high number of children with disabilities in Kinshasa. Plans are in the pipeline to integrate a component dealing with Children with Visual impairments from September 2009.

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[214] UN Committee on Economic, Social and Cultural Rights (CESCR), Consideration of reports submitted by States parties under articles 16 and 17 of the Covenant : Concluding observations of the Committee on Economic, Social and Cultural Rights - Democratic Republic of the Congo, 16 December 2009, E/C.12/COD/CO/4, para 29, http://www.refworld.org/publisher,CESCR,,COD,4ef9fee12,0.html, accessed 03 March 2015

[215] United States Department of State, 2013 Country Reports on Human Rights Practices - Democratic Republic of the Congo, 27 February 2014, http://www.state.gov/j/drl/rls/hrrpt/2013/af/220100.htm, accessed 01 March 2015

[216] United States Department of State, 2013 Country Reports on Human Rights Practices - Democratic Republic of the Congo, 27 February 2014, http://www.state.gov/j/drl/rls/hrrpt/2013/af/220100.htm, accessed 01 March 2015

> The project is also part of a comprehensive disability cluster that is currently being elaborated by various partners."

In December 2010 *CBM* reported that two Members of the European Parliament visited the project in DRC,

> "MEPs Thijs Berman and Michael Gahler first visited the Bondeko Village, which supports 2,127 children with a variety of impairments including hearing, visual, physical, children who have cerebral palsy and learning disabilities.
>
> The MEPs were visibly impressed by the work of the children: "What we see are students who are proud and working on their future. The Congo is a vast country with enormous wealth under the ground in gold, diamond, etc... But the only true wealth is found on earth: it's you [the students]. And you give us a good life lesson" declared Mr Berman.
>
> Both MEPs believed that the redistribution of wealth to persons with disabilities is necessary for the development of the Congo and underlined the responsibility of Europe to "support these efforts where we can"[217]

Handicap International reports that only a fraction of children with disabilities in DRC go to school because of inaccessibility,

> "Only a fraction of children with disabilities in DRC go to school due to discrimination and a lack of accessibility and special education resources. Handicap International works with 12 primary schools in Kinshasa to ensure that children with disabilities are included. The organization trains teachers, improves the accessibility of school buildings, and reaches out to parents in the community to encourage them to send children with disabilities to school."[218]

iii. Water and sanitation

In 2011 the *African Ministers' Council on Water* reported that basic water supply and sanitation needs are immense in DRC and an estimated 50 million (70%) of the population do not have access to safe water, and approximately 80-90% do not have access to improved sanitation,

> "The water and sanitation sector in the Democratic Republic of the Congo (DRC) suffered a great setback during the country's long political crisis through the 1990s and early 2000s. Since then, the sector has started to recover, albeit slowly. Basic water supply and sanitation needs are still immense. Today, an estimated 50 million Congolese—which is 75 percent of the population—do not have access to safe water, and approximately 80-90 percent do not have access to improved sanitation."[219]

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217 CBM, Members of the European Parliament visit a CBM supported project in the DRC, 10 December 2010, http://www.cbm.org/MEPs-visit-CBM-supported-project-in-DR-Congo-290949.php, accessed 04 March 2015

218 Handicap International, Democratic Republic of Congo, http://www.handicap-international.us/democratic_republic_of_congo, accessed 04 March 2015

219 African Ministers' Council on Water, Water Supply and Sanitation in the Democratic Republic of Congo Turning Finance into Services for 2015 and Beyond, 2011, https://www.wsp.org/sites/wsp.org/files/publications/CSO-DRC-En.pdf, accessed 04 March 2015

In January 2011 the *United Nations Environment Programme* (UNEP) reported that the DRC was facing an acute drinking water supply crisis which has had considerable social and public health consequences that that disproportionally affected the poorest sections of society,

> "Africa's most "water-rich" country, the Democratic Republic of the Congo (DRC), is facing an acute drinking water supply crisis. Only an estimated 26 per cent of its population has access to safe drinking water, well below the approximately 60 per cent average for Sub-Saharan Africa. Due to the deteriorated state of its water infrastructure – undermined by years of underinvestment and conflict – and a rapidly growing population, the trend in water supply coverage was until recently in regression. Social and public health consequences of water service breakdown have been considerable. The poorest sections of society have been disproportionately impacted by the decline in service delivery and rising water costs, both in rural areas but increasingly in rapidly urbanizing cities."[220]

In January 2011 *UNEP* stated that "Water sector governance is structurally weak, characterised by a multiplicity of laws and institutions with often overlapping and conflicting mandates. The DRC lacks a clear water policy, a framework water law and a dedicated water ministry to guide and lead sustainable development of the sector."[221]

iv. Shelter

In July 2013 *HelpAge International* reported that many older live in abandoned buildings, markets and railway stations,

> "In the DRC, older people all over the country whether they receive a pension or have insurance are neglected by the government. Older people make up around 3.5% of the country's population. Not all are considered vulnerable, but most definitely do not live in decent conditions due to many reasons, including on-going instability. Older people also lack adequate healthcare, food and housing. Many older people live in abandoned buildings, markets and railway stations, without basic hygiene or sanitation."[222]

In December 2009 the *UN Committee on Economic, Social and Cultural Rights* (CESCR) noted with concern the poor and unhealthy housing conditions and the lack of budget allocations to improve such conditions. CESCR also expressed concern at the situation of more than 300 families who were forcibly evicted their homes in Kinshasa in March 2009,

> "The Committee is concerned that in spite of the poor and unhealthy housing conditions throughout the State party and the demographic explosion in the cities, no budget allocations have been made over the last thirty years to improve the housing conditions of the population and the State party has still not adopted any comprehensive housing policy. The Committee is also concerned about the precarious

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220 United Nations Environment Programme (UNEP), Water Issues in the Democratic Republic of the Congo: Challenges and Opportunities, January 2011, http://postconflict.unep.ch/publications/UNEP_DRC_water.pdf, accessed 04 March 2015

221 United Nations Environment Programme (UNEP), Water Issues in the Democratic Republic of the Congo: Challenges and Opportunities, January 2011, http://postconflict.unep.ch/publications/UNEP_DRC_water.pdf, accessed 04 March 2015

222 HelpAge International, Preventing elder abuse in the Democratic Republic of the Congo, 08 July 2013, http://www.helpage.org/blogs/mireine-bulonza-14438/preventing-elder-abuse-in-the-democratic-republic-of-congo-585/, accessed 04 March 2015

situation of more than 300 families who were forcibly expelled from their homes in the locality of Kasa Vubu in Kinshasa in March 2009 by order of the Land Ministry without having received any adequate compensation or being offered any alternative housing"[223]

In November 2009 the *International Organization for Migration* reported that no system of housing loans exists in DRC but a limited number of homes exist for the elderly in Kinshasa,

> "No system of housing loans exists in the DRC. The government does not provide subsidised housing although a limited number of homes for the elderly can be found in Kinshasa. People returning from abroad will receive no assistance from the government in finding accommodation and need to know that they will need to cover this cost entirely by themselves"[224]

In November 2009 the *IOM* also stated "Elderly people are accommodated in some public homes in Kinshasa and in some provinces in the DRC, although there are not many."[225]

b. Livelihood opportunities

i. Access to labour markets (formal and informal)

[See above Section C.2.a.ii, KINSHASA :Access to services for elderly and people with disabilites; Education]

ii. Access to other opportunities to earn sufficient income to meet minimum standard of living conditions, including self-employment / business opportunities; financial support from private charities, NGOs, etc.

In December 2009 the *UN Committee on Economic, Social and Cultural Rights* (CESCR) expressed its regret that the DRC's provided insufficient information on the situation of persons with disabilities. *CESCR* noted in concern that most adults with disabilities have to resort to begging and their children are excluded from education and health care access,

> "The Committee, while noting the new provisions of the labour code concerning people with disabilities, regrets that insufficient information was provided in the State party report as to the concrete situation of persons with disabilities and the relevant laws which apply to them, including safeguards against abuse and neglect. The Committee notes with concern that in the absence of appropriate social services, most adults with disabilities have to resort to begging and their children are excluded from access to education and health care."[226]

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223 UN Committee on Economic, Social and Cultural Rights (CESCR), Consideration of reports submitted by States parties under articles 16 and 17 of the Covenant : Concluding observations of the Committee on Economic, Social and Cultural Rights - Democratic Republic of the Congo, 16 December 2009, E/C.12/COD/CO/4, para 29, http://www.refworld.org/publisher,CESCR,,COD,4ef9fee12,0.html, accessed 03 March 2015

224 International Organization for Migration, Returning to the Democratic Republic of Congo Country Information, 17 November 2009, http://irrico.belgium.iom.int/images/stories/documents/congo%20edited.pdf, accessed 04 March 2015

225 International Organization for Migration, Returning to the Democratic Republic of Congo Country Information, 17 November 2009, http://irrico.belgium.iom.int/images/stories/documents/congo%20edited.pdf, accessed 04 March 2015

226 UN Committee on Economic, Social and Cultural Rights (CESCR), Consideration of reports submitted by States parties under articles 16 and 17 of the Covenant : Concluding observations of the Committee on Economic, Social and Cultural Rights - Democratic Republic of the Congo, 16 December 2009, E/C.12/COD/CO/4, para 31, http://www.refworld.org/publisher,CESCR,,COD,4ef9fee12,0.html,

In March 2012 *Inter Press Service* reported that there have been several public and private sector initiatives to try to address the challenges faced by people with disabilities,

> "There are several initiatives – both public and private – to try to address the challenges faced by this community.
>
> "We set up the National Training Institute for People with Disabilities more than three years ago, where they can learn appropriate technology for the production of soap, perfume, improved bread and so on. This will help them to care for themselves," said Jean Etienne Makila, the institute's director general, who is himself disabled."[227]
>
> "If I couldn't fend for myself selling the bread I make at the market, I wouldn't be able to provide food for my children," Madeleine Murakupa, a disabled mother of two, told IPS. "It's rare to find people with disabilities who are in business."
>
> According to Makila, there is also a "Women, Families and Children Living with Disabilities Unit" in Kinshasa, which provides training and support for women and young girls to strengthen their self- esteem and livelihood prospects.
>
> The Catholic church also runs several projects. Five years ago, the Diocese of Kikwit set up two schools for the disabled. One, called "Bo ta mona" – meaning, "they will see" in the local language, Kikongo – teaches blind people to read and write Braille. The other, "Bo ta tuba" – "they will speak" – is a school for people with hearing or speech disabilities.
>
> But observers feel that despite these efforts, the situation for people with disabilities remains very worrying given their large numbers across the country.[228]

Handicap International supports a programme to enable people living with disabilities in Kinshasa and Kananga to achieve independence and fully participate in all aspects of life,

> "The goal of TEAM CONGO (Training, Economic Empowerment, Assistive Technology and Medical/Physical Rehabilitation Services) is to enable people with disabilities, especially women and girls, living in Kinshasa and Kananga to achieve independence and fully participate in all aspects of life. The project will contribute to both the quality and quantity of assistive devices and rehabilitation services available to people with disabilities."[229]

iii. Availability and access to social security and state pensions

Pension Watch, an arm of *HelpAge International* reports that there is no social pension

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accessed 03 March 2015

227 Inter Press Service, Rights- DR Congo: Disabled Left to Fend for Themselves, 08 March 2012, http://www.ipsnews.net/2012/03/rights-dr-congo-disabled-left-to-fend-for-themselves/, accessed 03 March 2015

228 Inter Press Service, Rights- DR Congo: Disabled Left to Fend for Themselves, 08 March 2012, http://www.ipsnews.net/2012/03/rights-dr-congo-disabled-left-to-fend-for-themselves/, accessed 03 March 2015

229 Handicap International, Democratic Republic of Congo, http://www.handicap-international.us/democratic_republic_of_congo, accessed 04 March 2015

system in DRC.[230]

In September 2010 *BBC* reported that although life expectancy in DRC remains below 50, the country has many elderly citizens. The *BBC* reported that only a small minority receive a pension however,

> "Although life expectancy in the Democratic Republic of Congo remains below 50, the country does have many elderly citizens. But the turmoil in national institutions after decades of mismanagement and conflict means that only a small minority of them receive a pension."[231]

In 2009 the *UN Committee on Economic, Social and Cultural Rights* noted with concern that insufficient measures have been taken to address the malfunctioning social security system,

> "The Committee notes with concern that although the State party recognizes the malfunctioning and extremely limited coverage of the social security system, insufficient measures have been taken to address the situation, as reflected in the very slow process of adoption of a social security code and the lack of concrete measures taken to provide protection and assistance to the most disadvantaged and marginalized groups."[232]

In November 2009 the *International Organization for Migration* reported that pensions are not common in the DRC,

> "Pensions are not common in the DRC. On paper, Congolese government officials are offered access to pension plans. Larger companies used to pay pensions to retired workers, but the social security scheme is now ineffective and mainly offers advice and counselling"[233]

In November 2009 the *IOM* stated "For people returning from abroad, pensions can be channelled through the Ministry of Labour and Social Security, provided that some arrangement or agreement is made before return. The Ministry can also be contacted for specialised advice on mechanisms and structures for channelling pension funds. But, there is no pension or financial assistance specifically for returnees, nor are there employment projects for returnees".[234]

c. Social support mechanisms

i. Role of extended families /clans /tribal networks in providing support

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230 Pension Watch, Country Fact Sheet, Congo, the Democratic Republic of Congo, http://www.pension-watch.net/country-fact-file/congo-the-democratic-republic-of-the/, accessed 04 March 2015

231 BBC, Lost pension hopes in DR Congo, 14 September 2010, http://www.bbc.com/news/world-africa-11288154, accessed 04 March 2015

232 UN Committee on Economic, Social and Cultural Rights (CESCR), Consideration of reports submitted by States parties under articles 16 and 17 of the Covenant : Concluding observations of the Committee on Economic, Social and Cultural Rights - Democratic Republic of the Congo, 16 December 2009, E/C.12/COD/CO/4, para 26, http://www.refworld.org/publisher,CESCR,,COD,4ef9fee12,0.html, accessed 03 March 2015

233 International Organization for Migration, Returning to the Democratic Republic of Congo Country Information, 17 November 2009, http://irrico.belgium.iom.int/images/stories/documents/congo%20edited.pdf, accessed 04 March 2015

234 International Organization for Migration, Returning to the Democratic Republic of Congo Country Information, 17 November 2009, http://irrico.belgium.iom.int/images/stories/documents/congo%20edited.pdf, accessed 04 March 2015

Hope of Congo, a Congolese NGO reports that many children with a disability are abandoned by their families,

> "Children living with disability in Congo are grossly undeserved population; many children with disability are abandoned by their families, disconnected from society and cannot benefit from education, given the lack of specialised services."[235]

ii. Charities, NGOs and other organizations (including religious groups/organizations) that provide support to elderly persons and persons with disabilities

In December 2014 the *International Committee of the Red Cross* reported that 5,000 patients have been fitted with orthopaedic devices since the start of its physical rehabilitation programme in the Democratic Republic of the Congo.[236] The programme "aims to help people with physical disabilities, primarily the victims – civilian or military – of armed conflict and other situations of violence who are in need of an artificial limb or orthotic device."[237]

Present in the Democratic Republic of Congo (DRC) since 1995, *Handicap International* "provides rehabilitation to people with disabilities and victims of violence, promotes the inclusion of children with disabilities in schools, works to prevent disabilities in babies, and provides logistics support to other NGOs."[238]

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235 Hope of Congo, Areas of Work: Children with Disability, http://www.hopeofcongo.org/areas_of_work.html, accessed 04 March 2015

236 International Committee of the Red Cross, Democratic Republic of the Congo: 5,000 people with disabilities cared for since 1998, 02 December 2014, https://www.icrc.org/en/document/democratic-republic-congo-5000-people-disabilities-cared-1998#.VPX-j_msXWQ, accessed 03 March 2015

237 International Committee of the Red Cross, Democratic Republic of the Congo: 5,000 people with disabilities cared for since 1998, 02 December 2014, https://www.icrc.org/en/document/democratic-republic-congo-5000-people-disabilities-cared-1998#.VPX-j_msXWQ, accessed 03 March 2015

238 Handicap International, Democratic Republic of Congo, http://www.handicap-international.us/democratic_republic_of_congo, accessed 04 March 2015