

# HANDICAP INTERNATIONAL



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## 6-Month Activity Report and Statistical Fact Sheet JORDAN – Emergency Response Division



**A critical humanitarian situation**

According to the latest figures on behalf of UNHCR and UNOCHA (October 2013), 4.25 million persons are internally displaced (IDPs) within Syria and more than 6.8 million are affected by the crisis. 2.16 million refugees have fled to host countries. The current response is far from adequate in addressing the most urgent needs, as these are growing at increasing rates by the day.

Amongst those affected by the conflict, an estimated 18%<sup>1</sup> are in an alarming situation of vulnerability in terms of protection, access to basic services, and coverage of their specific needs. Persons with disabilities, and/or chronic diseases, older persons and children who are heads of households are in critical situations as they experience difficulties in accessing already scarce humanitarian resources.



**Emergency Intervention Map**

The situation of persons with injuries is also at risk. Those having benefited from emergency healthcare in Syria or host countries face the unavailability or lack of access to post-surgery services. This absence of care is highly likely to result in further impairments, creating a devastating impact on the individuals ability to adapt to a challenging environment, and to both partake in a community and care for themselves and in the longrun.

**Summary of Handicap International’s mission**

HI’s Emergency Response Division is present in Jordan and Lebanon since May 2012 and in North Syria since January 2013, and is currently supported by the following bodies: ECHO (European Commission /Humanitarian Aid and Civil Protection), La Région Rhône-Alpes, Le Ministère des Affaires Etrangères du Grand-Duché de Luxembourg, OCHA/ The Syria Emergency Response Fund, Swiss Solidarity, The Disasters Emergency Committee (DEC), The Foreign Affairs, Trade and Development Canada, The Swiss Agency for Development and Cooperation (SDC), The World Food Programme (WFP), among others. With over 330 emergency team members in the region, Handicap International has reached over 56,000 beneficiaries through September.

HI initial intervention aimed at supporting persons with injuries and other vulnerable groups (including persons with disabilities, older persons, among others). HI continues to be one of the few organizations explicitly addressing the basic and specific needs of these groups through community outreach, and

through collaborating with community representatives, local stakeholders, authorities, and other implementing organizations in the field.

HI is working in Northern Syria with a tactful focus on acute emergency health activities (provision of rehabilitation care and psychosocial support). Additional partnerships with several Syrian organizations allow HI to support and reinforce assistance elsewhere inside Syria.

Simultaneously, HI started a first round of **mine risk education** activities in Jordan addressing awareness of more than **13,000 people at risk** (refugees).

**Presence in the region**

**Handicap International has been present in the Middle East since 1987. The organization currently operates in 7 countries in the region: Egypt, Iraq, Jordan, Lebanon, Syria, the Palestinian Territories and Yemen through development and emergency programs.**

Handicap International’s operations are adapted to each country’s specific situation. These operations are therefore just as likely to include mine clearance, capacity building of Disabled People Organizations, and mine risk education programs as rehabilitation initiatives. The organization also provides support to the disability movement at the regional, national, and local levels, and provides emergency relief in contexts of conflict. In a region beset by chronic crises and political instability, Handicap International promotes the participation of people with disabilities in the social and political life of the region, and supports access for all to appropriate services, whatever the context.



<sup>1</sup> This percentage is the average for refugees registered with UNHCR in neighboring countries and excludes older persons. This estimate goes up to 20% to 25% if older persons with specific needs are included.

**CONTEXT:**

The first 6 months of 2013 saw an unprecedented surge in migration from Syria into Jordan with the refugee population effectively growing from 100,000 to 500,000. As a result, humanitarian organizations were forced to respond to circumstances that worst-case contingency plans of any INGOs or UN Agencies seldom foresaw. Arrival camps were seeing anywhere from 1,000-5,000 new arrivals per day through the majority of these months as INGOs attempted to scale up activities to accommodate while funds were often lacking. The Za’atri Refugee Camp peaked at just over 200,000 registered refugees in late April while host communities were absorbing at least 60% of the arrivals (this proportion has now risen to roughly 75%). The difficulties in reaching these dispersed populations forced INGOs to expend a great deal of resources on outreach efforts, if they were able to reach out to urban refugees at all.



During these 6-months, HI saw a great deal of growth in their activities. From the completion of first phase (ending 15 November 2012), Phase Two efforts (through 15 June 2013) were focused on scaling up existing activities within areas of intervention that had so far proven effective. In addition, after identifying other gaps and pinpointing areas of potential added value, the HI Jordan team implemented further activities with the help of increased funding.

**HI JORDAN PROGRAMS:**

Drawing on long-standing crisis response expertise on behalf of Handicap International’s Emergency Response Division, the Jordan team operates in the governorates of Irbid, Mafrq, Amman, and Zarqa. Disability and Vulnerability Focal Points (DVFP), through fixed points and mobile teams, are operational in the cities of Irbid, Mafrq, and Zarqa, and within the Za’atri Camp. Also, HI is currently opening fixed points in the newly established Azraq Camp. The outreach strategy implemented by HI enables the most vulnerable persons to be identified in a wide geographical range, stretching far into communities where many would otherwise be left without care. HI has built a privileged relation with the most vulnerable persons through the implementation of activities at hospital, community and camp level in alignment with the following 5 pillars of intervention:

**DVFP mechanism**

- ✓ Targeting of those persons dealing with specific vulnerabilities, including but not limited to injury, disability, mobility and accessibility
- ✓ Establishment of a community based identification, assessment and referral systems
- ✓ Provision of psychosocial support to vulnerable persons, their families and communities
- ✓ Provision of assistive and mobility devices, and specific needs items

**Health care**

- ✓ Provision of advices and rehabilitation care to **2,198 vulnerable persons** and their families (**6,242 sessions**)
- ✓ Provision of **4,426 assistive and mobility devices, and specific needs items to 1,737 beneficiaries**
- ✓ Provision of psychosocial care to vulnerable persons, their families and communities
- ✓ Provision of **170 prosthetics and orthotics**
- ✓ Support to health facilities with training, donations and human resources according to their needs

**Coverage of urgent Basic Needs**

- ✓ Referral and follow up of those identified within DVFP outreach to basic needs assistance
- ✓ Phase 3 (following June 2013) scales up into Cash Transfer Programming at multiple levels

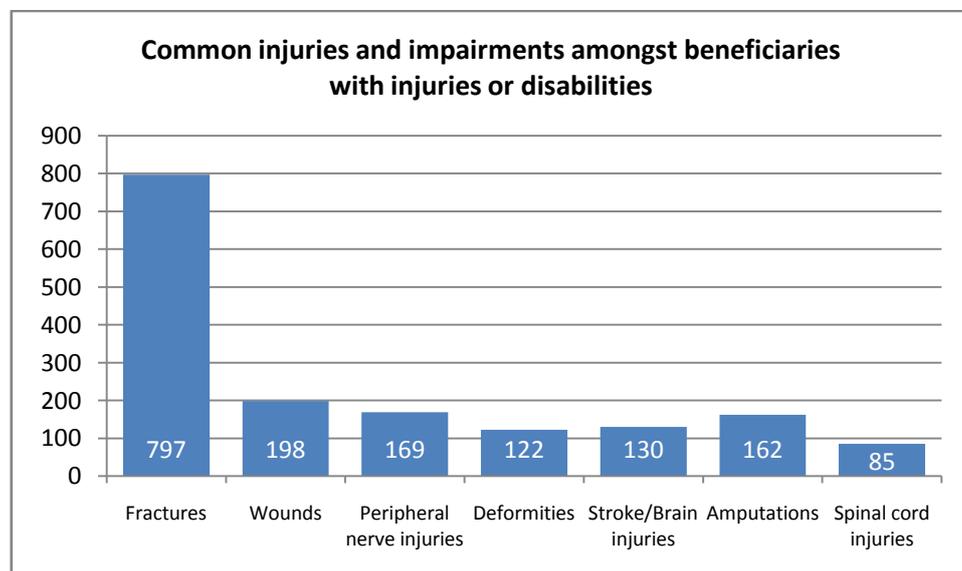
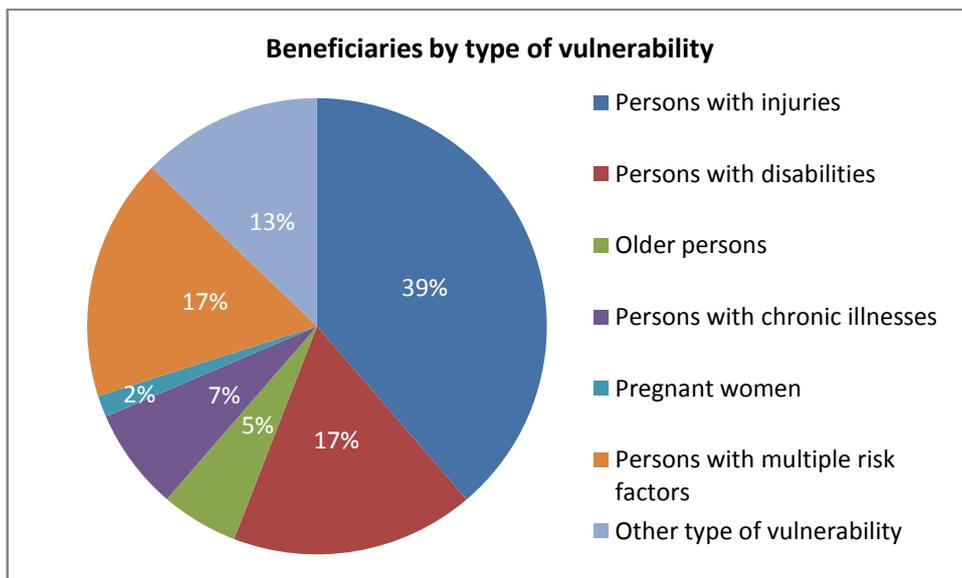
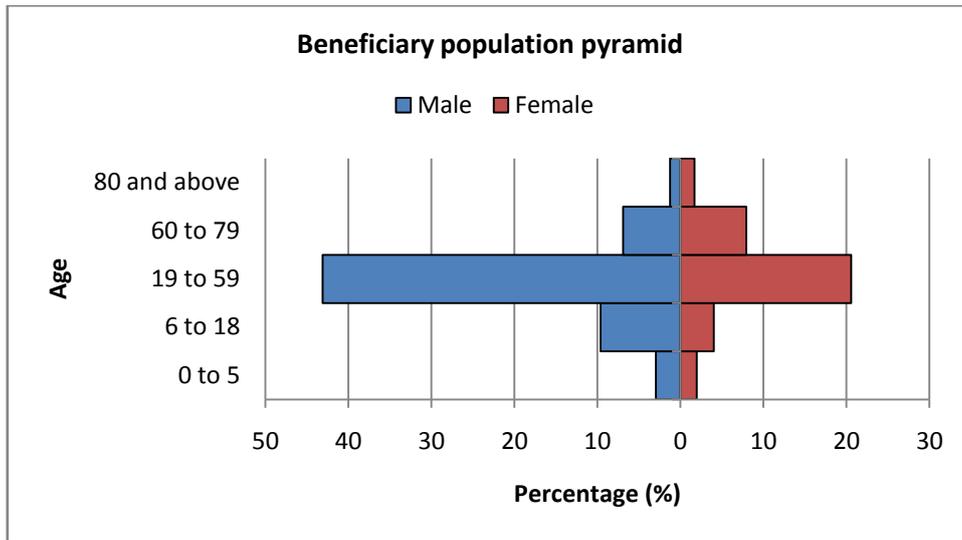
**Inclusion and accessibility**

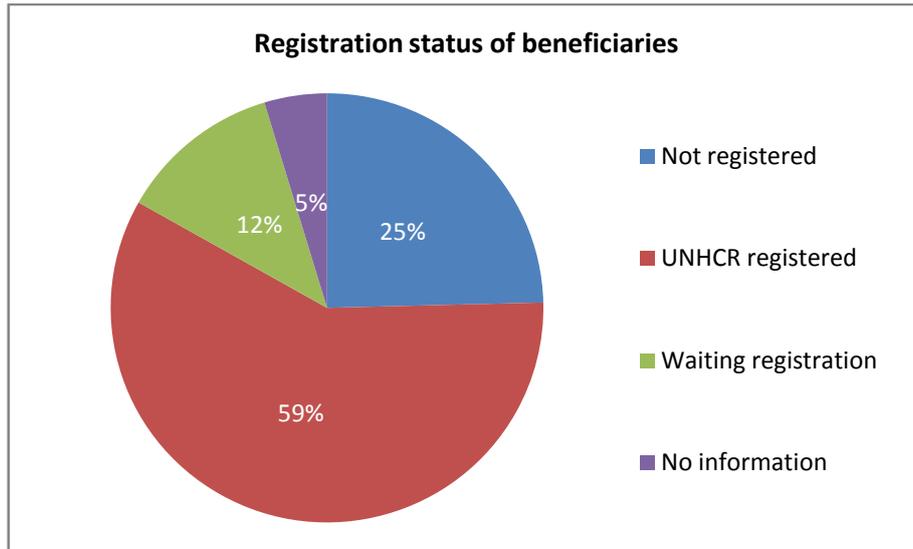
- ✓ Trainings on accessibility, inclusion and protection reached **243 humanitarian partners and 12 from Syria**.
- ✓ Assessment and advices on accessibility were provided by a team composed of 2 OTs to the other actors to improve accessibility of their facilities
- ✓ Modification of Za’atri registration area to increase accessibility, and provision of 150 shower benches in the wash facilities

**Risk Education**

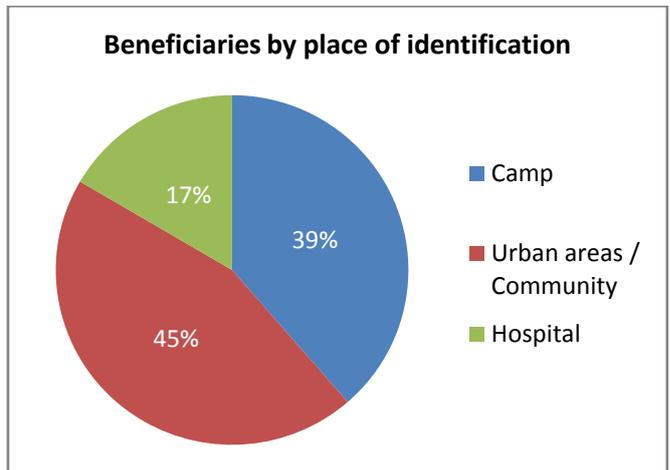
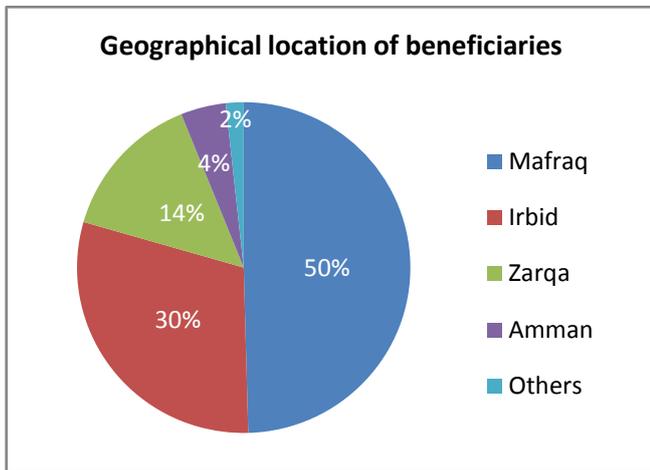
- ✓ Education on risks of Explosive Remnants of War (ERW) and urban conflict for refugees in advance of returning to Syria

**WHO WERE HANDICAP INTERNATIONAL'S BENEFICIARIES IN JORDAN ?**

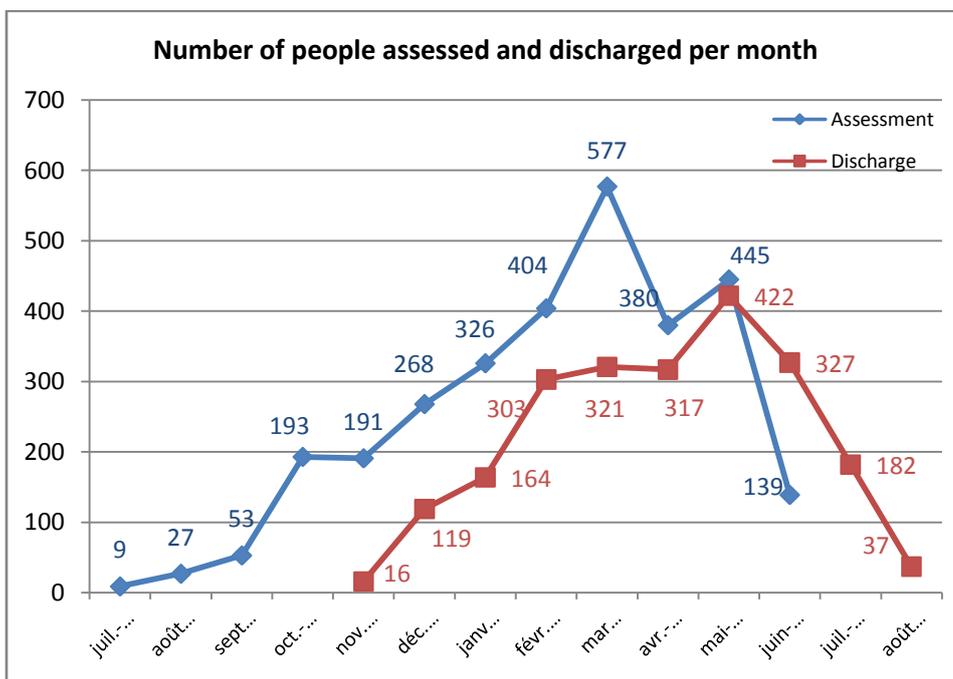




**HOW WERE HANDICAP INTERNATIONAL'S BENEFICIARIES IDENTIFIED?**



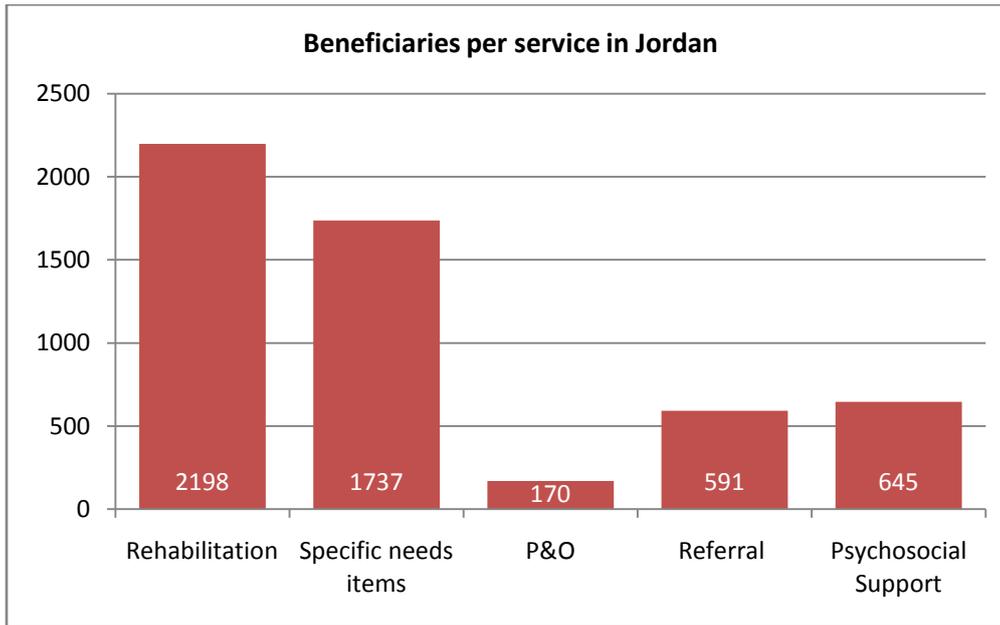
An average of **251 people** were assessed per month, and an average of **221 people** were discharged per month.



Persons included in the graph who were assessed from July to September 2012 were identified during Phase 1, but received support during Phase 2 of HI's intervention.

The support provided to persons discharged between July and August 2013 included the donation of items coming from stocks of the second phase of HI's response. They are therefore counted as beneficiaries under Phase 2.

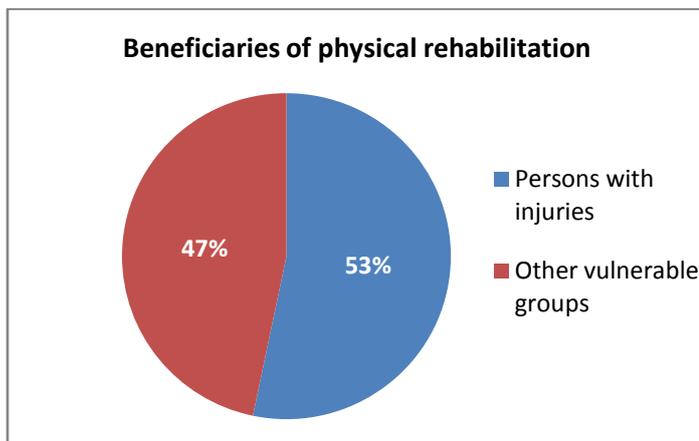
**HANDICAP INTERNATIONAL'S ACTIVITIES IN JORDAN**



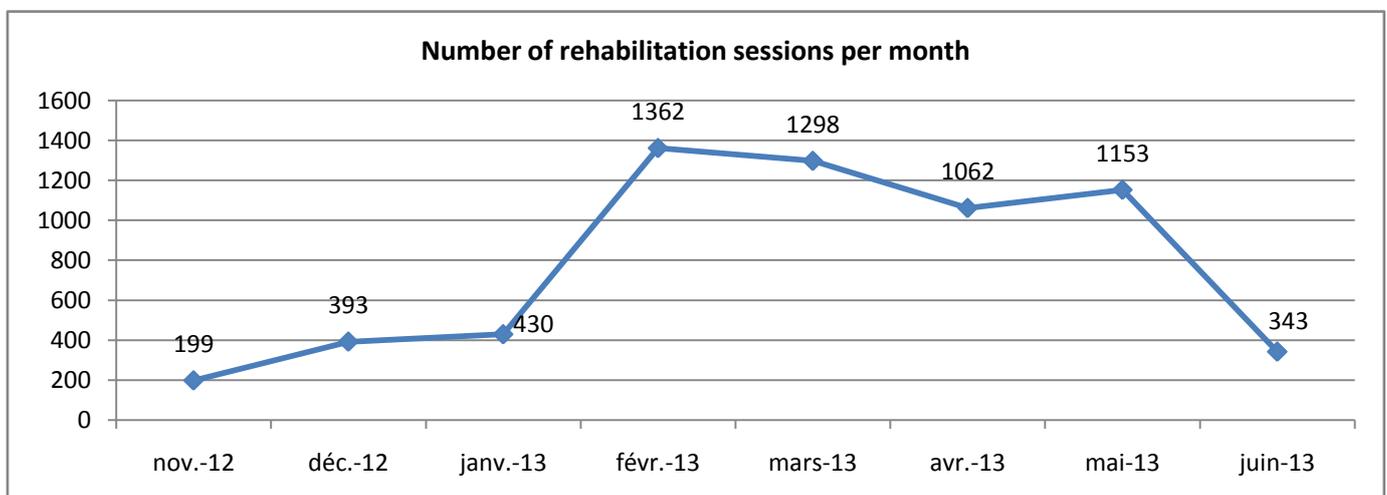
The needs of Handicap International's target beneficiaries are multi-layered, with one need often linked to others. To provide beneficiaries with the most comprehensive response to their needs, more than one service is more often than not provided to them.

Beneficiaries counted under one service in the graph can therefore be counted again under another service.

**Physical Rehabilitation**

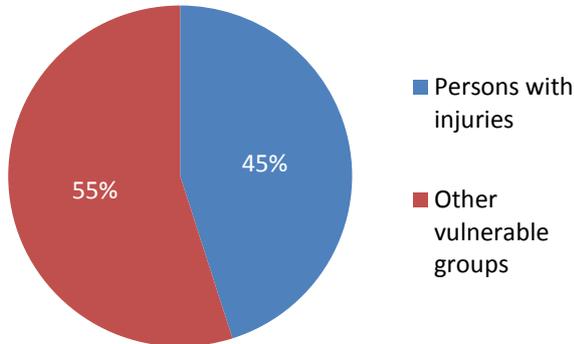


FAST STATS <i>Rehabilitation</i>	
Beneficiaries reached	2,198
Rehabilitation sessions conducted	6,242
Average number of rehabilitation sessions conducted per month	1,040
Average number of sessions per beneficiary	3

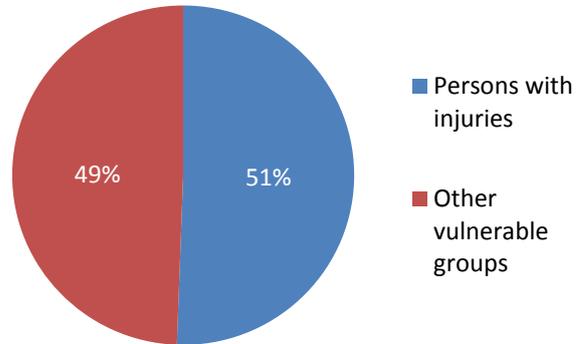


**Donations**

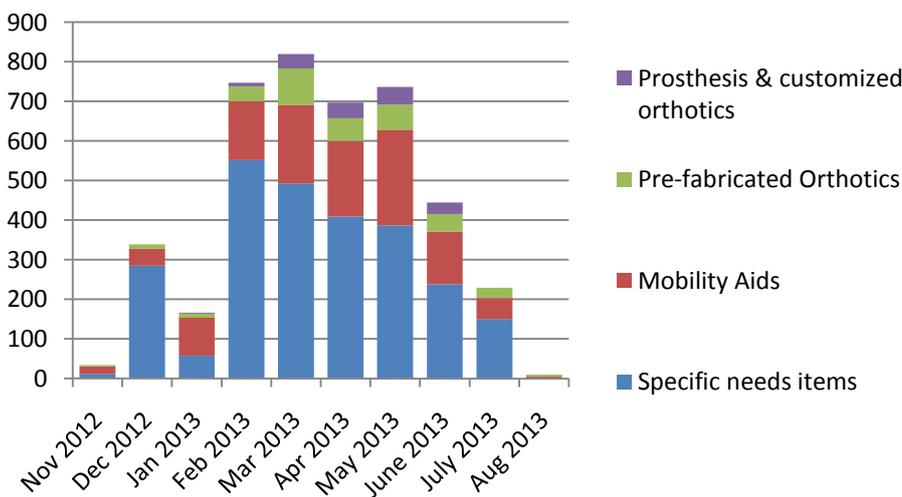
**Beneficiaries of items responding to specific needs and mobility aids**



**Beneficiaries of prosthetic and orthotic appliances**



**Number of items distributed per month by type**

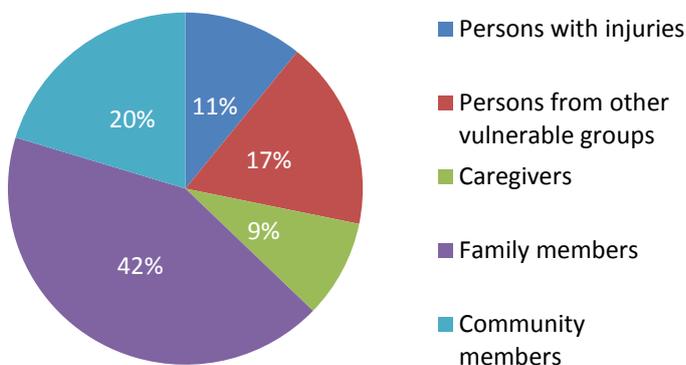


**FAST STATS  
Donations**

Beneficiaries reached	1,737
Number of items donated	4,221
Average number of items donated per month	703
Average number of items per beneficiary	2.4

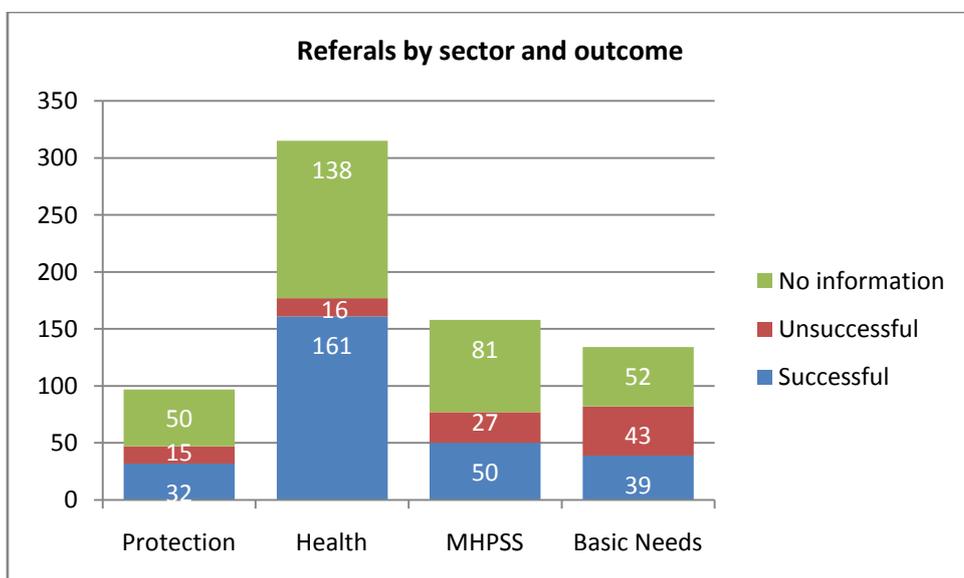
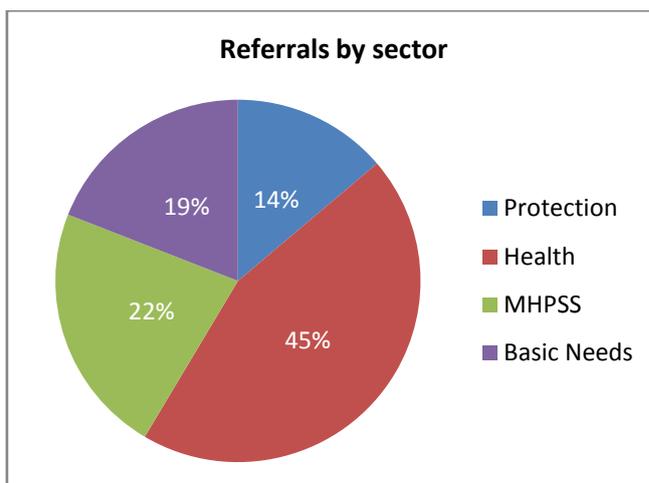
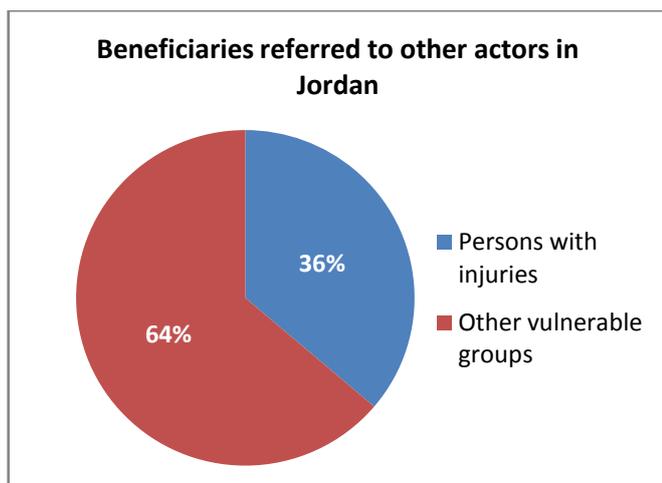
**Psychosocial support activities**

**Beneficiaries of psychosocial support activities**



Psychosocial support was provided through **awareness and orientation sessions** where information on existing services and mental health support were provided; and through **psychosocial support groups** whose aim was to enforce the coping mechanisms of vulnerable individuals and their families through psychosocial support on the intrapersonal and interpersonal/familial levels

**Referrals**



Of all the referrals done, **only 40% were successful**. However, this percentage does not necessarily reflect the actual number of beneficiaries who received support from the actors to whom they were referred. This **low success rate is mainly due to the lack of feedback from organizations accepting referrals**. Despite efforts by HI's social workers to follow-up referrals with other actors, no feedback has been provided for 46% of the referrals.

**Accessibility and Inclusion**

An estimated **12,375 persons have improved access to camp facilities** after accessibility modifications were completed by Handicap International and by other actors trained by Handicap International.

Handicap International trained 47 stakeholders on accessibility and inclusion.

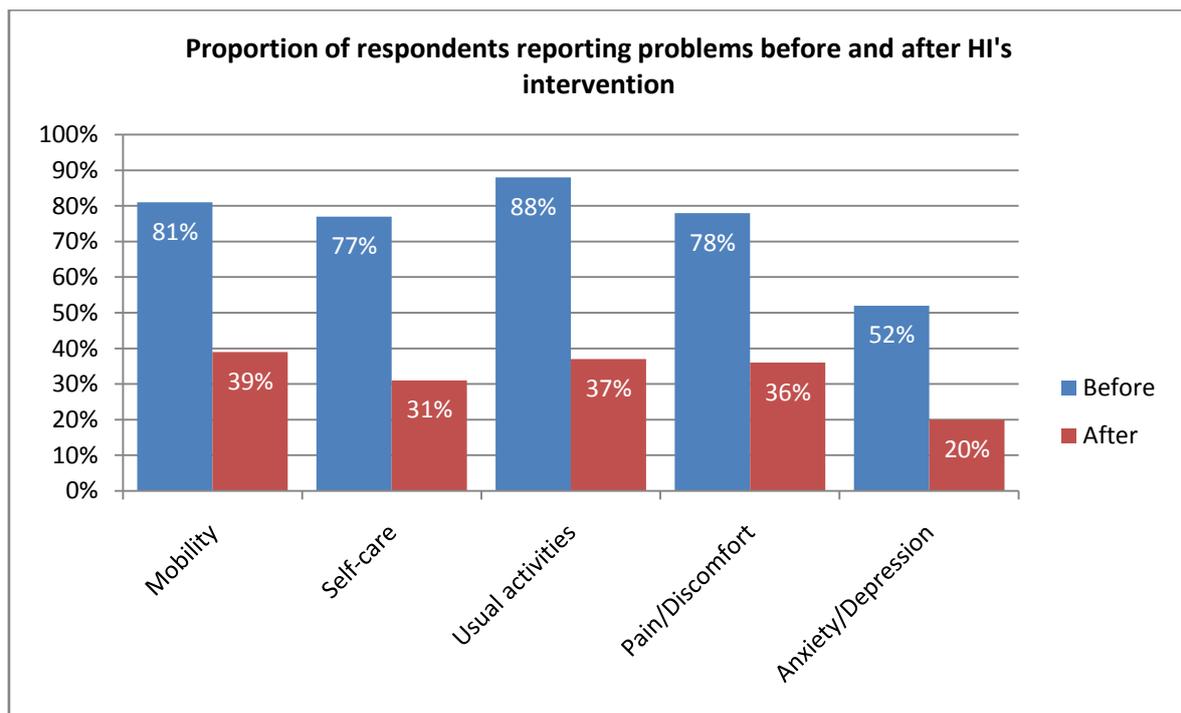
Modifications	Handicap International	Other actors
Toilet cubicle with separate stalls for men and women	3	162
Shower benches in accessible stalls	150	-
Water points	-	42
Entrances and pathways	30	4
Beds and waiting benches for arrival and registration areas	56	-
<b>TOTAL ACCESSIBILITY MODIFICATIONS</b>	<b>239</b>	<b>208</b>

**WHAT WAS THE IMPACT OF HANDICAP INTERNATIONAL'S INTERVENTION?**

Handicap International's intervention has contributed to **improving the conditions for the most vulnerable Syrian refugees** in Jordan:

- 83% said that HI support helped them **cope better with their situation**.
- 75% said that they have **better access to additional resources** since HI's intervention. These additional resources may include relief, services, referrals, a broader support system, etc.
- 81% said that since the intervention of HI, they are **better included in the community** they are living in.
- 83% said that since the intervention of HI, they are **better included and taken care of by their family**.
- 73% of family members said that HI support helped them **take better care of the vulnerable person in their family**.
- 67% of family members said that they feel **an improvement in their family member's situation**.
- 96% report an **improvement in their health status**.

Beneficiaries who received physical rehabilitation care also reported **tremendous improvements in their quality of life**, with significant changes in their mobility, their ability to take care of themselves, their ability to conduct day-to-day activities, levels of pain or discomfort, and anxiety or depression.



## LOOKING FORWARD:

In response to the Syria Crisis over the past 18 months, Handicap International has effectively built its largest regional program since the establishment of its Emergency Response Division. Through the first 6 months of 2013 in particular, HI capitalized on the process of creating a foundation of rehabilitation and psychosocial activities for the most vulnerable persons in geographical areas of intervention in and around Syria. With the foresight of capitalizing on HI's privileged relationships with Syrian refugees, partner organizations, and host communities and governments, HI aimed to expand its direct intervention beyond Specific Needs services and into the provision of Basic Needs direct services to those beneficiaries already identified through the DVFP mechanism. Upcoming **Cash Transfer Programming** aims to benefit at least **1,200 families** during its pilot phase before scaling up significantly thereafter.



To welcome the expected opening of the new, and much anticipated Azraq Camp, HI is planning to launch activities here along with the establishment of a new field site in Azraq. HI outreach staff will be stationed at new arrival registration points here to screen all arriving refugees with a functional limitations (difficulty to hear, to move, to speak etc), to accompany them through the registration process and to shelter the most vulnerable ones with a protection risk (unaccompanied older person, person with disabilities as caretaker for children, etc). HI referral system to internal care and external aid will reach all Azraq Camp arriving refugees.

On top of scaling up activities, in coming months, HI Jordan will aim to: 1) increase the involvement of Jordanian beneficiaries in activities and, 2) further developing strategic partnerships with local actors. With long-term considerations, HI fully understands that developing the capacities of local partner actors will assure the longevity of quality care for vulnerable persons, including persons with disabilities.

Evolving tensions within Syria, combined with the increased strain places on the Jordanian people and their economy, make for a cloudy forecast in months to come. HI Jordan is working hard to incessantly update contingency plans as related to surges in needs in the future.

As an increasingly sizable actor within the proportions of the Jordan humanitarian community, HI commitment to existing and future beneficiaries and responsibility to deliver is growing by the day. HI will continue to do all in its ability to both capitalize on existing resources and pursue further resources to respond to the vital needs of the most vulnerable persons.

*Handicap International's Emergency Intervention in response to the Syria Crisis has previously been supported, or is currently supported in Jordan by:*



Humanitarian Aid and Civil Protection



Affaires étrangères, Commerce et Développement Canada

Foreign Affairs, Trade and Development Canada



Auswärtiges Amt



Chaîne du Bonheur | Glückskette | Swiss Solidarity |



DISASTERS EMERGENCY COMMITTEE

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