Lessons learned

From attending learning sessions to removing barriers in settlements of internally displaced persons

Syrian crisis response

June 2024

LL 25-6

Syrian Context

The Syrian crisis is a protracted humanitarian crisis in which persons with disabilities continue to face many barriers to access and meaningfully participate in humanitarian assistance at agency, family and community level. There are three regions in Syria that are administered by different authorities. The humanitarian coordination mechanism adapts to each context. The following practice was collected from the Syrian context.

Background

In 2023, Humanity & Inclusion (HI) opened a call to receive applications from protection actors to join learning sessions over three days. The proposed sessions combined a [modular training on disability-inclusive humanitarian programming](#) with a Review, Adapt, Action and Learning laboratory (RAAL Lab) approach. This RAAL Lab approach utilizes a collective learning experience through practice and real-time adaptation of tools used by the participating organisations. It is a capacity strengthening initiative that uses and contextualizes the Disability Reference Group (DRG) learning [modules](#) that are part of the Introduction to disability-inclusive humanitarian action training package. The content of the training, the DRG modules, are evidence-based and were adapted according to the needs and interest of the participating organisations and contextualised by sector and geography, including language.

This approach also engages organisations of persons with disabilities or representatives of persons with disabilities as co-facilitators, enhancing the understanding of the disability experience, barriers and exclusion. The laboratory, or "lab" portion of the training allows participants to "experiment" with what they have learned and apply it in real time to gain a sense of how they can apply it when they return to their organisations. This approach also has a very strong follow up component to provide tailored support post-RAAL Lab. It ensures that any challenges that arise can be addressed and that organisations can be more successful in adapting their tools and creating change in their structures to be more disability inclusive.

More than 60 organisations applied to attend, and 72 participants from 36 organisations were selected to participate in five RAAL Labs. Participants were selected based on their positions, current knowledge and interest in making their organisations and programs more inclusive of persons with disabilities. After the three-day learning and lab sessions ended, HI followed up with the organisations and provided tailored support for up to six months.

This was provided to back up organisations when taking their first steps towards disability-inclusive programming as per their action plans, developed at the end of the RAAL Lab. HI engaged with them to document promising practices and to better understand how the organisations were able to advance toward disability-inclusive programming, applying what they had learned during the RAAL Lab. The aim of documenting the promising practices is to encourage learning between agencies from good initiatives on the ground rather than merely learning and sharing theoretical concepts.

How the practice developed

This practice was collected from an international organization working on the Syrian crisis response in late 2023 and early 2024. This organization attended a Disability Inclusion in Humanitarian Action RAAL Lab in 2023. The participants who attended the RAAL Lab considered the session to be useful for other members of staff who were unable to attend. They decided to internally conduct their own shortened version of the RAAL Lab, similar to the session led by HI. The aim was to propagate the knowledge gained during the RAAL Lab, using the DRG modules and the skills acquired to adapt tools to become more disability inclusive. The first internal RAAL Lab targeted health and protection colleagues. The participants provided a second internal RAAL Lab session to field team staff at camp level, including community mobilizers. The feedback from attendees highlighted the participatory nature of the learning session. Conveners of the internal RAAL Labs provided participants with all the resources they'd received during the RAAL Lab session provided by HI.

An outcome of the HI RAAL Lab session was that all the trainees became promoters for the inclusion of persons with disabilities within their roles. This decision to deliver was a common feature between participants from many of the organisations that had attended the RAAL Labs, who chose to deliver the RAAL Lab to other colleagues.

The organisation provides services and manages camps in Syria for internally displaced people. After the RAAL Lab, the organisation identified and removed barriers faced by persons with disabilities in the camp. The organisation conducted a simple accessibility assessment of their facilities where they provide services. Environmental barriers, mainly physical barriers that exist within the camp, were identified by the team. They adapted facilities by removing these physical barriers, e.g., barriers in latrines. Since then, wheelchair users face significantly less barriers to access sanitation facilities. Prior to attending the RAAL Lab, staff at the organisation collected data using the Washington Group Questions. However, they were not collecting data on protection threats, risks and

what challenges persons with disabilities face inside the camp, including gaps and needs in available services. Since attending the RAAL Lab, organization representatives started to engage more with persons with disabilities directly, through meaningful participation, to understand their needs. To address the lack of information further about the specific needs of persons with disabilities in the camp, they created an assessment survey tool inclusive of the needs of persons with disabilities.

The most significant changes include

1. All the staff who attended their internal RAAL Lab session have been sensitised to disability inclusion and are aware and more confident about a wider range of actions they can take to become more disability inclusive in their programming.

2. They also promote disability-inclusive programming among their colleagues.

3. The delivery modalities at their health and protection facilities and latrines in the camps have become more accessible.

4. The monitoring and evaluation staff in the organization are more aware of how to make their tools more disability inclusive.

Key influencing factors and drivers for change

1. The organisation supported change towards disability-inclusive humanitarian programming.

2. This was driven by a mandate to become more disability inclusive and target persons with disabilities in their programs and services.

3. The managers in the organisation support the introduction of new ideas and concepts to achieve better disability inclusion.

4. The culture of the organisation allowed for this type of change to occur.

5. This is supported by the organisations aim to welcome and include all communities.

Recommendations to facilitate the replication of this practice

1. Support from upper management can be helpful in facilitating change. As an example, approaching your manager and having a meeting to explain what type of change you would like to make and how you aim to achieve this – with what resources you need - can lead to more successful outcomes.

2. When training staff to become more disability inclusive, it is important to also provide justifications on the importance of disability inclusion. Attitude changes about why it is important makes a significant difference in uptake and implementation of training.

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Illustration of six persons in a camp for internally displaced persons, four persons with and without disabilities are sitting down in a tent and are giving their opinion to a fifth person on the accessibility of the location. Next to them, there is an accessible bathroom, and a wheelchair user is using it.

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The collection of case studies was a part of the 'From Guidelines to Action (FG2A)' project, supporting the operationalization and localization of IASC Guidelines on inclusion of persons with disabilities in humanitarian action, funded by ECHO and the Center for Disaster Philanthropy.

The eight case studies come from protection and food security humanitarian organizations who are working on the Syria and Somalia responses. These organizations participated in Review, Adapt, Action and Learning (RAAL) laboratories on how to make food security or protection programming more disability inclusive. The RAAL Lab is a capacity strengthening initiative and was used in combination with the adapted version of the DRG Learning modules, which are designed to operationalize the IASC guidelines on disability inclusion.

The case studies demonstrate how humanitarian tools and/or operational practices were adapted to become more disability-inclusive.

We hope these case studies will contribute towards fostering inter-agency learning and enhance disability inclusive practices in humanitarian action. We would like to thank the participating organizations for their input and willingness to engage in this process. Please note that for reasons of security the names of organizations from some of the case studies have not been included.

Find out more by contacting us at inclusion@hi.org