

Al-Jufainah Camp Understanding the Gaps and Addressing the Needs of People with Disability

Marib - Yemen





Page 2 of 40 March 2025



CONTENTS

KEY FINDINGS	4
METHODOLOGY	8
LIMITATIONS	10
CONTEXT	11
TYPE OF DISABILITY	13
DISTRIBUTION OF MOTOR DISABILITY TYPES	14
PRIMARY REASONS FOR DISABILITY	15
SPECIALIST DIAGNOSIS FOR DISABILITY TYPES	17
PREVALENCE OF OFFICIAL DISABILITY REPORTING	18
ASSISTIVE DEVICES NEEDED	19
NEED FOR DAILY PERSONAL ASSISTANCE	21
EDUCATION LEVELS AMONG PEOPLE WITH DISABILITIES	22
CURRENT EMPLOYMENT STATUS	23
TYPES OF EMPLOYMENT	24
JOB SEARCH STATUS	26
REGULAR HEALTHCARE ACCESS	27
TYPES OF HEALTHCARE NEEDED REGULARLY	29
CHALLENGES IN ACCESSING HEALTHCARE	31
REASONS FOR INACCESSIBILITY TO HEALTHCARE	32
HEALTHCARE AND NUTRITION SERVICES RECEIVED AT HEALTH CENTER	34
TYPE OF SERVICES RECEIVED FROM THE PROSTHETICS AND REHABILITATION CENTER	35
RECOMMENDATION	37



KEY FINDINGS

- The report highlights the significant prevalence of disabilities in Al-Jufainah Camp, with motor disabilities being the most common, affecting 57% of participants overall, including 63% of males and 38% of females. Intellectual and mental disabilities follow, reported by 17% of participants, with higher rates among females (24%) than males (16%). Visual disabilities affect 14% of the population, hearing disabilities impact 7%, and speech and communication disorders are reported by 5%. Among residents, motor disabilities are particularly prevalent (71%), while 29% report intellectual and mental disabilities. Decision-makers must allocate resources strategically and implement inclusive, gender-sensitive programs to address the diverse needs of the population effectively.
- The key finding highlights the diverse distribution of motor disability types in the camp, with muscle atrophy being the most prevalent (32%), followed by paralysis/partial paralysis (25%), motor impairments such as hand and foot drop (24%), and limb amputation (20%). Variations exist across gender, with notable differences in the prevalence of specific disabilities. Decision-makers should prioritize tailored interventions addressing these motor disabilities, such as rehabilitation programs, prosthetic support, and accessibility enhancements, while considering gender-specific needs and the unique challenges faced by IDPs and residents.
- The report highlights that the primary reasons for disability in the surveyed population are largely attributed to traumatic causes, particularly war injuries, which affected 44% of respondents overall. Pathological conditions and congenital disabilities follow as significant contributors, affecting 23% and 22% of participants, respectively. Gender differences reveal that males are more likely to attribute their disabilities to traumatic war injuries, while females report a higher incidence of congenital and pathological disabilities. These findings underscore the need for targeted interventions, including trauma care and rehabilitation services, particularly for those affected by war-related injuries. Decision-makers should prioritize to address the long-term impacts on affected individuals. Additionally, tailored support for both male and female populations is critical to ensuring equitable access to care.
- The report indicates that the majority of individuals, both male and female have received a specialist diagnosis for their disabilities, with approximately 92% of

Page 4 of 40 March 2025



respondents confirming a positive linkage. However, a small portion (around 8%) of individuals, particularly among females reported not having received a specialist diagnosis. This highlights a need for improved access to specialized diagnostic services, particularly for vulnerable groups, to ensure that all individuals with disabilities receive proper assessment and care. Stakeholders should focus on expanding diagnostic services and addressing gaps in accessibility for affected populations.

- The report highlights a significant discrepancy in the prevalence of official disability reporting, with 62% of respondents in Al-Jufainah Camp agreeing that they reported their disability, while 38% did not. Notably, males reported higher rates of official reporting (68%) compared to females (43%). Decision-makers and stakeholders should focus on improving reporting mechanisms, particularly for vulnerable groups, and enhancing awareness of the importance of official disability reporting.
- The key finding of the report indicates a diverse range of assistive devices needed across different populations, with significant demand for items such as wheelchairs, eyeglasses, crutches, and prosthetic limbs. The results show that the need for other assistive devices is particularly high among females. Additionally, there are notable gender and population category disparities in the specific types of devices required, highlighting the varied needs of individuals with disabilities. Decision–makers and stakeholders should prioritize improving access to these devices, especially focusing on addressing the high demand for other assistive devices, and ensure that distribution efforts are tailored to the specific needs of different demographic groups, including females.
- The key finding from the report is that a significant portion of individuals with disabilities, approximately 56% overall, require daily personal assistance, with slightly higher rates observed among females. This indicates a critical need for tailored support services in camps and residential areas. Decision-makers and relevant stakeholders should prioritize the provision of daily personal assistance, particularly for individuals who have disabilities and face significant challenges in performing daily tasks, ensuring that these services are accessible and adequately meet the needs of different demographics.
- The report highlights significant disparities in education levels among people with disabilities across camps, genders, and population categories. A considerable proportion, particularly females (61%), have not received any education, while a

Page 5 of 40 March 2025



- small percentage have attained secondary education or higher. Among males, the distribution is more balanced, but the percentage of those with postgraduate education remains minimal (1%).
- These findings underscore the critical need for inclusive education initiatives tailored to people with disabilities, particularly women. Decision-makers and stakeholders should prioritize equitable access to education by removing barriers, enhancing outreach, and fostering inclusive policies to ensure that individuals with disabilities have opportunities to pursue higher levels of education and build self-reliance.
- The report reveals that the majority of people with disabilities are unemployed, with 93% at camps and 86% among residents reporting no current employment. Women with disabilities face the most significant barriers, with 98% indicating unemployment. This highlights a critical need for inclusive employment programs and support systems to address systemic barriers and create accessible job opportunities, particularly for women with disabilities. Decision-makers should prioritize policy interventions and targeted initiatives to improve employment inclusion for these vulnerable groups.
- The report highlights significant disparities in employment types among individuals with disabilities in Al-Jufainah Camp. While the majority (48%) are employed in government and public sectors, only small proportions work as freelancers (16%), skilled and manual laborers (13%), or in the retail and service sectors (12%). Notably, female participants predominantly occupy roles in healthcare and education (70%), whereas males are more likely to work in government positions (51%).
- These findings underscore the need for decision-makers to diversify employment opportunities and support access to alternative sectors, particularly for women.
 Programs fostering entrepreneurship and vocational training could address these gaps and promote inclusive employment pathways.
- The report highlights a critical issue regarding job search status among individuals with disabilities in Al-Jufainah Camp, revealing that nearly 100% of respondents across all demographics, including gender indicated they are not actively seeking employment. This finding underscores a significant challenge in engaging this population in the labor market and suggests the need for targeted interventions by decision-makers and stakeholders to identify and address barriers to jobseeking, such as accessibility, skills gaps, and lack of job opportunities.

Page 6 of 40 March 2025



- The key finding in this report is that a significant portion of individuals with disabilities in Al-Jufainah Camp, approximately 82%, lack regular access to healthcare, with only 18% reporting access to healthcare services. This issue is consistent across both genders, with 81-83% of females and 80-83% of males reporting limited access. To address this, decision-makers should prioritize improving healthcare infrastructure and access, ensuring that IDPs with disabilities receive consistent and reliable healthcare services.
- The findings highlight that individuals with disabilities in Al-Jufainah Camp face significant healthcare needs, with the most common types of care required being disability-related medications, physical therapy, and regular medical check-ups.
 While both male and female participants reported similar healthcare needs, there were variations in the specific types of care required. Stakeholders should prioritize improving healthcare infrastructure and services in these areas, ensuring that these critical needs are met to support the well-being of individuals with disabilities.
- The key finding of the report highlights that a significant majority, approximately 93%, of individuals with disabilities in Al-Jufainah Camp face challenges in accessing healthcare, with 100% of residents affected by these barriers. This suggests that access to healthcare is a widespread issue that requires immediate attention from decision-makers and stakeholders. To address this, efforts should be focused on improving healthcare accessibility for individuals with disabilities.
- The primary reasons for inaccessibility to healthcare in Al-Jufainah Camp are lack of financial resources, transportation difficulties, and the distance of health centers from the camp. Financial constraints are the most significant barrier, affecting approximately 46% of individuals with disabilities, followed by challenges in accessing transportation (around 25%) and the physical distance to healthcare facilities (about 22%). This issue is consistent across both male and female populations. To address these challenges, decision-makers should focus on improving financial support, transportation infrastructure, and the proximity of healthcare services to the camp to enhance healthcare accessibility for individuals with disabilities.

Page 7 of 40 March 2025



METHODOLOGY

The primary objective of this study was to assess the availability and accessibility of services provided by Prosthetics and Rehabilitation Centers to individuals with disabilities in the camp. The study aimed to understand the types of services received, including physical therapy, prosthetic limbs, medical consultations, orthopedic care, and limb maintenance, and how these services are distributed across different demographic groups. Another objective was to explore the gender in access to these essential services.



The rationale for this study is grounded in the growing recognition of the challenges faced by individuals with disabilities, particularly in conflict or displacement settings. Understanding the service gaps and barriers to access for people with disabilities is critical for informing programmatic responses, enhancing service delivery, and ensuring the provision of adequate healthcare services that align with the needs of the affected population. This research also seeks to inform future policies aimed at improving the rehabilitation and support systems for individuals with disabilities.

This study employed a cross-sectional survey design, utilizing structured face-to-face interviews with households in the camp. The survey was designed to collect both qualitative and quantitative data, capturing the range of services received by people with disabilities and identifying barriers to service utilization. The survey instrument

Page 8 of 40 March 2025



included a combination of closed-ended questions, which allowed for the collection of numeric data, and open-ended questions, which provided qualitative insights into participants' experiences. The interviews were conducted in a manner that ensured respect for the participants' privacy and dignity, with the option of having the questionnaire administered by trained enumerators.

Data collection was done in both camp and resident households, with a specific focus on those who have members with disabilities. The questionnaire was designed to capture information on the types of services received, gender-based access to services, and challenges related to service provision. The enumeration was done in collaboration with local community leaders and disability organizations, ensuring that the sample accurately represented the diverse range of people with disabilities living in the camp.

The target population for this study consisted of households with individuals who have disabilities, ensuring that the study focused on those most likely to be affected by the availability of prosthetic and rehabilitation services. A stratified random sampling technique was used to select households from both male and female headed households within the camp, ensuring a diverse representation of demographic and disability groups. The sample size was calculated to ensure statistical significance, with an adequate number of households from both male and female-headed households.

The sample also included a diverse range of disability types, including mobility impairments, sensory disabilities, and other physical and mental health conditions. Gender representation was carefully considered to reflect the gender distribution in the camp, with a focus on understanding the specific barriers faced by both male and female individuals in accessing rehabilitation services.

Given the significant gender-based disparities in access to healthcare, the study ensured gender-responsive data collection. Special attention was given to understanding how gender influences access to prosthetics and rehabilitation services, as women with disabilities often face additional social, cultural, and logistical barriers compared to men. Both male and female participants were interviewed, and the results were analyzed separately by gender to identify any gender-specific issues related to service access and utilization.

Page 9 of 40 March 2025



LIMITATIONS

There are several limitations to this study. First, the study relied on self-reported data, which may be subject to recall bias or inaccuracies in participants' perceptions of service provision. Second, the sample was restricted to households within the camp, which may not fully capture the experiences of individuals with disabilities residing outside the camp or in more remote areas. Third, while the study aimed for a representative sample, there may still be some underrepresentation of certain disability groups, particularly those with more severe disabilities who are less likely to participate in interviews.



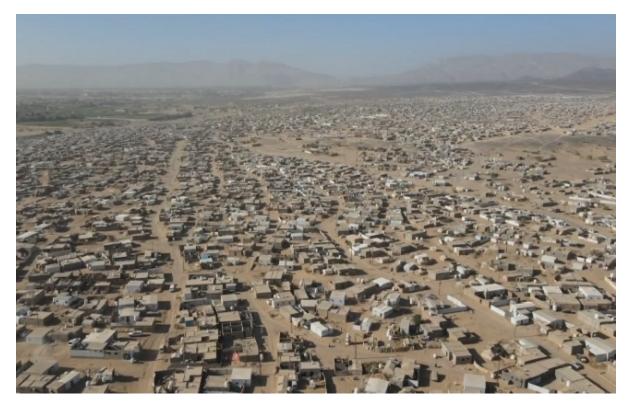
Additionally, challenges in data collection, such as language barriers and limited availability of enumerators trained in disability-sensitive interviewing techniques, could have impacted the reliability of the data. Finally, the study was conducted within a specific timeframe, which may not account for long-term trends or seasonal variations in the availability of services.

Despite these limitations, the study provides valuable insights into the service needs of individuals with disabilities and can guide future efforts to improve service delivery in the camp and similar settings.



CONTEXT

Al-Jufainah Camp, located in Yemen, is one of the many temporary shelters established to accommodate internally displaced persons (IDPs) who have fled conflict-affected regions. Yemen has been enduring an ongoing humanitarian crisis since 2015, marked by widespread violence and instability that has resulted in millions of people being displaced. The conflict has left much of the country's infrastructure in ruins, and basic services, including healthcare, education, and livelihood opportunities, are severely lacking. The situation for people with disabilities in Yemen is particularly challenging, as they face additional barriers in accessing essential services and support.



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Al-Jufainah Camp, situated in a region that has been heavily affected by the conflict, is home to a diverse population of displaced individuals. It provides shelter to thousands of IDPs who have sought refuge from the violence in other parts of the country.

Page 11 of 40 March 2025



However, like many other camps across Yemen, Al-Jufainah faces significant challenges related to limited resources, insufficient infrastructure, and a lack of access to essential services. The camp is characterized by overcrowding, poor sanitation, and limited access to healthcare, which makes it difficult for residents to meet their basic needs.

For people with disabilities living in Al-Jufainah, the situation is even more dire. The camp lacks adequate facilities and services for individuals with mobility impairments, and many of its structures are not designed to accommodate those with disabilities. The lack of wheelchair-accessible pathways, ramps, and housing options further exacerbates the challenges faced by people with physical disabilities. Additionally, the camp's healthcare services are under-resourced, with limited access to specialized rehabilitation services, such as prosthetics, physical therapy, and medical consultations. The absence of trained healthcare professionals and accessible rehabilitation centers in the area means that people with disabilities often go without the necessary care and support.

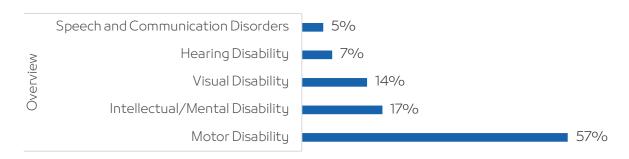
The social stigma surrounding disabilities in Yemen also compounds the difficulties for individuals in Al-Jufainah Camp. People with disabilities are often marginalized and face discrimination, which limits their ability to access services and participate fully in community life. Gender dynamics further intensify this issue, as women and girls with disabilities are more likely to be excluded from vital services and decision-making processes, facing both gender-based and disability-related discrimination.

Given these challenges, this study focused on assessing the availability and accessibility of services for people with disabilities in Al-Jufainah Camp. The goal was to understand the specific gaps in rehabilitation services, identify the barriers that prevent people with disabilities from accessing essential care, and highlight the unique challenges faced by both men and women with disabilities. The findings are intended to inform humanitarian interventions and support efforts to improve the living conditions and access to services for people with disabilities in Al-Jufainah and similar camp settings across Yemen.



TYPE OF DISABILITY

TYPE OF DISABILITY BY CAMP OVERVIEW



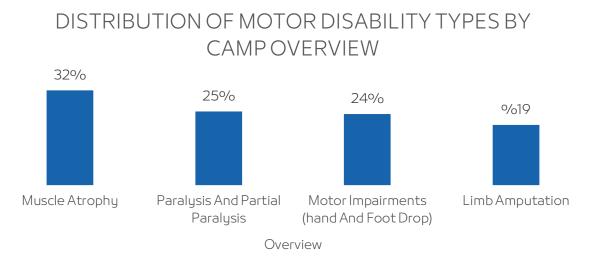
The report underscores the significance of understanding the prevalence and types of disabilities within Al-Jufainah Camp, dedicating focused research to monitor and analyze relevant findings. Among the surveyed population, motor disabilities emerged as the most prevalent, with approximately 57% of participants identifying this as their primary type of disability. Intellectual and mental disabilities were reported by 17% of individuals, highlighting another significant challenge within the community. Additionally, visual disabilities affected 14% of participants, representing a substantial portion of those living with impairments. Hearing disabilities were cited by 7% of respondents, while 5% identified speech and communication disorders as their primary disability type. These findings provide a comprehensive overview of the varying challenges faced by individuals in the camp and underscore the need for targeted support and interventions.

The data also revealed gender-specific disparities in the prevalence of disabilities. Among female respondents, 38% reported motor disabilities as the most common type, followed by intellectual and mental disabilities, which affected 24%. Visual disabilities were identified by 19% of female participants, while 13% experienced hearing disabilities, and 6% reported speech and communication disorders. Conversely, the prevalence of motor disabilities among male respondents was significantly higher, with 63% identifying this type of impairment. Intellectual and mental disabilities affected 16% of males, while visual disabilities were reported by 13%. Hearing disabilities were cited by 5%, and speech and communication disorders were noted by 4% of male participants. These variations between genders highlight the need for tailored interventions that address the specific challenges faced by men and women with disabilities.



This detailed analysis provides essential insights for decision-makers and stakeholders, emphasizing the urgency of prioritizing resources and implementing programs that cater to the diverse needs of individuals living with disabilities. The data highlights the necessity for gender-sensitive approaches and population-specific strategies to ensure inclusivity and improve the quality of life for affected individuals. Collaborative efforts among humanitarian organizations, health service providers, and local authorities will be essential in addressing the multifaceted challenges associated with disabilities in Al-Jufainah Camp and similar settings.

DISTRIBUTION OF MOTOR DISABILITY TYPES



The report underscores the varied distribution of motor disability types within the camp, shedding light on the significant challenges faced by affected individuals. Among the surveyed population, approximately 32% identified muscle atrophy as the most common form of motor disability. Paralysis and partial paralysis were reported by around 25% of respondents, closely followed by motor impairments such as hand and foot drop, which accounted for 24% of cases. Additionally, limb amputation emerged as a critical concern, with approximately 19% of individuals indicating it as their primary motor disability. These findings illustrate the multifaceted nature of motor disabilities in the camp and highlight the need for targeted interventions to address these distinct challenges.

When disaggregating the data by gender, notable differences in the prevalence of specific motor disabilities were observed. Among female respondents, muscle

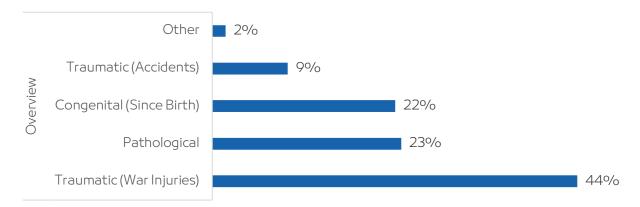


atrophy was the most frequently reported condition, affecting approximately 38% of the group. Motor impairments, such as hand and foot drop, were also significant, with 28% of females reporting this type of disability. Paralysis and partial paralysis were cited by 26% of the female respondents, while limb amputation was reported less frequently, affecting 8% of this demographic. For male respondents, muscle atrophy remained the leading type of motor disability, with 30% of participants identifying it as their primary challenge. Paralysis and partial paralysis were reported by 24% of males, while 23% identified motor impairments such as hand and foot drop. Limb amputation was slightly more prevalent among males compared to females, with 22% of male respondents citing it as their motor disability type.

These findings provide critical insights into the distribution of motor disability types and underscore the pressing need for tailored interventions. Effective strategies should include rehabilitation programs, the provision of assistive devices, and specialized medical care to address the unique needs of individuals with motor disabilities. Moreover, the data highlights the importance of considering gender-specific trends and the distinct challenges faced by IDPs when designing inclusive and responsive support mechanisms. Addressing these issues will require collaborative efforts among stakeholders to ensure equitable access to resources and improved quality of life for individuals affected by motor disabilities.

PRIMARY REASONS FOR DISABILITY

PRIMARY REASONS FOR DISABILITY BY CAMP OVERVIEW





The report presents a comprehensive analysis of the primary reasons for disability within the surveyed population, emphasizing the significant impact of traumatic injuries, particularly those related to war. It was found that approximately 44% of the respondents identified war injuries as the primary cause of their disability, reflecting the profound and lasting effects of conflict on individuals. Alongside these traumatic injuries, pathological conditions were reported by around 23% of participants as contributing to their disabilities, indicating a notable proportion of individuals facing health challenges beyond traumatic causes. Congenital disabilities, or disabilities present from birth, were also cited by approximately 22% of those surveyed, highlighting the ongoing challenges faced by individuals born with disabilities. A smaller percentage, around 9%, attributed their disabilities to traumatic accidents, and about 2% of respondents identified other unspecified causes as the reason for their disability.

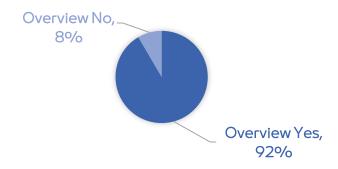
Gender-based differences in the primary causes of disability were also evident. Among female respondents, 43% attributed their disabilities to pathological conditions, while 42% cited congenital disabilities as the primary cause. Additionally, approximately 9% of the female participants reported disabilities resulting from accidents, and a small portion, around 3%, indicated war injuries as the cause. On the other hand, male respondents exhibited a different pattern, with 56% attributing their disabilities to war injuries, making it the most significant cause in this group. Around 17% of males identified pathological conditions, while 16% reported congenital disabilities. Accidents were responsible for disabilities in approximately 9% of male participants, and a very small percentage, about 1%, cited other causes.

These findings highlight the pervasive impact of war-related trauma, particularly among males and residents, as a primary driver of disability within the surveyed population. It underscores the importance of focusing interventions on addressing the consequences of conflict, including providing medical care and rehabilitation for those affected by war injuries. Additionally, the significant prevalence of congenital and pathological disabilities among females and IDPs indicates the need for inclusive healthcare services that cater to a diverse range of disability causes. Decision–makers must prioritize comprehensive care, support, and rehabilitation services, particularly in conflict–affected areas, to mitigate the long–term effects of these disabilities and improve the quality of life for affected individuals.



SPECIALIST DIAGNOSIS FOR DISABILITY TYPES

SPECIALIST DIAGNOSIS FOR DISABILITY TYPES BY CAMP OVERVIEW



The report on specialist diagnosis for disability types reveals that a significant majority of individuals in the surveyed population, approximately 92%, reported having received a specialist diagnosis for their disabilities. This result indicates a strong linkage between individuals with disabilities and access to specialized diagnostic services across the surveyed camps. However, a smaller proportion, around 8%, of those interviewed indicated that they did not receive a specialist diagnosis, highlighting a gap in access to proper medical assessments for some individuals.

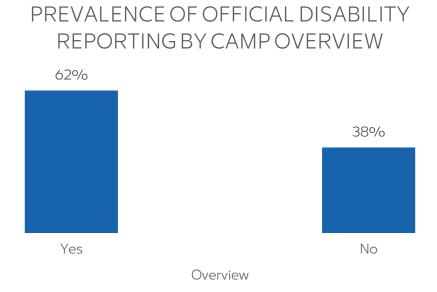
When examining the findings by gender, it was observed that 87% of female respondents with disabilities reported having received a specialist diagnosis, while 13% did not. For male respondents, the proportion of those receiving a specialist diagnosis was higher, with 93% confirming that they had undergone a specialist assessment. Conversely, only 7% of male respondents reported not having received such a diagnosis. This gender disparity suggests that females may face slightly more barriers in accessing specialized diagnostic services compared to their male counterparts, though the overall rates are high for both genders.

These findings underscore the importance of ensuring that all individuals, particularly vulnerable groups like women have equal access to specialist disability diagnosis services. Despite the high rates of specialist diagnosis across the population, the small percentage of individuals who reported not receiving such services highlights a need for continued efforts to address barriers to accessing comprehensive disability assessments. Policymakers and stakeholders should prioritize expanding diagnostic



resources, improving accessibility, and addressing the challenges that prevent some individuals from receiving timely and accurate diagnoses.

PREVALENCE OF OFFICIAL DISABILITY REPORTING



The findings from the report on the prevalence of official disability reporting in AlJufainah Camp reveal notable trends regarding the acknowledgment and documentation of disabilities among the camp's population. The data indicates that approximately 62% of the surveyed individuals reported having their disability officially recognized, while 38% did not. This statistic underscores the importance of official disability recognition but also highlights a significant gap in reporting.

When examining the results by gender, the disparity becomes more apparent. Among female respondents, around 57% of those who identified as having a disability indicated that they had not reported it officially, with only about 43% confirming that their disability had been officially documented. In contrast, male respondents showed higher levels of reporting, with approximately 68% of men with disabilities affirming that their disability had been officially reported, while 32% had not. This gender gap in reporting raises concerns about potential barriers women may face in accessing official disability recognition, possibly due to social, cultural, or logistical factors.

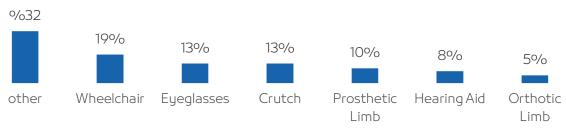
These findings point to a clear need for targeted interventions to address the barriers to official disability reporting, particularly among women. Factors such as limited



access to medical services, lack of awareness, or societal stigmas may be contributing to the lower reporting rates in these groups. Decision-makers and relevant stakeholders should consider strategies to enhance the accessibility of reporting systems, raise awareness about the importance of official disability documentation, and ensure that all groups, particularly the most vulnerable, are supported in accessing these vital services.

ASSISTIVE DEVICES NEEDED

ASSISTIVE DEVICES NEEDED BY CAMP OVERVIEW



Overview



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The report highlights the diverse range of assistive devices needed within the camp, based on the responses from individuals with disabilities. The findings indicate that, in the overall camp overview, approximately 32% of participants identified the need for other types of assistive devices, suggesting a significant variation in the types of support required. Additionally, around 19% of the respondents indicated that a wheelchair is necessary, while nearly 13% reported needing eyeglasses. The same percentage, 13%, also noted that crutches are required, which further underscores the demand for mobility aids. Prosthetic limbs were identified as necessary by about 10% of participants, while 8% mentioned the need for hearing aids, and approximately 5% highlighted the need for orthotic limbs.

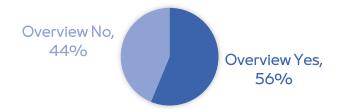
When analyzing these results by gender, it becomes evident that the need for assistive devices varies between females and males. Among females, around 40% of those with disabilities stated that other assistive devices were necessary, with 18% specifically needing a wheelchair. Eyeglasses were required by 17% of female respondents, while 14% indicated the need for hearing aids. A smaller percentage, 5%, reported needing crutches, and around 3% identified orthotic limbs as essential. A very small proportion, approximately 1%, mentioned prosthetic limbs.

These findings suggest a considerable need for a wide range of assistive devices across various demographics within the camp, with significant variation based on gender and population category. Decision-makers should take these diverse needs into account when planning and distributing assistive devices, ensuring that all individuals, regardless of gender, have access to the necessary tools to improve their quality of life. Moreover, the high demand for other devices indicates the need for further investigation into specific assistive technologies that may not be widely available or standardized. Addressing these gaps in provision could lead to more inclusive and effective support for individuals with disabilities in the camp.



NEED FOR DAILY PERSONAL ASSISTANCE

NEED FOR DAILY PERSONAL ASSISTANCE BY CAMP OVERVIEW

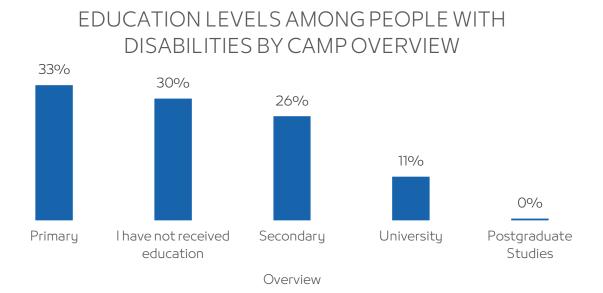


The report highlights the critical need for daily personal assistance among individuals with disabilities in the camp and residential settings. The overall survey results reveal that approximately 56% of participants with disabilities reported requiring daily personal assistance, while 44% indicated that they did not have such a need. This trend is also observed when broken down by gender. For female participants, nearly 67% expressed the need for daily assistance, compared to 33% who stated they did not require it. On the other hand, for male participants, the figures were slightly lower, with 53% acknowledging the need for personal assistance, while 47% did not.

These insights suggest that targeted interventions and resources should be allocated to support individuals with disabilities, especially in camps and residential areas where the need for daily personal assistance is high. Addressing these needs is essential to improving the quality of life for individuals with disabilities and ensuring their full participation in daily activities and community life. Decision-makers and stakeholders should prioritize the development and implementation of assistance programs that cater to the specific requirements of different groups, particularly females who are more likely to require additional support.



EDUCATION LEVELS AMONG PEOPLE WITH DISABILITIES



The report highlights the education levels among people with disabilities, revealing significant disparities and areas for intervention. Among individuals residing in camps, approximately 33% reported having attained primary education, marking it as the most common education level within this group. In contrast, around 30% of those surveyed indicated that they had not received any formal education, illustrating a substantial gap in educational access. Meanwhile, 26% of respondents reported completing secondary education, and only 11% stated they had attained a university degree. Notably, no individuals from this group reported completing postgraduate studies, underscoring the limited opportunities for higher education among this population.

When analyzed by gender, the data reveal notable differences in educational attainment between males and females with disabilities. Among women, an overwhelming 61% reported having no formal education, reflecting significant barriers to educational access for this group. Approximately 32% of female respondents reported achieving primary education, while only 5% had reached secondary education. Furthermore, just 2% of women with disabilities reported having attained a university degree, and none had pursued postgraduate studies. These findings suggest that women with disabilities face particularly acute challenges in accessing and progressing through the education system.

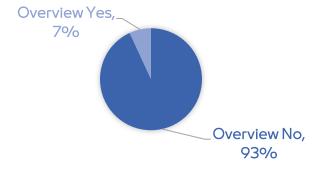


For men with disabilities, the educational landscape appears somewhat more balanced, though challenges remain. Approximately 34% of male respondents indicated primary education as their highest level of attainment, followed closely by 32% who reported completing secondary education. However, a significant 21% of men with disabilities reported having no formal education. In comparison, 13% indicated they had attained a university degree, and only 1% reported pursuing postgraduate studies. These figures point to slightly better educational outcomes for men with disabilities compared to their female counterparts but also highlight the overall challenges faced by this population in accessing advanced education.

Overall, the data underscore the critical need for inclusive educational initiatives tailored to people with disabilities, particularly women. Addressing these gaps will require comprehensive strategies to remove systemic barriers, enhance access to quality education, and create pathways for individuals with disabilities to achieve their full potential through education.

CURRENT EMPLOYMENT STATUS

CURRENT EMPLOYMENT STATUS BY CAMP OVERVIEW



The report's findings on the current employment status of individuals with disabilities reveal significant disparities and challenges across various demographics and population categories. Among surveyed individuals living in camps, approximately 93% reported being unemployed, reflecting a profound lack of employment opportunities within these settings.



Conversely, only about 7% of respondents in camps indicated they were employed, highlighting the marginal level of workforce participation among this group.

When analyzed by gender, the data reveals even starker differences. Among women with disabilities, an overwhelming 98% reported being unemployed, leaving just 2% who identified as employed. This demonstrates the compounded barriers faced by women with disabilities in accessing employment, potentially due to a combination of societal, structural, and cultural factors. For men with disabilities, unemployment remains high but is marginally lower compared to women. Approximately 92% of male respondents indicated they were not employed, while 8% reported being in some form of employment. These figures suggest a gender gap in employment opportunities that needs targeted interventions.

These findings underscore a critical need for inclusive employment policies and programs tailored to individuals with disabilities, particularly for women, and those in camp settings. Addressing these disparities requires a concerted effort from policymakers, humanitarian actors, and development agencies to reduce barriers, promote skill development, and create accessible and inclusive job markets.

TYPES OF EMPLOYMENT

TYPES OF EMPLOYMENT BY CAMP OVERVIEW



The report delves into the key findings regarding types of employment within Al-Jufainah Camp, offering a detailed analysis of employment patterns among individuals with disabilities. At the camp level, nearly half of the respondents (48%) reported being employed in the government and public sectors, underscoring the prominence of this domain as a primary source of livelihood.

Page 24 of 40 March



However, the data also revealed that a significant portion of the population with disabilities is engaged in other forms of employment. Approximately 17% of participants identified as freelancers or self-employed, reflecting a notable degree of entrepreneurial activity. Skilled and manual labor was cited by 13% of respondents, indicating a reliance on trade-based or physically intensive occupations. Meanwhile, 12% reported working in the retail and service sectors, highlighting their contribution to commerce and consumer services. Lastly, 10% of respondents stated their involvement in healthcare and education, representing a relatively small but important segment of the workforce catering to critical societal needs.

When analyzing employment types by gender, the findings demonstrated significant variations. Among female respondents with disabilities, a striking 70% reported employment in healthcare and education, suggesting a concentration in traditionally gendered roles within these sectors. Additionally, 20% of females identified as freelancers or self-employed, signaling a degree of economic independence and adaptability. Conversely, only 10% of females reported employment in government and public sector roles, a proportion considerably lower than their male counterparts. For male respondents, government and public sector employment emerged as the dominant category, with 51% of participants reporting work in this area. Furthermore, 15% of males cited self-employment or freelance work, showcasing their engagement in flexible or entrepreneurial opportunities. Skilled and manual labor accounted for 14% of male respondents, followed closely by 13% in the retail and service sectors. However, only 6% of males reported working in healthcare and education, indicating a notable gender disparity in employment across these sectors.

Overall, the findings highlight the reliance on government and public sector employment among individuals with disabilities, while also drawing attention to the limited representation in other critical sectors such as healthcare and education. The stark gender disparities category differences emphasize the need for targeted interventions to promote equitable access to diverse employment opportunities. Stakeholders and decision–makers should consider strategies to enhance inclusion, particularly by supporting vocational training, fostering entrepreneurship, and addressing systemic barriers that limit participation in underrepresented sectors.



JOB SEARCH STATUS

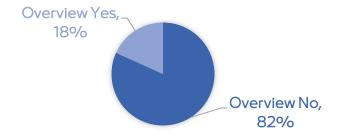
The report reveals concerning findings regarding the job search status among individuals with disabilities in Al-Jufainah Camp, with nearly 100% of the participants across all categories reporting that they are not actively engaged in job searching. This trend is consistent throughout the camp's overall population, as well as when broken down by gender and population category. Specifically, for female respondents, 100% of the individuals with disabilities indicated that they are not seeking employment. Similarly, male participants also reported no engagement in job searching, with 100% stating they are not looking for work.

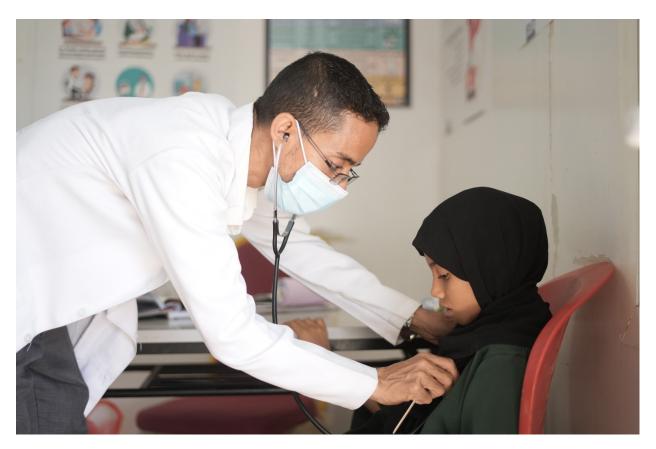
These findings raise significant concerns regarding the barriers that individuals with disabilities face in accessing the labor market. The absence of job search activities could be attributed to a variety of factors, such as limited access to job opportunities, lack of skills or training, societal stigma, or insufficient support systems for individuals with disabilities. It is crucial for stakeholders and decision-makers to address these challenges by developing inclusive employment programs, improving accessibility, and offering tailored support to help individuals with disabilities participate in the workforce.



REGULAR HEALTHCARE ACCESS

REGULAR HEALTHCARE ACCESS BY CAMP OVERVIEW





In discussing the issue of regular healthcare access in the camp, the data reveals a concerning lack of healthcare services for individuals with disabilities. The overall findings indicate that approximately 82% of respondents from the camp reported not having regular access to healthcare, with only about 18% confirming that they do have access. This trend is consistent across various demographics, highlighting a significant gap in healthcare provisions for disabled individuals in the camp.



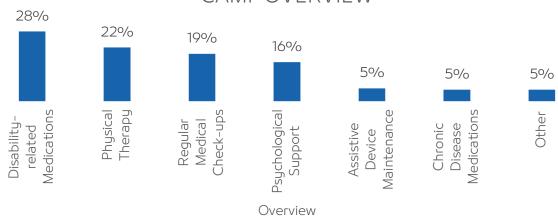
When the data is broken down by gender, it shows that among females, nearly 83% of those interviewed with disabilities reported that they do not have regular access to healthcare. In contrast, about 17% of females indicated that they have access to healthcare services. The situation for males with disabilities is similar, with almost 81% reporting a lack of regular healthcare access, and approximately 19% confirming that they do have access. These findings underscore the widespread nature of the issue, as both male and female individuals with disabilities face similar challenges in accessing regular healthcare.

These findings emphasize the urgent need to address the lack of regular healthcare access for people with disabilities in the camp. Stakeholders must work towards improving healthcare infrastructure and ensuring that people with disabilities have reliable access to necessary healthcare services. This could involve increasing the availability of healthcare facilities, improving transportation to existing healthcare centers, and providing targeted services for disabled individuals to ensure that they are not excluded from essential healthcare.



TYPES OF HEALTHCARE NEEDED REGULARLY

TYPES OF HEALTHCARE NEEDED REGULARLY BY CAMP OVERVIEW





The report provides a detailed analysis of the types of healthcare regularly needed by individuals with disabilities in Al-Jufainah Camp. The findings reveal that a significant portion of the population requires disability-related medications, with approximately 28% of respondents identifying this as a key need.



Additionally, around 22% of individuals with disabilities reported needing physical therapy, while approximately 19% expressed the need for regular medical check-ups. Psychological support emerged as another crucial healthcare requirement, with nearly 16% of participants identifying it as essential. Other types of care mentioned include assistive device maintenance, which was cited by 5% of respondents, and chronic disease medications, also reported by 5%. A small percentage, around 5%, indicated a need for other types of healthcare services, though these were not specified.

Gender-specific data revealed slightly different healthcare needs. Among female participants, 30% reported a need for disability-related medications, while 20% highlighted the necessity of physical therapy. Regular medical check-ups were also important, with almost 19% of women with disabilities identifying this as a primary healthcare need. Psychological support was mentioned by 15% of female respondents, and a smaller proportion, around 7%, cited the need for chronic disease medications. Additionally, 5% of female participants noted the requirement for other healthcare services, while approximately 4% pointed to the need for assistive device maintenance.

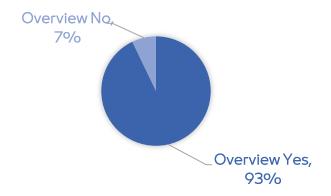
Male respondents with disabilities showed a similar pattern, with around 28% requiring disability-related medications, 22% physical therapy, and 19% regular medical check-ups. Psychological support was identified by 16%, and 6% mentioned assistive device maintenance as a healthcare need. Other types of care were reported by 5% of male respondents, while 4% cited the need for chronic disease medications.

The findings of this report underscore the significant and varied healthcare needs of individuals with disabilities in Al-Jufainah Camp, with particular emphasis on the need for disability-related medications, physical therapy, and regular medical check-ups. This highlights the necessity for healthcare interventions and services tailored to address the specific needs of both male and female individuals with disabilities. The results suggest that healthcare providers and stakeholders should prioritize expanding and enhancing access to these essential healthcare services to improve the quality of life for individuals with disabilities in the camp.



CHALLENGES IN ACCESSING HEALTHCARE

CHALLENGES IN ACCESSING HEALTHCARE BY CAMP OVERVIEW





The report underscores the significant challenges faced by individuals with disabilities in accessing healthcare services in Al-Jufainah Camp. According to the findings, a substantial 93% of the respondents reported encountering difficulties in obtaining necessary healthcare, while only around 7% indicated that they did not

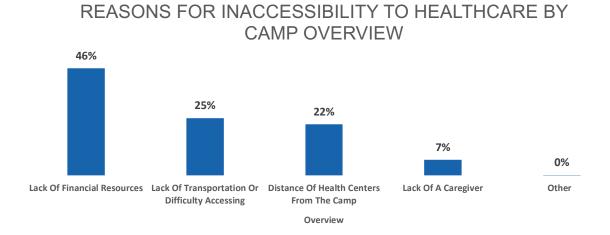


face such challenges. This statistic highlights the widespread nature of healthcare access issues within the camp, particularly affecting individuals with disabilities.

Breaking down the data further by gender, approximately 94% of female respondents with disabilities confirmed that they experienced challenges in accessing healthcare, while a small proportion, about 6%, reported no such issues. A similar trend was observed among male respondents, with 93% acknowledging difficulties in healthcare access, and 7% stating otherwise. These figures emphasize that the challenges are pervasive across both genders, though the extent may vary slightly between males and females.

These findings suggest a pressing need for targeted interventions to address the barriers individuals with disabilities face in accessing healthcare. Stakeholders and decision-makers should prioritize strategies aimed at improving healthcare accessibility, regardless of gender, receive the necessary support to overcome these challenges. Effective solutions could involve increasing the availability of healthcare facilities, improving transportation access, and enhancing the availability of specialized care for individuals with disabilities.

REASONS FOR INACCESSIBILITY TO HEALTHCARE



The findings from the surveys on reasons for inaccessibility to healthcare in Al-Jufainah Camp reveal several significant barriers, most notably a lack of financial resources, transportation challenges, and the distance to healthcare facilities.



Approximately 46% of all respondents, regardless of gender or population category, identified the lack of financial resources as the primary obstacle to accessing healthcare. This was followed by around 25% of respondents reporting transportation difficulties or limited access to transport, while nearly 22% cited the distance of health centers from the camp as a key issue. A smaller percentage, approximately 7%, indicated that the lack of a caregiver was another challenge, although this concern was less widely reported.

When considering the responses by gender, female participants experiencing disabilities reported similar challenges. Nearly 47% of women noted that the lack of financial resources was a significant barrier to healthcare access, while approximately 26% mentioned transportation difficulties. Additionally, around 22% of the female respondents identified the distance of health centers from the camp as a barrier, and 4% mentioned the absence of a caregiver as an additional challenge. Interestingly, no female participants identified any other factors that might contribute to healthcare inaccessibility.

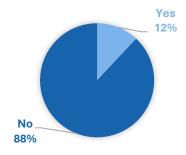
For male respondents, the issues appeared similar but with slight variations in the distribution. Approximately 46% of men reported that financial constraints were the major barrier to healthcare access, followed by around 24% who cited transportation difficulties. About 22% of male participants highlighted the distance to health centers as a significant factor, while 7% mentioned the lack of a caregiver as an additional obstacle. Like the female participants, nearly no male respondents attributed other factors to the inaccessibility of healthcare services.

Overall, the survey findings suggest that financial constraints, transportation challenges, and the distance to healthcare centers are the primary factors hindering access to healthcare for individuals with disabilities in Al-Jufainah Camp. Addressing these issues will require targeted interventions that focus on improving financial support, increasing transportation options, and ensuring that healthcare facilities are more accessible to residents and displaced persons alike. These efforts are crucial to improving healthcare outcomes for vulnerable populations in the camp.



HEALTHCARE AND NUTRITION SERVICES RECEIVED AT HEALTH CENTER

HEALTHCARE AND NUTRITION SERVICES RECEIVED AT AL-JAFINA HEALTH CENTER





The report on healthcare and nutrition services received at Al-Jafina Health Center (IRVD-Health Unit Sector 10) reveals significant barriers to access for individuals with disabilities. The findings show that, in the sector 10, nearly 88% of respondents indicated that they did not receive healthcare and nutrition services at Al-Jafina Health Center.

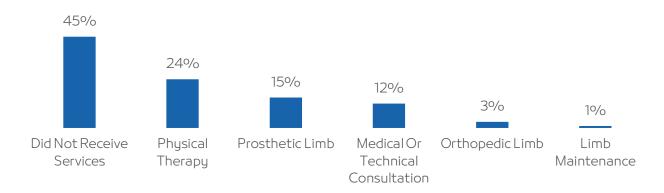


While 12% of those interviewed, who identified as having a disability, reported receiving such services. This pattern was consistent across gender categories, with approximately 88% of both female and male participants with disabilities stating that they did not access healthcare and nutrition services at health centers, while just 12% acknowledged receiving these services.

This data highlights the need for targeted interventions to improve healthcare access for people with disabilities to ensure that they are not excluded from receiving the necessary healthcare and nutrition support.

TYPE OF SERVICES RECEIVED FROM THE PROSTHETICS AND REHABILITATION CENTER

TYPE OF SERVICES RECEIVED FROM THE PROSTHETICS AND REHABILITATION CENTER



The report presents significant findings regarding the type of services received from prosthetics and rehabilitation IRVD center in the target area, focusing on the camp, gender, and population categories. Notably, the data reveals that nearly 45% of individuals reported not receiving any services from the prosthetics and rehabilitation center. Of the individuals who did receive services, around 24% indicated that they had accessed physical therapy while 15% of respondents reported receiving a prosthetic limb. Additionally, 12% mentioned receiving medical or technical consultations, while just 3% of those surveyed received orthopedic limbs and 1% mentioned receiving limb maintenance services.



Gender-specific data further highlights disparities in service access. For females, 64% of those with disabilities reported that they did not receive any services from the prosthetics and rehabilitation center. Among the remaining respondents, 21% had access to physical therapy, 11% received medical or technical consultations, and a negligible percentage received prosthetic limbs or orthopedic limbs. In contrast, for males, 41% of those with disabilities reported no services received, but 25% received physical therapy, and 18% had access to prosthetic limbs. An average of 12% of male respondents received medical or technical consultations, while a small percentage received orthopedic limbs or limb maintenance services.

These findings underscore a substantial gap in the availability and accessibility of prosthetics and rehabilitation services, particularly for females.



RECOMMENDATIONS

- To address the high prevalence of motor, intellectual/mental, and visual disabilities reported in Al-Jufainah Camp, it is essential to prioritize the establishment of targeted rehabilitation programs, gender-sensitive support services, and community-based initiatives tailored to the specific needs of IDPs ensuring inclusivity and accessibility.
- In this area, one of the points that should be discussed in this report is the Distribution of Motor Disability Types distribution of motor disability types at camp overview nearby 32% had agreed with that muscle atrophy in mentioning distribution of motor disability types, furthermore, while mentioning roughly 25% of respondents have a disability told that is paralysis and partial paralysis, also at the same level it was found that at within sight of 24% of the interviewed individuals have a disability exemplify that is motor impairments (hand and foot drop) indicating distribution of motor disability types, also in talking about roughly 20% of respondents have a disability divulged that is limb amputation.
- While in the same context for distribution of motor disability types at gender, while mentioning female at random 38% of participants reported experiencing a disability agree on that muscle atrophy, also to mention that, at randomly 28% of those interviewed identified as having a disability divulged that is motor impairments (hand and foot drop), along with that in talking about near 26% of respondents have a disability exemplify that is paralysis and partial paralysis when mentioning distribution of motor disability types, also the results had shown that at on the verge of 8% of those interviewed identified as having a disability had revealed that is limb amputation.
- While in talking about distribution of motor disability types at gender, for male
 within sight of 30% of the interviewed individuals have a disability divulged that
 muscle atrophy in mentioning distribution of motor disability types, and it was
 found in that in talking about on the verge of 24% of those interviewed identified
 as having a disability explicit that is paralysis and partial paralysis, in addition to
 that, in talking about near 23% of the population surveyed is affected by
 disability get on well with that is motor impairments (hand and foot drop),



in addition to that, at about 22% of those interviewed identified as having a disability agree on that is limb amputation while mentioning distribution of motor disability types.

- Moreover regarding distribution of motor disability types at population category
 just about 32% of the population surveyed is affected by disability had cited that
 muscle atrophy, besides, at close on 25% of respondents have a disability
 exemplify that is paralysis and partial paralysis, also to mention that, in talking
 about on average of 24% of respondents have a disability stated that is motor
 impairments (hand and foot drop) referring to distribution of motor disability
 types, additionally for on average of 20% of respondents have a disability explicit
 that is limb amputation.
- Given the high prevalence of disabilities linked to traumatic war injuries, particularly among males and residents, it is crucial to prioritize rehabilitation and mental health services for conflict-affected individuals. Additionally, targeted interventions for those with congenital and pathological disabilities should be implemented to ensure comprehensive care across all disability types.
- To improve access to specialist diagnoses for disability types, it is recommended
 that stakeholders focus on addressing the 8% gap in diagnosis, particularly for
 female and IDP populations, by enhancing healthcare infrastructure, providing
 targeted outreach, and removing barriers to access. Additionally, efforts should be
 made to ensure that all populations, especially in camp settings, have equal
 opportunities to receive comprehensive disability assessments.
- To improve the prevalence of official disability reporting, it is crucial to enhance awareness and access to reporting mechanisms, particularly for women, who show lower reporting rates. Targeted outreach programs and support services should be developed to address the barriers these groups face in accessing official disability recognition.
- It is recommended to prioritize the provision of a wide range of assistive devices, including wheelchairs, eyeglasses, crutches, prosthetic limbs, and hearing aids, to meet the diverse needs of individuals with disabilities across different demographics, particularly focusing on the high demand for other devices and ensuring equitable distribution based on gender and population categories. Additionally,



further investigation into specific assistive technologies may be necessary to address unmet needs.

- Based on the findings, it is recommended that targeted interventions be developed to provide daily personal assistance, particularly for females, who demonstrate a higher need for support. These services should be expanded and tailored to meet the specific needs of individuals with disabilities, ensuring equitable access for all affected populations.
- To address the significant disparities in education levels among people with disabilities, particularly for women and those with no formal education, it is essential to implement targeted, inclusive educational programs that prioritize access to primary and secondary education while offering pathways to higher education, tailored to the needs of each group.
- To address the high unemployment rates among individuals with disabilities, particularly women and IDPs, stakeholders should prioritize the development of inclusive livelihood programs, enhance vocational training tailored to their needs, and ensure equitable access to employment opportunities in both camp and resident communities.
- It is recommended to enhance employment opportunities for individuals with disabilities in Al-Jufainah Camp by promoting vocational training and entrepreneurship programs, particularly for underrepresented sectors such as retail, skilled labor, and healthcare, while addressing gender disparities and supporting IDPs with targeted job placement initiatives.
- The findings highlight a significant lack of job search engagement among individuals with disabilities in Al-Jufainah Camp. To address this issue, it is recommended that stakeholders develop targeted employment support programs, improve access to job opportunities, and provide tailored resources such as skills training and awareness initiatives to empower individuals with disabilities to actively pursue employment.



- To address the healthcare needs of individuals with disabilities in Al-Jufainah Camp, it is essential to prioritize expanding access to disability-related medications, physical therapy, regular medical check-ups, and psychological support. Additionally, efforts should be made to enhance the availability of assistive device maintenance and chronic disease medications.
- Given that a significant majority of individuals with disabilities in Al-Jufainah Camp, report challenges in accessing healthcare, it is crucial for stakeholders to prioritize improving healthcare access by enhancing facilities, transportation, and specialized care services. Targeted interventions should focus on eliminating barriers to healthcare for individuals with disabilities across all population categories.
- To address the primary barriers to healthcare access, it is recommended to implement targeted interventions that improve financial assistance, enhance transportation options, and reduce the distance to healthcare facilities for individuals with disabilities. Additionally, providing support for caregivers could help alleviate some of the challenges identified.
- To address the significant gap in access to prosthetics and rehabilitation services
 it is recommended that targeted outreach and service expansion efforts be
 implemented to ensure equitable access to essential care, including physical
 therapy, prosthetic limbs, and medical consultations. Additionally, enhancing the
 capacity of service providers and increasing resource allocation would help
 address the unmet needs in camp resident.







