



# These Rights are Mine

An Assessment of Disability Rights among Refugees and the Host Community in Kigoma, Tanzania

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## **Acknowledgements**

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*Front cover: A person with disability in the host community in Kigoma region being supported with a tricycle by the IRC.*

*Photo: Sanjeev Dasgupta/IRC*

## Introduction

The International Rescue Committee (IRC) has been working in Tanzania with persons with disabilities in Nyarugusu refugee camp and the surrounding host community in Kasulu district since 2015. The IRC recognizes that all people affected by crisis and disaster deserve to have their rights protected and our work with persons with disabilities seeks to safeguard their human rights and wellbeing by giving them the tools and information they need to help themselves and one another. The IRC's These Rights are Mine (TRM) project – a 30-month project funded by the European Commission's Instrument for Democracy and Human Rights – uses a rights-based approach to ensure that persons with disabilities are able to claim their rights, and that government authorities and civil society organizations acting on their behalf are able to deliver on these rights.

This survey follows the disability approach reflected in the Convention on the Rights of Persons with Disabilities (CRPD), and aims to encourage national efforts to collect appropriate information, including statistical and research data, to enable the formulation and implementation of policies and programs to promote disability rights. The survey also aims to establish baseline information about disability rights in the IRC's area of operations, assessing the needs of persons with disabilities as well as barriers faced by them in everyday life.

## Summary of Findings



**Finding 1:** Knowledge of frameworks and instruments that ensure rights of persons with disabilities - both national and international - is significantly low among persons with disabilities. Knowledge is higher among refugees (35%) than the local Tanzanian population in Kasulu district (13%).

**Finding 2:** A large proportion of persons with disabilities do not know where they can seek redress for rights violations, such as discrimination and violence. Lack of knowledge is more widespread among the host community (55%) than the refugees (37%).



**Finding 3:** A significant number of persons with disabilities experience either violence or discrimination due to their disability. Almost 60% of refugees report experiencing either discrimination or violence compared to almost 40% in the host community.

**Finding 4:** Services accessed by both populations largely mirror one another, with health services among the most accessed, and police and legal services the least accessed. Host community members are generally more satisfied with the services they receive (61%) than refugees (44%).



**Finding 5:** Significant barriers exist for both populations as they try and access basic services. However, far more refugees (69%) experience barriers to access services they need than local Tanzanians in Kasulu district (30%).

**Finding 6:** Only small numbers of persons with disabilities are financially independent and rates of employment among them are also very low. Only 20% of persons with disabilities in the host community are working while this number is even lower for refugees at 14%.



## Methodology

The project team used a participatory methodology that used an age, gender and diversity lens to ensure that all needs of persons with disabilities were identified and prioritized. To conduct a comprehensive assessment, the IRC was joined for tool design and survey implementation by two local Tanzanian disability rights organizations, local authorities, community leaders and persons with disability committees and representatives.

Data collection was carried out by two teams in July 2019, each composed of a trained supervisor or team leader and nine trained household survey enumerators. Two sampling methodologies were used for the survey. For refugees in Nyarugusu camp, a list of all persons with disa-

bilities was available, allowing the team to use a systematic random sampling process. For the host community in Kasulu district, sampling was done in two stages. At the first stage, clusters were created at the village level based on a probability proportion to size method. At the second stage, households were selected at random in each village. The sampling size for both populations was based on a 95% confidence interval and a 5% margin of error.

In total, enumerators interviewed 843 persons with disabilities across the two populations as follows:

Population	Male	Female	Total
Host Community	309	231	540
Children (1-17 years)	101	75	176
Adults (18 years and above)	208	156	364
Refugees	153	150	303
Children (1-17 years)	57	51	108
Adults (18 years and above)	96	99	195
Total Individuals	462	381	843

Results of the survey were discussed with counterparts from the IRC's Burundi program, as well as local partner organizations in Tanzania, during a joint workshop in January 2020. All recommen-

dations and follow-up actions were determined through this cross-pollination process to enhance program quality as well as outcomes for clients.

# Key Findings

**Finding 1:** Knowledge of frameworks and instruments that ensure rights of persons with disabilities - both national and international - is significantly low among persons with disabilities. Knowledge is higher among refugees (35%) than the local Tanzanian population in Kasulu district (13%).

Only small numbers of respondents indicated that they knew of national or international frameworks, such as the Convention on the Rights of Persons with Disabilities and the Tanzania Persons with Disability Act. Knowledge of the frameworks was, however, three times higher among refugees in Nyarugusu camp than in the host community in Kasulu district.

While an understanding of individual legal documents may not be imperative to empower persons with disabilities about their rights, lack of knowledge can easily translate to a situation where persons are not aware about their respective rights and so cannot easily advocate for themselves. This came across in the survey, with 36% of respondents across the two groups indicating that they either did not know what rights they had or that they thought that they had no rights at all as a person with disabilities. This number was again higher among the host community (40%) as opposed to refugees (27%).

Figure 1: Respondents with knowledge of rights frameworks

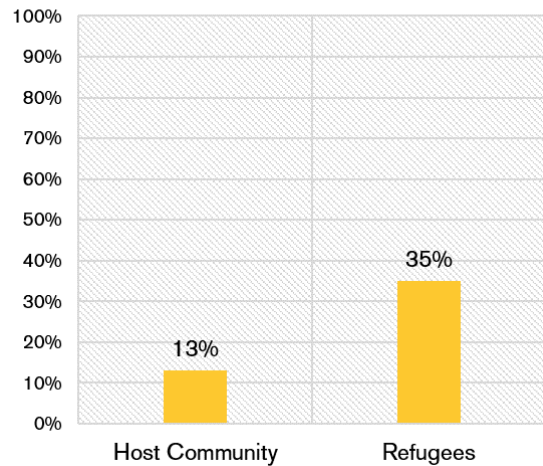
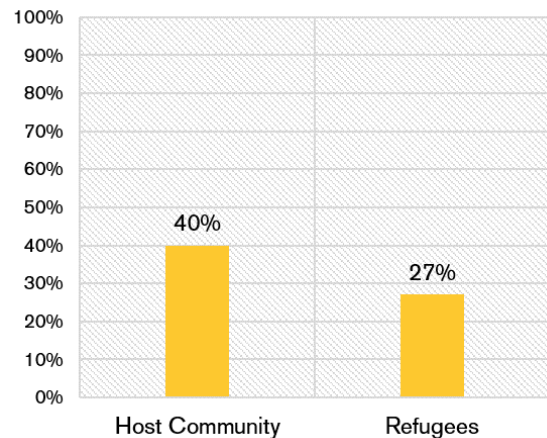


Figure 2: Respondents who do not know their rights or believe they have no rights at all



**Finding 2:** A large proportion of persons with disabilities do not know where they can seek redress for rights violations, such as discrimination and violence. Lack of knowledge is more widespread among the host community (55%) than the refugees (37%).

Findings on seeking redress for rights violations largely follow findings around knowledge of rights and rights frameworks. More than half (55%) of persons with disabilities in the host community did not know where to seek redress for acts of discrimination or violence. This number was lower among refugees (37%). There is also a gendered dimension to this finding—more females lacked information about seeking redress for rights violations. This gap was smaller among refugees (41% females lack information as opposed to 33% males) and wider among the host community (51% females as opposed to 35% males).

For individuals who did seek redress, their family and community leaders were the most common way of seeking redress, with more than 60% of

those who sought redress using them. However, levels of satisfaction with using channels for redress among those who used them was less than 50% across all respondents.

As indicated by Findings 1 and 2, general awareness and knowledge about disability rights is higher among refugees than the host community. While alternative explanations may also exist, one likely reason for this gap is the more robust and long-term presence of NGOs like the IRC in the refugee camp, with programming in the host community lagging far behind until recently.



Refugees in Nyarugusu camp participating in a march during International Day of Persons with Disabilities to raise awareness about disability rights in the camp.

Photo: Sanjeev Dasgupta/IRC

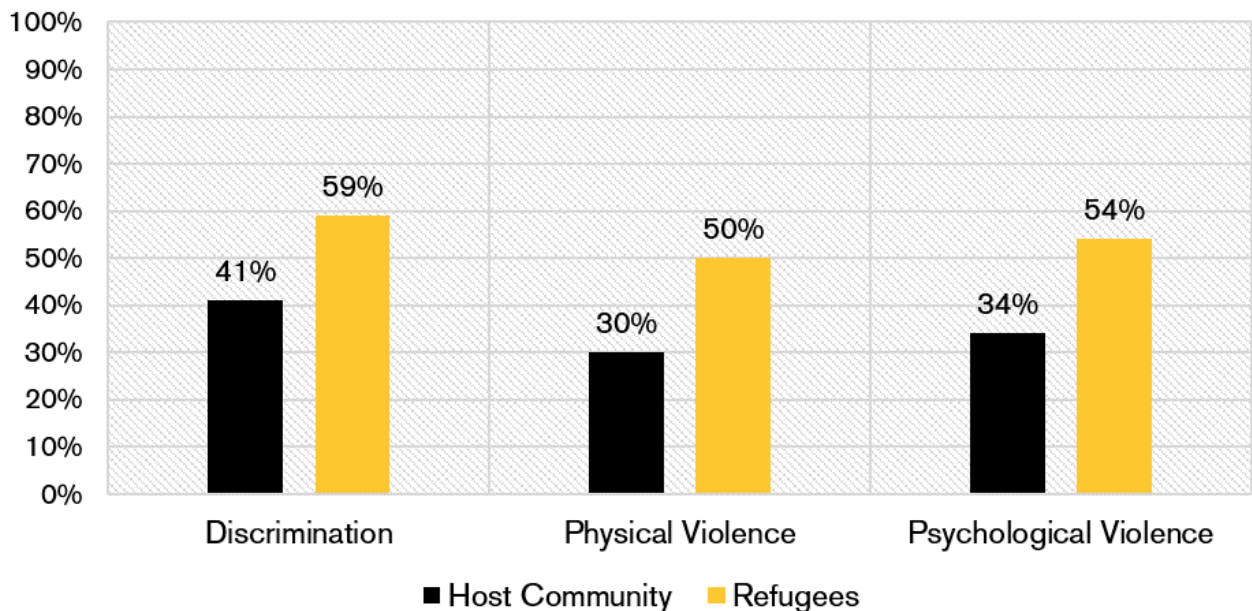
**Finding 3:** A significant number of persons with disabilities experience either violence or discrimination due to their disability. Almost 60% of refugees report experiencing either discrimination or violence compared to almost 40% in the host community.

In the host community, 41% of respondents said that they had experienced acts of discrimination, 30% said that they had experienced acts of physical violence and 34% said that they had experienced acts of psychological violence, indicating a high prevalence of violence and discrimination due to disability. There was also a large difference between males and females, with 60% of male respondents having experienced acts of violence as opposed to 40% female respondents in the host community.

While knowledge of disability rights is higher among refugees, they also report experiencing more disability-linked discrimination and violence

than members of the host community. 59% of respondents said that they had experienced acts of discrimination, 50% had experienced acts of physical violence and 54% had experienced acts of psychological violence. While refugees appear to experience more violence than the host community—and this very well may be true—it is also possible that they report higher rates of violence because they are more aware about their rights and therefore are better at identifying instances when their rights have been violated.

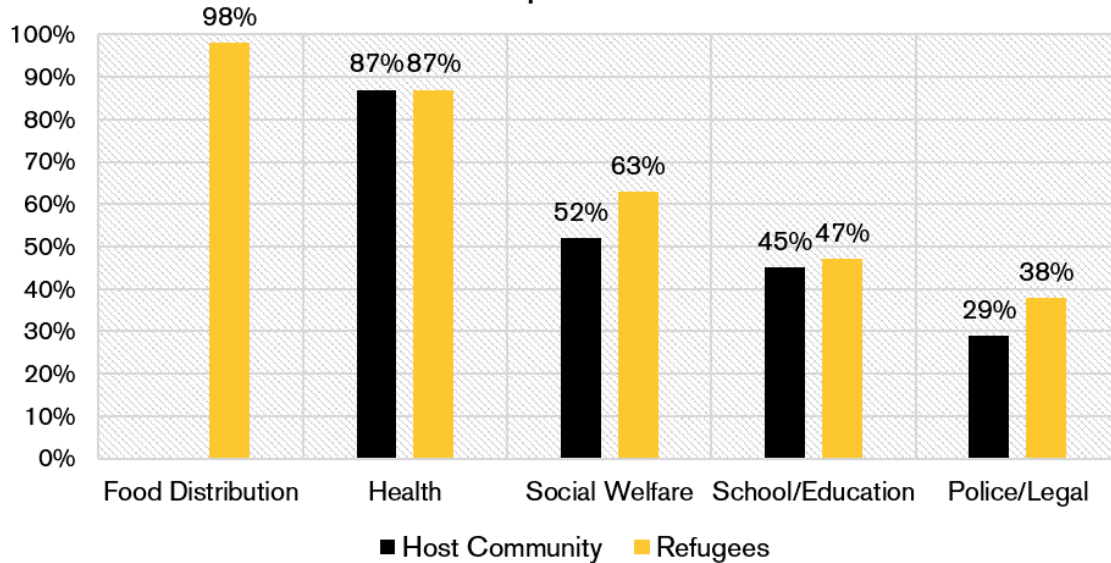
**Figure 3: Respondents who experienced violence or discrimination due to their disability**





**Finding 4:** Services accessed by both populations largely mirror one another, with health services among the most accessed, and police and legal services the least accessed. Host community members are generally more satisfied with the services they receive (61%) than refugees (44%).

**Figure 4: Relative distribution of basic services accessed by respondents**



Trends among services accessed by both populations were similar. Health services were the most accessed service by persons with disabilities in the host community (87%) and the second most accessed service by those with disabilities among refugees (also 87%). Almost all refugees (98%) reported accessing food distribution services in the camp. Health services were followed by social welfare services and education services, with police and legal services the least accessed.

While the relative importance and use of individual services was similar between the host community and refugees, their levels of satisfaction with the services differed significantly. Overall, 61% of host community respondents said that

they were either very satisfied or satisfied with the services they received. This number fell to 44% for refugees. Different services were also rated differently by the two populations. For the host community respondents, police and legal services—while being the least accessed service—were the most satisfactory (70%) while education services were the least satisfactory (53%). For refugees, social welfare services were the least satisfactory (39%) while education services were the most satisfactory (55%). Interestingly, food distribution, a service unique to refugees, elicited very polarizing responses, with the highest ratings given for both very satisfied as well as for very dissatisfied.



Rebecca, 25, who lives in Muzye village in Kasulu district, is one of many clients who have benefitted from the IRC's host community programming. The IRC has provided her with a tricycle, which has significantly improved her mobility.  
Photo: Sanjeev Dasgupta/IRC

**Finding 5:** Significant barriers exist for both populations as they try and access basic services. However, far more refugees (69%) experience barriers to access services they need than local Tanzanians in Kasulu district (30%).

Respondents highlighted a number of barriers that prevented them from accessing basic services that they required. Some of the most common barriers identified included:

- Lack of assistive mobility and other special needs devices, such as wheelchairs, hearing aids and walking sticks. This was specifically highlighted by respondents in relation to accessing education and welfare services.
- Distance to reach facilities and lack of transport available. This was highlighted specifically in the case of health services, police and legal services, as well as for food distribution in camps.

- Fear of police, which was the largest barrier to accessing police and legal services.
- Long waiting times, which was unique to food distribution in camps.

What was particularly striking in this case was the huge gap between refugees and persons with disabilities in the host community. While 30% of host community members—still a significant number—said that they had required services at one point but had not been able to access them, a huge 69% of persons with disabilities among refugees said that they had been unable to access services due to barriers they were unable to overcome.

It is evident from these findings that many service providers—both governmental and non-governmental—are not being inclusive in the way they design and deliver their services. Persons with disabilities also do not appear to receive appropriate information about what services are available to them and how they can successfully access them.

**Finding 6:** Only small numbers of persons with disabilities are financially independent and rates of employment among them are also very low. Only 20% of persons with disabilities in the host community are working while this number is even lower for refugees at 14%.

Rates of financial independence were significantly low among both populations. Only 30% of persons with disabilities in the host community reported that they were able to support themselves through savings—primarily through Village Savings and Loan Associations (VSLAs)—while only 14% of refugees could rely on their own savings for doing so. These numbers are unsur-

prising because the rate of employment is also very low among both populations, with lack of work directly leading to high rates of dependence. Only 20% of host community members said that they were working while this number was even lower for refugees at just 14%.

Julienne is among the small proportion of refugees with disabilities who are able to work, having participated in a vocational training program organized by the IRC. While her earnings are limited due to limited opportunities in Nyarugusu, working gives her a sense of purpose and independence.

Photo: Sanjeev Dasgupta/IRC



# Recommendations

The following recommendations were formulated with inputs from local partner Disabled Persons' Organizations (DPOs) and Civil Society Organizations (CSOs) as well as staff from both IRC Tanzania and IRC Burundi to ensure that the most critical client needs are met:

1. Put more emphasis on activities targeting the host community rather than just refugee camps because needs are higher in the host community.
2. Strengthen the capacity of DPOs and CSOs to monitor and report on violations, and provide responsive and remedial support to victims. This involves: (i) trainings on disability rights monitoring including implementation of the accessibility audit tool; (ii) support to establish a monitoring system; (iii) mapping and dissemination of available services; (iv) training on safe referrals and case management; and (v) providing organizational capacity development and training.
3. Strengthen capacity of community and religious leaders as well as family members—caregivers to deliver relevant information to persons with disabilities. This includes preparation of key messages on disability rights and how to access them in multiple accessible formats, such as easy visual representations for persons with intellectual disabilities and hearing impairments, messages in sign language as well as braille, and messages to be disseminated through more typical mediums like loudspeakers.
4. Support the establishment of a community-based volunteer caregiver program so that caretakers can accompany family members with disabilities to service delivery points.
5. Share and orient service providers to the Washington Group of Questions, which can be used in any assessment or survey to identify persons with disability. Advocate for service providers to consistently incorporate the questions into their assessments, service intake interviews and other data collection activities. In addition, encourage them to regularly disaggregate and analyze data for persons with disabilities to see the scale of disability and help determine priority demographics and needs.
6. Advocate to relevant stakeholders—such as social welfare committees in the host community and the UNHCR Implementing Partner in the camps—to support access to mobility and assistive devices for persons with disabilities, specifically prioritizing women and children.
7. Strengthen activists in the community to ensure they have the technical and material capacity to deliver on disability rights, especially for women and girls with disabilities.