

War in Cities: Persons with disabilities and the role of the International Red Cross and Red Crescent Movement



Rafah, Gaza, occupied Palestinian territory. Bassem al-Dukhni kicks a football during a training session with the Rafah Amputee Champions team. The team play in a league set up with the support of the ICRC for amputees in Gaza. Bassem lost his leg when he was wounded by an explosive bullet.

When war breaks out in cities, the complexity and interconnectedness of the urban environment poses many problems for civilians. For persons with disabilities,¹ the impact can be even worse and aggravate existing barriers and risks. Armed forces, authorities, first responders, humanitarian actors and other persons living in the city itself need to be aware of the specific risks that persons with disabilities face so they can help to reduce them. This factsheet draws attention to some of the biggest risks and makes recommendations on how National Red Cross and Red Crescent Societies could better identify what support persons with disabilities need and incorporate this support into their own operations. It also makes recommendations for how National Societies could promote disability-inclusive interpretations and implementation of international humanitarian law among parties to armed conflict.

¹ About 16% of the population according to UN figures: World Health Organization, *Global Report on Health Equity for Persons with Disabilities*, 2 December 2022: <https://www.who.int/publications/i/item/9789240063600>.

Disability-specific impact of urban warfare

Persons with disabilities in an urban environment may be particularly reliant on urban services and functioning infrastructure to go about their daily lives, receive the health care they need, access safety and security information, or even, should the need arise, to escape. For example, electricity cuts as a result of fighting in urban areas can leave persons with reduced mobility trapped in high-rise buildings, unable to take the lift or move around because their mobility depends on power-driven assistive devices, such as scooters; deaf persons cannot receive warnings and alerts on their phones if their connection to the internet has been cut off. In addition, isolation and shortages in essential supplies – including medical supplies – are likely to mean persons with disabilities will not receive the regular support they need and/or miss out on humanitarian relief. In addition, urban warfare may generate new or further impairments – for instance, as a result of conflict-related injuries, traumatic experiences or the destruction of medical facilities and supplies that in turn leads to shortages and inadequate health care.

It is also harder for persons with disabilities to flee from the fighting, find a safe place to shelter or be evacuated, as they are more likely to become separated from family members or caregivers, be unable to find or use assistive devices or get relevant information. The complexity of the urban environment or a lack of public transport may also make getting to safety especially challenging. As a result, persons with disabilities are more likely to be incidentally harmed in attacks. Persons with disabilities are also at greater risk of direct attacks and violence; for instance, persons with psychosocial or sensory impairments have been mistaken for military adversaries by belligerents who were unaware that such persons did not understand what was happening or did not react to the fighting around them like other civilians would.

Having a disability in the aftermath of urban conflict

In the aftermath of a conflict, both short- and long-term issues arise for civilians. Again, the impact can be worse for persons with disabilities because of the specific barriers and risks they face. Not only must the immediate humanitarian response (including medical care) be planned for, but also long-term plans must be made – for example, regarding physical rehabilitation, disability-inclusive training on reducing risks in relation to mines and other explosive remnants of war, and the social and economic inclusion of persons with disabilities in a post-conflict society. The destruction of infrastructure and social systems may have a disproportionate impact on persons with disabilities who do not always have all the support they need in a peacetime society, yet alone in a city damaged or destroyed by urban warfare. It is especially important to avoid harmful relocations of persons with disabilities in the aftermath of a conflict.

International humanitarian law and persons with disabilities²

Civilians and members of the armed forces who are *hors de combat* (i.e. who are not or are no longer involved in hostilities) are protected under the rules of international humanitarian law, irrespective of whether they have disabilities or not. The challenge, from the perspective of civilians with disabilities, is for the parties to the conflict to sufficiently consider the specific barriers and risks faced by persons with disabilities so that they will be effectively protected by these rules.

First, when planning and carrying out attacks, international humanitarian law requires the parties to the conflict to:

- take “constant care ... to spare the civilian population, civilians and civilian objects in all military operations”
- take all “feasible precautions” to verify that their targets are military objectives and to avoid and at least minimize incidental civilian harm
- give “effective advance warning ... of attacks which may affect the civilian population, unless circumstances do not permit”.³

International humanitarian law also requires parties to an armed conflict to take all feasible precautions to protect civilians under their control from the effects of attacks.⁴

What constitutes “feasible” precautions and “effective” warnings may well be very different depending on the circumstances, including the disabilities of persons who happen to be in the area. The humanitarian and the military considerations that need to be taken into account include all sources of information that are reasonably available to commanders and planners. This includes information provided by persons with disabilities and their representative organizations, and lessons learnt and past practice. In certain circumstances, for instance in besieged urban areas where hostilities are taking place, one precautionary measure is to evacuate civilians or allow them to leave. Where it becomes necessary or even legally required to evacuate a city, the parties to the conflict should consider accessibility for civilians with disabilities when ordering and facilitating such evacuations.

² For more details see ICRC, *How Law Protects Persons with Disabilities*, 2017: <https://www.icrc.org/en/document/how-law-protects-persons-disabilities-armed-conflict>; ICRC, *International Humanitarian Law and the Challenges of Contemporary Armed Conflicts: Recommitting to Protection In Armed Conflict on the 70th Anniversary of the Geneva Conventions* (Challenges Report), 2019: <https://www.icrc.org/en/document/icrc-report-ihl-and-challenges-contemporary-armed-conflicts>, pp. 41–43; Alexander Breitegger, ‘Increasing visibility of persons with disabilities in armed conflict: implications for interpreting and applying IHL’, 105 *International Review of the Red Cross* 922, (2023), pp. 99–134.

³ Additional Protocol I, Article 57.

⁴ Additional Protocol I, Article 58.

Effective warnings should be assessed from the perspective of the civilian populations who would receive the warning. Communication formats should be varied so that civilians with a variety of impairments can access the information.

Second, the core international humanitarian law protection, that civilians and persons *hors de combat* “be treated humanely, without adverse distinction”⁵ when they are in the power of a party to a conflict, takes into account not only factors such as race, religion, birth, wealth, etc.,⁶ but also the person’s individual condition, including their impairment, as well as how their capacities and needs differ due to social, economic, cultural and political structures in society.⁷ International humanitarian law provides that persons with disabilities must receive prioritized attention if their health condition or the risk of losing access to the health and physical rehabilitation services they need – even when that need is ongoing – is more urgent than that of other persons.⁸ International humanitarian law also implicitly recognizes the need to proactively identify persons with disabilities for the distribution of humanitarian relief when impartial humanitarian organizations assist parties to an armed conflict in meeting their obligations.⁹ Identifying persons with disabilities and their location is also necessary for implementing specific protections for them under international humanitarian law, namely the obligation to afford them special respect and protection.¹⁰

Recommendations for National Societies

National Societies can play a very useful role: firstly, operationally, they can ensure their own humanitarian activities are inclusive and well coordinated for persons with disabilities, by cooperating with organizations for persons with disabilities and others. Secondly, National Societies may promote with states and parties to armed conflicts disability-inclusive interpretations of international humanitarian law rules on the conduct of hostilities, including the principles of distinction, proportionality and precautions, and of the international humanitarian law principle of treating persons in the power of a party to an armed conflict humanely, without adverse distinction.

5 Geneva Conventions, Common Article 3.

6 Geneva Conventions, Common Article 3; Additional Protocol I, Article 75; Additional Protocol II, Article 4.

7 See also Commentary on the First Geneva Convention (ICRC, 2016), [553] and [634–635]: <https://ihl-databases.icrc.org/en/ihl-treaties/gci-1949/article-3/commentary/2016?activeTab=1949GCs-APs-and-commentaries>; 2006 Convention on the Rights of Persons with Disabilities, Article 15.

8 This has been explicitly reflected in a number of international humanitarian law provisions pertaining to the wounded and sick. Care must be taken, however, not to automatically equate all persons with disabilities with being wounded and sick. See First Geneva Convention, Article 12(3); Additional Protocol I, Article 10(2).

9 Challenges Report, above note 2, p. 43.

10 Fourth Geneva Convention, Article 16; ICRC Customary IHL Study, Rule 138: <https://ihl-databases.icrc.org/en/customary-ihl/v1/rule138>.

I. Operational recommendations for National Societies

In particular, National Societies are well placed to do the following:

- Work to strengthen links between the Movement and organizations of persons with disabilities. Given that such organizations will likely be present in urban areas and bear the bulk of the load to assist persons with disabilities, the National Society is well placed to support them.
- Ensure the meaningful participation of persons with disabilities so that their perspectives are incorporated into the design, implementation and review of humanitarian response, with a focus on urban settings. More broadly, National Societies should strive to include persons with disabilities among their staff and volunteers.
- Consider and establish appropriate methods for collecting disaggregated data on disabilities – and to use this data in planning their urban response and monitoring the access of persons with disabilities to humanitarian services and assistance.
- Ensure accessibility considerations for humanitarian relief are provided to civilians with disabilities. If they cannot leave an urban area and have to remain where they are, these considerations should be part of the planning and implementation stages of humanitarian response. Relevant measures include ensuring they have access to water, sanitation and shelter; providing transportation to obtain food and health care; and presenting accessible information on available relief (e.g. by using sign language, Braille or large print).
- Take accessibility into account where National Societies themselves carry out evacuations in urban areas, e.g. identifying persons with disabilities, ensuring means of transport are accessible and assistive devices are available, and allowing for those who support persons with disabilities to accompany them.
- While these recommendations are made specifically for armed conflict in urban settings, similar considerations would also be relevant for other emergencies where National Societies may be active, such as national disasters and conflict outside urban areas.

II. Recommendations for National Societies in relation to promoting disability-inclusive interpretations of international humanitarian law and implementation

National Societies should:

- Incorporate disability inclusion into training on international humanitarian law for armed forces – for example by highlighting the specific needs of persons with disabilities in urban areas (such as the need for electricity to carry out evacuations of mobility-impaired persons in multistorey buildings); ensuring that training reflects a realistic civilian presence, including the fact that civilians with disabilities may differ from the rest of the population in terms of routine movements or activities; and bringing in organizations for persons with disabilities to share their experiences, so that

armed forces can better plan for allowing or facilitating accessible evacuations of civilians, including those with disabilities (or indeed for avoiding them).

- Bring this issue before national international humanitarian law committees or similar bodies (where they exist). For example, national international humanitarian law committees or similar bodies could be provided with amendments/adaptations of relevant national legislation and military practices (e.g. military manuals, directives), including this issue within international humanitarian law dissemination within armed forces, or international humanitarian law expert conferences could be organized to raise awareness of this issue and work on legal and operational recommendations.
- Increase the visibility of the issue in international humanitarian law dissemination activities of National Societies for all other target audiences beyond the armed forces (e.g. authorities, humanitarian organizations and medical personnel).
- Raise the visibility of the specific barriers and risks faced by persons with disabilities in urban warfare and advance the visibility of disability within international humanitarian law, including in the context of the 34th International Conference of the Red Cross and the Red Crescent.¹¹

For more information please contact:

Alexander Breitegger, senior legal adviser, ICRC: abreitegger@icrc.org

This factsheet was prepared by Eve Massingham, the ICRC's war in cities policy adviser, and Alexander Breitegger, senior legal adviser, with the support of the Movement Reference Group on War in Cities and NG'AA Michael Mwendwa, the ICRC's disability inclusion adviser.

¹¹ Helen Durham and Gerard Quinn, "Lifting the cloak of invisibility: Civilians with disabilities in armed conflict", *Humanitarian Law & Policy Blog*, ICRC, 21 April 2022: <https://blogs.icrc.org/law-and-policy/2022/04/21/civilians-disabilities-armed-conflict/>; Alexander Breitegger, "Towards a disability-inclusive IHL: ICRC views and recommendations", *Humanitarian Law & Policy Blog*, ICRC, 6 July 2023: <https://blogs.icrc.org/law-and-policy/2023/07/06/towards-disability-inclusive-ihl-icrc-views-recommendations/>.






Gaza, occupied Palestinian territory. Ibrahim and his six-year-old daughter spend time together. Ibrahim lost his legs during fighting in the Gaza Strip in 2016. He tries to remain hopeful and does some basic construction work, despite his disability.

MISSION

The International Committee of the Red Cross (ICRC) is an impartial, neutral and independent organization whose exclusively humanitarian mission is to protect the lives and dignity of victims of armed conflict and other situations of violence and to provide them with assistance. The ICRC also endeavours to prevent suffering by promoting and strengthening humanitarian law and universal humanitarian principles. Established in 1863, the ICRC is at the origin of the Geneva Conventions and the International Red Cross and Red Crescent Movement. It directs and coordinates the international activities conducted by the Movement in armed conflicts and other situations of violence.

International Committee of the Red Cross
19, avenue de la Paix
1202 Geneva, Switzerland
T +41 22 734 60 01
shop.icrc.org
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