



## DISABILITY AND AGE TASK FORCE

### TERMS OF REFERENCE 2021

The following Terms of Reference (ToR) describe the responsibilities of the Disability and Age Task Force (DATF) and how it will support disability and age inclusion in the humanitarian-development response in Jordan.

#### Background

Persons with disabilities and their caregivers and support persons are disproportionately affected by humanitarian crises and displacement. They often face specific and additional challenges due to barriers that prevent them from enjoying their rights, including discriminatory attitudes and behaviors, and limit or preclude them from accessing basic services as well as education and livelihood opportunities. Older refugee men and women also face particular challenges in situations of displacement as lack of mobility, reduced vision and chronic illness make it difficult for some of them to access support. Older refugees are also at heightened risks of abuse, discrimination, neglect and exploitation in humanitarian contexts. The COVID-19 pandemic further exacerbated barriers faced by persons with disabilities and older people and created additional challenges with the disruption of services, social support networks and community life.

Information on the needs of refugees with disabilities in Jordan is limited due to barriers in identifying and registering persons with disabilities with UNHCR. Although UNHCR's [ProGres](#) registration system indicates that 4.1 per cent of the total refugee population in Jordan has a disability, recent studies conducted by humanitarian actors with a sample of the Syrian population in Jordan using the Washington Group Questions indicate that over 20 per cent of the sampled Syrian population has a disability, with the prevalence of disability being even higher at the household level<sup>1</sup>. Available information on the needs and situation of refugees with disabilities is scattered across different agencies and some assessments are outdated or limited to one type of disability. The inclusion of persons with disabilities in the humanitarian response continues to be limited and lack of sector-specific analysis about inclusion gaps remains a challenge.

In order to address some of these gaps, the Disability Task Force (DTF) was created in 2015 under the Protection Working Group. The DTF, co-chaired by UNHCR and Humanity & Inclusion, was initially developed as a time-bounded task force to address two core topics, namely to safely identify persons with disabilities among the refugee population and to improve access to quality specialized services. The terms of reference of the DTF were revised in 2017 to ensure that the needs of persons with disabilities and/or

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<sup>1</sup> [Removing Barriers](#) by HI and IMMAP (2018); [Vulnerability Assessment Framework](#) by UNHCR, Action Against Hunger and ILO (2019).

in disabling situations (in particular older people and people with injuries) are thoroughly considered throughout the humanitarian response.

Since its creation, the DTF has succeeded in developing guidelines for the prioritization of disability specific services for refugees with disabilities. In June 2016, UNHCR also agreed to promote the use of Washington Group Questions in both UNHCR's registration process and as a universal indicator under the Vulnerability Assessment Framework (VAF), which is used to identify the most vulnerable Syrian refugee households. This is under current deployment for registration and is currently used by the VAF population study.

While these constitute critical steps towards improved access to services for refugees with disabilities, DTF members agree that there is a need to strengthen existing efforts and further support the implementation of inclusion mechanisms in the humanitarian-development response to ensure that no one is left behind. This means ensuring that the needs, capacities, concerns and recommendations of older refugee men and women are thoroughly included in the response. In view of this, the DTF members agreed to expand the focus of the task force to include older people and changed the name of the task force to "Disability and Age Task Force" (DATF).

### **Objective of the DATF**

The overall objective of the DATF is *to advocate for and promote effective disability and age inclusion into the humanitarian-development response in Jordan aiming to promote and mainstream the rights of persons with disabilities and older persons, promote the meaningful participation of persons with disabilities and older persons, support the consideration of disability and age-related perspectives and remove any barriers that prevent persons with disabilities, older people and people in disabling situations to access humanitarian assistance and services on an equal basis with others.*

### **The DATF will achieve its main objective by:**

#### **1. Strengthening coordination and information sharing**

- Facilitate operational coordination to support service delivery to reduce gaps, minimize duplication and enhance complementarity.
- Ensure regular updating of specialized services mapping and strengthen referral pathways for persons with disabilities and older people in order to streamline services and improve timely response to the needs of persons with disabilities.
- Share information and disability and age inclusion good practices.
- Promote data sharing and the use of RAIS among DATF members governed by protection and confidentiality of beneficiaries.
- Strengthen engagement with strategic coordination groups (i.e. education, livelihoods, South Inter-Agency Coordination), humanitarian leadership, and donors need to ensure that humanitarian aid meets the specific and basic needs of older refugees, and refugees with disabilities through a human rights-based approach to disability.

#### **2. Disability and age mainstreaming**

- Support disability and age mainstreaming and inclusion at all stages of the humanitarian-development response (design, implementation, including needs assessment, and monitoring).
- Support, to the extent possible, working groups and actors contributing to the humanitarian response, in identifying inclusion gaps and in adjusting their strategy of intervention, while also providing ad hoc technical inputs, when necessary.
- Support the use of disability and age-specific (e.g. rehabilitation, assistive devices and respite care) and inclusive indicators and targets in all relevant regional and national humanitarian and developmental response plans and programmes.
- Improve safe identification of persons with disabilities and older people and promote the use of the Washington Group Questions.

### **3. Strengthening inter-agency needs assessment, analysis and prioritization**

- Conduct inter-agency needs assessments and monitor disability and age inclusion throughout the humanitarian-development response to provide sound protection analysis and guide decision-making as well as the priorities of the response, in close co-ordination with leading organisations mandated to carry out this task.
- Regularly update the guidelines for the prioritization of disability specific services for refugees.

### **4. Advocacy**

- Strengthen communication with donors, humanitarian-development actors and relevant national stakeholders to highlight the situation of refugees with disabilities and older refugees as well as their needs and concerns and advocate for disability and age inclusion to be a priority in the response.
- Advocate for a non-discriminatory response and a human-rights approach to inclusion and develop and regularly update common positioning, briefing notes and advocacy messages.
- Promote positive perceptions and greater social awareness about persons with disabilities and older persons and strengthen relations with the media and public information units of different organizations.

### **5. Capacity Building**

- Identify gaps and provide capacity building on disability and age inclusion to frontline staff, sector working groups, DATF members, and other relevant actors.

### **Organization**

The DATF is co-chaired by UNHCR and Humanity & Inclusion with HelpAge and JOHUD as technical advisors on age. The DATF will be represented in each working group by Focal Points on Disability and Age Inclusion (FPDAs) who will intervene on the DATF's behalf on all aspects related to disability and age inclusion. Two focal points will be appointed to each working group and will act in accordance with the FPDA TOR.

Focal points in working groups will convey principles and common positioning defined and endorsed by the DATF members and will report back to DATF members during monthly meetings.

## **Meetings**

The DATF will convene meetings on the second Wednesday of every month. Extraordinary meetings and ad-hoc task forces may be created by the co-chairs and at the request of members of the DATF if there are urgent issues to be addressed.

## **Reporting**

The Disability and Age Task Force will report to the Protection Working Group and its output will inform the programmatic planning and budget allocations of the respective JRP Task Forces.

## **Validity and Terms of Revision**

This TOR will be valid for one year from the date of its adoption by the DATF members. Upon expiration and taking into account the continuation of the circumstances that justify the DATF's creation, the co-chairs will facilitate the revision process and updating of the TOR. The DATF members will elect the co-lead of the DATF and technical advisors on age on an annual basis.

## **Common principles shared and promoted by DATF members**

All DATF members share the following understanding, values and principles that they commit to promote within the different working groups of the humanitarian response:

### **Article three of the Jordanian Law on the Rights of Persons with Disabilities No. 20 for the Year 2017 defines a person with a disability as:**

- a. "For the purpose of implementing the provisions of this Law, a person with a disability is defined as a person who has long-term physical, sensory, intellectual, mental, psychological or neurological impairment, which, as a result of interaction with other physical and behavioural barriers, may hinder performance by such person of one of the major life activities or hinder the exercise by such person of any right or basic freedom independently.
- b. An impairment will be considered of a long-term nature according to Clause (a) of this Article if the impairment is not expected to disappear in at least (24) months from the date of commencement of treatment or of rehabilitation.
- c. Physical obstacles and behavioural barriers mentioned in Clause (a) of this Article include lack or absence of reasonable accommodation or accessible formats or accessibility, and also include individual behaviors and discriminative institutional practices on the basis of disability.
- d. Major life activities mentioned in Clause (a) of this Article include the following:
  1. Eating, drinking, administering, self- care, reading and writing.

2. Movement and mobility.
3. Interaction and concentration, expression and verbal, visual and written communication.
4. Learning, rehabilitation and training.
5. Work.”

Disability is considered a part of human **diversity**; however, disability is not a homogeneous reality. Respect for the inherent rights and dignity, individual autonomy and freedom of choice of persons with disabilities requires considering this heterogeneity in the implementation of activities and programmes that must ensure tailored responses are available and developed jointly with each person with a disability, irrespective of disability, and within the framework of the global response mechanism.

The principles of said law and those of the Convention on the rights of Persons with Disabilities (CRPD) call for the respect, participation of people with disabilities, respect for difference and acceptance of persons with disabilities as part of human diversity and humanity, equality of opportunity, accessibility, equality between men and women, and the respect for the evolving capacities of children with disabilities and respect for the right of children with disabilities to preserve their identities.

**SPHERE standards** are critical to ensure that aid delivered to refugees responds to minimum quality criteria. DATF members commit to SPHERE standards and consider disability and age inclusion of particular importance in relation to: 1- appropriateness, 2-effectiveness, 3-local capacities strengthening, 4-participation, 6-coordination/ complementarity and 7-continuous learning.

**Rights-based approach**, which holds people and institutions in power accountable to fulfil their responsibilities and supporting rights holders in demanding their rights and access the services needed on an equitable basis with others. The rights of refugees with disabilities are fully acknowledged under article 11 of the Convention on the Rights of Persons with Disabilities towards which both UNHCR and the government of Jordan are accountable for.

**Persons Centered Approach (PCA)** is designed as a critical step towards inclusive quality service delivery. While the PCA is supposed to empower users in order to raise their voices, it also leads to changing practices among professionals delivering the services with a critical change of paradigm: the user originally considered as the recipient of the service (passive) reaches the heart of the service process (active). In the context of disability, DATF members consider refugees with disabilities should be given the opportunity to access information, make their own choices, provide feedback about the services they receive or cannot access, receive tailored responses, etc.

The **intersectionality** of an individual's identity also needs to be considered. Persons with disabilities and older persons are diverse in their experiences, in the ways that barriers impede their participation and inclusion in humanitarian and development action, and in their identity, including their gender, age,

ethnicity, location and race. Due to the intersectionality of these factors, persons with disabilities and older people often face greater marginalization and discrimination.