CENTRAL AFRICAN REPUBLIC
PERSONS WITH DISABILITIES LEFT BEHIND
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(front cover) Handi Ambarbque, a 27-year old man, in the M’Poko Camp in Bangui, Central African Republic

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Hamamatou, a 13-year-old girl who had polio from the town of Guen in southwestern Central African Republic, told Human Rights Watch that her brother carried her on his back when their village was attacked until he got too tired to continue. “I told him, ‘Souleymane, put me down and save yourself,’” she said. “He said he would come back for me if they didn’t kill him.” He never came back.

When anti-balaka fighters found her two weeks later, Hamamatou described what happened: “The fighters said, ‘We have found an animal. Let’s finish it off.’” Another anti-balaka soldier intervened to save her life.
One of the untold stories of the recent conflict in the Central African Republic is the isolation, abandonment and neglect of persons with disabilities.

Persons with disabilities in the Central African Republic were often left behind and struggled to flee to safety when their communities came under the brutal attacks by armed groups beginning in 2013. When they did reach sites for internally displaced people, they faced difficulties accessing sanitation, food, and medical assistance.

On April 28, 2015, the United Nations Security Council renewed the UN peacekeeping mission in the Central African Republic, including for the first time a specific requirement to monitor, report and prevent abuses against persons with disabilities. Human Rights Watch briefed a number of Security Council members, UN agencies, and humanitarian organizations on our findings.

One senior UN official familiar with the emergency response in the Central African Republic told Human Rights Watch:

We don’t pay enough attention to the issue of disability. We should be doing more. There is no place for discrimination in humanitarian action.

The Central African Republic has been in acute crisis since early 2013, when the mostly Muslim Seleka rebels seized power in a campaign characterized by widespread killing of civilians, burning and looting of homes, and other serious crimes. In mid-2013, groups calling themselves the anti-
Father Bernard Kinvi, director of the Bossemptélé Catholic hospital, 300 kilometers northwest of Bangui, said that he and his fellow priests spent days looking for survivors following a massacre of some 80 people by the anti-balaka militia in January 2014, and that 17 out of the 50 people left behind in Bossemptélé were persons with disabilities. Among them was an elderly blind woman who was left for dead and who spent five days lying in the riverbed among several corpses; a young boy with polio he found hiding five days after the massacre; and an elderly man who had lost his feet and hands to leprosy found abandoned in his home several days after the massacre.
The anti-balaka organized to fight against the Seleka. The anti-balaka carried out large-scale reprisal attacks against Muslim civilians in Bangui, the capital, and western parts of the country. Thousands were killed and hundreds of thousands forcibly displaced during the conflict, including persons with disabilities.

“During the war, people with disabilities lost everything; their wheelchairs, their homes, their livelihoods,” Simplice Lenguy, president of the group representing persons with disabilities in the M’Poko camp for internally displaced people in Bangui, told Human Rights Watch. “Going back to our neighborhoods is going to be impossible without significant support from humanitarian organizations.”

Aid and support services for persons with disabilities will be especially important as the transitional government begins to close down displacement camps and help people to return home.

From January 13 to 20 and from April 2 to 14, Human Rights Watch interviewed 49 people in Bangui, Boyalí, Yaloké, Bossemptélé, and Kaga Bandoro, including 30 with physical, sensory, psychosocial, or developmental disabilities; their families; government officials; diplomats; and representatives of aid agencies and local disabled persons organizations.

Human Rights Watch found that at least 96 persons with disabilities had been abandoned or were unable to escape and that 11 were killed in Bangui, Boyalí, Yaloké, and Bossemptélé. The figure is probably a fraction of the total. Most spent days or weeks, and in a few cases up to a month, in deserted neighborhoods or villages with little food or water. Persons with physical or sensory disabilities interviewed, especially those who were abandoned, were often unable to negotiate the unfamiliar and uneven terrain without assistance.

The gravity of the crisis in the Central African Republic, coupled with the alarming number of humanitarian emergencies globally, has resulted in an overwhelming burden on aid agencies. Although the United Nations has categorized the situation in the Central African Republic as one of the gravest by its standards, the country has not received adequate humanitarian funding. According to the United Nations Office for the Coordination of Humanitarian Affairs (UNOCHA), since the beginning of 2015, the Central African Republic has received about US$126 million, less than 20 percent of the $613 million its strategic response plan calls for.

With limited aid available, aid agencies were often unable to address the specific challenges faced by persons with disabilities. Of the eight UN and nongovernmental aid agencies Human Rights Watch interviewed, none were systematically collecting data on persons with disabilities, and their needs were not fully included in the agencies’ programming.

**KEY RECOMMENDATIONS**

- The transitional government in the Central African Republic, the United Nations and aid agencies should:
  - Begin to systematically collect data on persons with disabilities to integrate their needs in policy decisions and humanitarian assistance programs.
  - Develop an action plan to include and support persons with disabilities in peacekeeping activities, with a special focus on how civilian protection and humanitarian support programs can incorporate their needs.
- Donors should invest in humanitarian efforts that are inclusive of persons with disabilities, including accessible infrastructure and services (such as health services, education and toilets).
- UN agencies (particularly the Department of Peacekeeping Operations, Office for the Coordination of Humanitarian Affairs and Office of the High Commissioner for Human Rights) should take the needs of persons with disabilities into consideration more systematically in the protection of civilians mandate, and promptly implement the MINUSCA mandate to monitor, investigate, report and prevent abuses against persons with disabilities.
FLEEING VIOLENCE

At the height of the conflict in early 2014, persons with disabilities were neglected in the large-scale evacuation of tens of thousands of Muslims from the capital, Bangui, and towns and villages across western parts of the Central African Republic. The commercial trucks used to transport people to camps for internally displaced people or refugee camps in neighboring countries were high off the ground, making them extremely difficult to access for persons with physical disabilities unless they had assistance. In the chaotic and desperate flight, there was often little or no help to board the trucks.

When more than 1,500 Muslim survivors fled the city of Bossemptélé in March and April 2014 in commercial trucks, Human Rights Watch found that at least 17 persons with disabilities, mostly children who had survived polio, were left behind.

Those who managed to board were often unable to take their wheelchairs or other mobility devices since there was limited room in the vehicles and boarding was chaotic, with some only having minutes to climb on or risk being left behind.

A number of persons with disabilities decided to stay behind rather than lose their wheelchairs.

“How will people with disabilities move around without their tricycles once they reach the camps?” one disability rights advocate said. “They preferred to die with dignity and pride at home.”

Dieudonné Aghou, vice-president of the National Organization of the Association of Persons with Disabilities (Organisation Nationale des Associations des Personnes Handicapées, ONAPHA) told Human Rights Watch:

The Seleka would attack very suddenly, driving up at high speed in their 4x4 trucks, whoever couldn’t flee quickly was attacked. Even in the second phase, during the anti-balaka reprisal attacks, families fled leaving behind relatives with disabilities. In the list of victims, there are many people with disabilities, yet no credible organization is working on our needs in [this] conflict.

Obstacles in Fleeing

A key challenge in escaping was the absence of assistive devices such as wheelchairs, tricycles, or crutches, which were lost in the chaos, left behind, or looted. One man with a physical disability living in Bangui told Human Rights Watch: “People broke down the door, looted my home and took my wheelchair. If I could walk, I could have defended myself.” Another challenge was inaccessible terrain, especially in rural areas where the only safe place to hide was in the bush.

In Kaga Bandoro, Henry Gustave – a polio survivor who cannot walk – told Human Rights Watch how he fled after the Seleka and anti-balaka started fighting in town in 2014: “I used my tricycle to move fast and hide in the bush. With my family we fled into the bush and stayed there for two months.” However, they had to move after they were attacked again by ethnic Peuhl herdsmen who sometimes allied themselves with the Seleka. “When we were attacked, I wanted to take the tricycle, but it was too heavy and cumbersome to move in the bush, so we had to abandon it. Since then my uncle went back to get it but only the frame is salvageable, the rest of it is destroyed.”

Many persons with physical or sensory disabilities found the prospect of the journey too daunting so they decided to stay back. Jean-Richard, a man with a physical disability, told Human Rights Watch: “In my state I couldn’t leave [without assistance]. Everyone left but I stayed back and locked myself in the house. I stayed there for a week without any food.”

Some persons with disabilities chose to stay in their homes, believing that because of their disability, attackers would spare their lives. But in some cases persons with disabilities who were unable to flee were killed by the attackers. A blind man and another man with a physical disability were among 11 people killed in the November 2013 Seleka attack in Ouham-Bac in northwestern Central African Republic. Relatives who later found the blind man’s body told Human Rights Watch that it appeared he had been dragged from his hiding place and executed.

Abandonment

Families of persons with disabilities are faced with a difficult choice during a conflict, Human Rights Watch found – often a split-second decision, either to flee and save themselves or to risk being killed to save a relative with a disability. As a result, persons with physical or sensory disabilities were often left behind.

Human rights defenders and disability rights advocates told Human Rights Watch that, based on information they were able to collect in their own districts, they found 57 persons with disabilities abandoned in homes in Bangui. The totals are probably higher.

Ambroise, a 27-year-old man with a physical disability from Bangui, described what happened on December 9 when the Seleka entered his neighborhood:
The Seleka came and started killing people. I was fast asleep when I heard gunshots and woke up to find myself alone at home. My parents had fled without me. I started shouting and crawled to the entrance of my house but when I looked outside, there was no one. I stayed alone for a day until a young boy passed by. I started crying when I saw him and begged him; ‘Please help me! If you leave me, I will die.’ The young boy feared for me and agreed to carry me on his back till the airport [the camp for displaced people].

Lack of Information or Awareness

Since the attacks occurred without warning, persons who are deaf or have a psychosocial or intellectual disabilities simply did not hear, know about, or understand what was happening. Human Rights Watch documented the case of a tailor in Bangui with a mental health condition who was shot and killed by the Seleka because he continued to work at his shop in the market while everyone else fled. One of his acquaintances said: “He just didn’t understand.”

The situation of persons with psychosocial or intellectual disabilities has been particularly ignored, since even domestic disability rights organizations focus almost exclusively on people with physical disabilities and frequently don’t include persons with psychosocial or intellectual disabilities in their work.
LIFE IN CAMPS FOR DISPLACED PEOPLE

Life in Bangui’s M’Poko camp for internally displaced people, adjacent to the airport, and in Muslim enclaves, such as the one in Yaloké, is difficult for all, but persons with disabilities face additional challenges in meeting their basic needs such as food, sanitation, and health care. Similar problems are likely to be found in camps across the country as the number of internally displaced people soars in the central part of the country.

Local authorities and humanitarian agencies are not systematically collecting data on persons with disabilities in either of the sites identified above. Local groups for persons with disabilities have identified 123 persons with physical and sensory disabilities in the M’Poko camp. Given that there are 18,300 people in the camp, as of early April, and no data on persons with psychosocial or intellectual disabilities, it is likely that this figure seriously underestimates the problem.

For persons with physical or sensory disabilities, displacement camps can be hard to navigate. Persons with disabilities interviewed said that they were unable to make their way to food distribution sites as the location was not accessible or by the time they made their way to the site with assistance, the distribution was already over. Food distributions in M’Poko camp ended in the first half of 2014.

Following the government’s decision to return people from M’Poko camp in Bangui to their homes, aid organizations will facilitate their return with food rations for two months, and four months for the most vulnerable. They will also provide them with about 90,000 CFA (about US$150, which is the equivalent of rent for six months), plastic tarp, a hygiene kit for women, and three mosquito nets.

Once they are back in their neighborhoods, aid organizations will work with local authorities to ensure that families have access to services such as medical care and schools. It will be essential to fully include persons with disabilities in these efforts.
LIFE IN CAMPS FOR DISPLACED PEOPLE
For many people with physical or sensory disabilities, the environment of the M’Poko camp for internally displaced people in Bangui is hard to navigate. The uneven terrain is speckled with holes and open drains. People with physical disabilities are often unable to access food distribution sites or medical clinics and have no choice but to crawl into latrines on their hands and knees.
Sanitation and Health

The environment in the M’Poko camp in Bangui, as in other displacement sites, is inaccessible, with uneven surfaces and open sewage drains that make it difficult for people who use wheelchairs or who are blind to move around without assistance.

Accessing basic necessities such as latrines can be difficult as some are not fully accessible and often persons with physical disabilities have to crawl on the ground to enter, exposing them to potential health risks. Jean, a man with a physical disability living in M’Poko camp, said:

“My tricycle doesn’t fit inside the toilet so I have to get down on all fours and crawl. Initially I had gloves for my hands so I didn’t get any [feces] on them but now I have to use leaves.

For people who are blind, moving around the camp without assistance can be extremely dangerous, as they can fall into filthy open sewage drains or burn themselves on open fires. Human Rights Watch heard of several cases, in which blind people in the M’Poko camp had been burned by open fires or boiling water. Aimé, a blind resident of M’Poko camp and a popular musician, told Human Rights Watch, “Sometimes I become so angry and discouraged by the difficulties of living here that I just stay inside the whole day.”

Without mobility aids, many persons with disabilities are forced to crawl on the ground to move around, and as a result, they are at great risk of life-threatening infections, such as respiratory problems related to inhaling excessive amounts of dust.

Persons with disabilities also face increased barriers in accessing basic medical care even when it is provided in the camp. This not only concerns persons with physical disabilities who may be unable to go to the clinic but also extends to persons with sensory disabilities.

The M’Poko camp medical clinic has no one to facilitate communication with deaf people. As a result, deaf people who cannot read or write and are not accompanied by a relative or friend who can assist with communication may hesitate to seek medical help or find it difficult to communicate if they do.

Gilbert Nguerepayo, a sign language interpreter who used to live in the Don Bosco camp in Bangui, told Human Rights Watch: “Humanitarian organizations do not pay enough attention to deaf people. Medical care is a real problem. There is no one to support them and they face difficulties in communicating.” At the request of deaf people, Nguerepayo often facilitated communication between them and doctors in his camp but deaf people in
M’Poko had no such support, as there are no sign language interpreters in the camp. He is called in by the local disabled persons’ organization in M’Poko to provide sign language interpretation for events but not for individual cases. Nguerepayo is one of the few sign language interpreters in the entire country, and is largely self-taught.

In the Muslim enclave in Yaloké, access to medical care and nutrition has been poor, particularly for persons with disabilities. Mamadou, a 14-year-old polio survivor, fled his home on the back of a donkey. Mamadou’s father told Human Rights Watch:

“We had a donkey to carry Mamadou but it died on the way. We had to negotiate to buy another donkey but when we came across the anti-balaka, they stole the donkey from us. We didn’t know what to do so my wife and I would take turns carrying him. Mamadou was crying like it was never going to end.”

Due to the uneven and bumpy terrain, Mamadou (pictured above) fell a few times during the journey and sustained injuries that went untreated and prevent him from even supporting himself with a cane. “Before [the war] Mamadou was better; now he can’t even walk,” his father said. Once he reached the Yaloké enclave, his health deteriorated because, according to his family, he had to crawl on the ground and had little to eat. Although his family took him to the nearby clinic, only mild painkillers were available.

When Human Rights Watch interviewed Mamadou in January, he weighed less than 8 kilograms and according to the doctor at the Bossemptélé Catholic mission was suffering from an acute pulmonary infection due to the dust he inhaled crawling on the ground. The dire living conditions and lack of access to medical care has led to 53 people among the displaced community in the camp, including children and adults with disabilities, dying from malnutrition, respiratory illnesses, and other diseases.

According to the two leading medical assistance organizations, due to the scarcity of trained professionals, mental health care and support services for persons with psychosocial disabilities are limited. In the areas that Human Rights Watch researched, there are no community-based mental health services available and only one hospital in Bangui provides a few psychiatric medications. Even prior to the conflict, there was an acute shortage of mental health services with only a handful of professionals and few services available; however the need for mental health care has increased. The conflict has traumatized a significant part of the population, leading to a likely increase in mental health conditions including post-traumatic stress disorder and depression.
In one case, a 17-year-old boy with an intellectual and physical disability, Suleiman, was fleeing when he saw his uncle being brutally killed. Suleiman appeared to be traumatized by what he saw but has never received any counseling or psychosocial support. He told Human Rights Watch:

*My uncle’s death in front of my eyes continues to scare me...When I sleep, I have nightmares that bring back the images of the events I lived. I haven’t spoken to anyone about it.*

While one medical non-governmental group is considering providing mental health support for victims of gender-based violence, these services would not help others with mental health problems.

Mamadou, a 14-year-old polio survivor, lives with his family in the Muslim enclave in Yaloké. When anti-balaka forces advanced, Mamadou, who has a physical disability and used to support himself with a cane, fled with his parents on the back of a donkey, which died on the way. Mamadou’s father told Human Rights Watch: “Before [the war] Mamadou was better; now he can’t even walk.”
Access to Food

In displacement sites of M’Poko, Yaloké, and Kaga Bandoro, persons with disabilities, especially those without families, are often unable to obtain food during distributions as they typically find out too late or are unable to go because the location is inaccessible. Persons with disabilities living in the M’Poko camp organized a system of food distribution among themselves where a few camp leaders would collect food during distributions and then hand it out to all persons with disabilities who were unable to access the distribution site. However, the transitional government’s decision to end food distributions has proved extremely difficult for persons with disabilities, especially those with no family support, and contributes to malnutrition.

Rodrigue, a young man with a physical disability who lives alone in M’Poko, has to pay someone every day to take him in a cart outside the camp, where he sits all day in the sun to beg for money for food. Once back in the camp, he is dependent on the availability and good will of his neighbors to cook food for him and bring him water. Once the M’Poko camp shuts down and people return home, persons with disabilities like Rodrigue, are likely to continue to have difficulty in getting food and meeting other basic needs. After the food provided by aid groups to returning families runs out, families will have to supply their own food. For persons with disabilities, especially those who were abandoned by their families, this may prove particularly difficult.

For some persons with disabilities living in Yaloké and Kaga Bandoro, even being able to benefit from food distributions is difficult. Noel’s right hand was amputated in 2014 after he was shot by Seleka fighters outside of Kaga Bandoro. “There is not enough to eat and when we are receiving assistance I don’t have the strength to – and can’t carry – my goods,” he said.

Access to Education

Human Rights Watch found that very few children with disabilities are enrolled in schools in camps like M’Poko. The school in the M’Poko camp has over 3,797 children enrolled; of whom only 14 have disabilities. While the school is wheelchair-accessible, the route to the school is not. Children with physical disabilities cannot attend unless a family member takes them there and picks them up, and they have an assistive device. Without an assistive device, such as a wheelchair, children with physical disabilities can find it hard to sit all day on the floor.

The school’s staff told Human Rights Watch that some parents are hesitant to send their children with physical disabilities to the school as they fear that in case of an attack the children will not be able to flee. Children with sensory or intellectual disabilities are unable to attend the school because the school does not have teachers trained in inclusive methods. “None of our staff is trained to teach children who are blind, deaf, or have other disabilities,” said a staff member working at the school. “So it serves no purpose to let children with disabilities come to this school.” The school staff has encouraged parents to enroll their children, but has not actively sought to enroll children with disabilities.
CENTRAL AFRICAN REPUBLIC: PERSONS WITH DISABILITIES LEFT BEHIND

THE WAY FORWARD

The transitional government in the Central African Republic, the United Nations and aid agencies should begin to systematically collect data on persons with disabilities to integrate their needs in policy decisions and humanitarian assistance programs. Donors should also invest in humanitarian efforts that are inclusive of persons with disabilities. Below are more detailed recommendations.

RECOMMENDATIONS FOR THE TRANSITIONAL GOVERNMENT, MINUSCA, UN AGENCIES AND AID ORGANIZATIONS IN THE COUNTRY

- Develop an action plan to include and support persons with disabilities in peacekeeping activities, with a special focus on how civilian protection and humanitarian support programs can incorporate their needs.

- Identify, register and include in any data collection efforts information on persons with disabilities and their needs.

- Ensure access to basic services for persons with disabilities. Provide priority and/or separate access to food and non-food distributions for persons with disabilities; provide adequate medical care, including mental health care, counseling and psychosocial support; help children with disabilities access education by training teachers and making classrooms fully accessible.

- As far as is feasible, ensure the physical environment in displacement camps, including housing, schools, and medical facilities, are accessible to persons with disabilities and that the architecture and layout of camps cater to the needs of persons with disabilities. Include persons with disabilities in camp planning and evacuation plans.

- Provide persons with disabilities equal access to information about camp services to persons with disabilities such as medical care, food distribution and evacuation plans, through easy-to-understand materials or other relevant communication methods.

- Train field staff working in displacement camps to identify and appropriately respond to the needs of persons with disabilities.

- Provide access to a sign language interpreter or an appropriate support person in medical facilities. In case there is a shortage of interpreters or support people, consider appointing one person who can visit various facilities on different days.

- Appoint persons with disabilities to camp management committees to ensure that their concerns are represented.

- If local organizations exist for persons with disabilities, consult them on how to include persons with disabilities in any humanitarian and aid programs. Reach out to and support local organizations of persons with disabilities.

- Include persons with disabilities and their representative organizations in the upcoming Bangui Forum, and ensure their full participation in future elections.
RECOMMENDATIONS FOR INTERNATIONAL AND REGIONAL BODIES, CONCERNED GOVERNMENTS, AND DONORS

• Urge that each peacekeeping mission has adequate disability expertise on staff and that peacekeeping programs are sensitive to the concerns of persons with disabilities.

• Request UN peacekeeping mission staff to develop action plans for how persons with disabilities will be included and supported by peacekeeping activities.

• Provide appropriate financial support to ensure that persons with disabilities are included in humanitarian efforts.

Members of a local band composed of people with disabilities sing songs promoting peace in the Central African Republic in Bangui’s M’Poko camp for displaced people as the crowd cheers on.
Members of the Central African Republic national para basketball team—comprised of both Muslim and Christian players—train in a stadium in Bangui.