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# Israelis with Disabilities During the Israel-Hamas War Facts and Figures

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ג'וינט – ישראל מעבר למגבלות | חיים עצמאיים ואוטונומיים לאנשים עם מוגבלות

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# Introduction

Throughout the history of the State of Israel, its population has been forced to cope with ongoing violent conflict and terrorism. Until the 1991 Gulf War, wars occurred along the country's borders, with the civilian population hardly exposed to a direct threat (Gilat & Latzer, 2006). However, since then, multiple conflicts have occurred involving the Israeli civilian population as well.

Article 11 of the Convention on the Rights of People with Disabilities, hereinafter CRPD, (CRPD; United Nations, 2006) obligates the signatories to the Convention to ensure the protection and safety of people with disabilities in risk situations. This is because people with disabilities tend to be disproportionately harmed in crisis and emergency situations and their level of preparedness for such situations is lower, as is the state's preparedness to meet their needs under such circumstances. Moreover, after a disaster or a war they remain at heightened risk of negative effects, such as mental distress, damage to their health, exposure to violence and exploitation, loss of housing and income and general financial difficulties (Admon-Rickk, 2022; Gershon et al., 2013; Finkelstein & Finkelstein, 2020; Karni-Visel et al., 2023; Priddy, 2019). Therefore, and because people with disabilities represent 18% of Israel's population (Nagar Eidelman et al., 2022), the state bears a heavy burden of responsibility for ensuring the safety of people with disabilities during emergencies.

The war that broke out on October 7, 2023, has left the entire Israeli population in a state of uncertainty regarding their security and their economic, social and personal situations. The evacuation of hundreds of thousands and the provision of emergency services by both the state and voluntary organizations have highlighted the need for immediate solutions, as well as for strategic planning for long-term solutions. Adults and children with

disabilities have multiple, diverse needs, affected by the type of disability and their individual life circumstances (Namer Furstenberg et al., 2023). The war has posed additional challenges for this population, which copes with multiple barriers in routine times as well. In order to properly serve people with disabilities during this emergency, their needs and unique challenges at this time must be carefully studied and future emergencies should be prepared for by providing guidelines and by preparing people with disabilities, their families and communities, and government and civil society service providers. Despite the complexity of this challenge, a well-organized infrastructure must be put in place to serve the needs of diverse populations, including people with disabilities.

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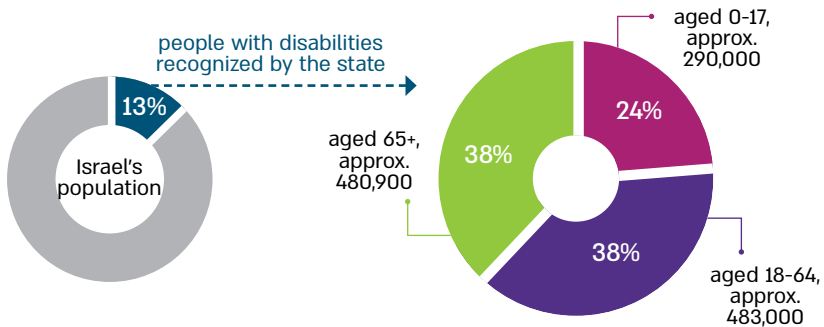
This document presents data about people with disabilities in Israel and their needs in times of emergency, as well as information on services provided in Israel since the outbreak of the Israel-Hamas War. The document is based mainly on information collected in interviews with representatives of government ministries and on data provided especially for this document by government ministries, NGOs, and other sources.


Note that the data presented below are only illustrative, designed to provide an overview of the situation. Many other organizations not mentioned here have been providing services and interventions for people with disabilities during the war. A table with complete information about the services for people with disabilities and their families during the war may be found on the [Myers-JDC-Brookdale Institute](#) Hebrew website. The table summarizes information about dedicated or adapted emergency services, and details the nature of the service, its target audience, and how to contact the service providers.

# People with Disabilities in Israel

## Population Size

Israel is home to approximately **1,254,000** people who are listed in the Disabilities Registry of the Israel Central Bureau of Statistics and are recognized by the relevant government ministries as people with disabilities.




 In 2022, approximately 1,254,000 people with disabilities were recognized by the state. This number included approximately 290,000 children, 483,000 adults of working age (18-64), and 480,900 older adults aged 65+. In 2022, people with disabilities recognized by the state represented 13% of Israel's population. The government bodies recognizing this population included the Ministry of Welfare and Social Affairs (hereafter,


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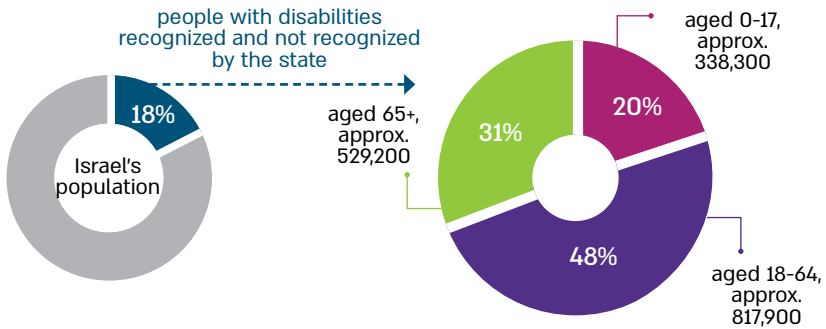
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Ministry of Welfare), and/or the National Insurance Institute, and/or the Ministry of Defense, and/or the Ministry of Education.<sup>1</sup>

 In November 2023, of all people with disabilities recognized by the government, 171,012 were recognized by the Disabilities Administration of the Ministry of Welfare (56,687 children, 90,115 aged 19–67, and 23,415 over age 67). 66,914 of all those recognized by the Disabilities Administration (39%) used its services.

Estimate based on self-report surveys:

**1,700,000** people with disabilities



 Data based on self-reports by respondents to national surveys suggest an estimated 1.7 million people with disabilities, of whom 338,300 are children, 817,900 are working age adults, and 529,200 are aged 65+ (Nagar Eidelman et al., 2022). According to these self-report data, people with disabilities represented 18% of Israel's total population

<sup>1</sup> Myers-JDC-Brookdale Institute's data processing of a press release by the Israel Central Bureau of Statistics (ICBS, 2023) and data on special education pupils in a report by the Knesset Research and Information Center (Weisblei, 2022).

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in 2021. This number is higher than the number of those recognized by the state, since it also includes a large non-recognized population (for example, people with disabilities who are not entitled to a General Disability Allowance (GDA) because their monthly salary is higher than 7,122 Israeli Shekels, people whose disability percentage score is lower than the threshold required for a GDA, or people who are uninterested in official recognition, for various reasons).

 People with disabilities who normally have no need for services in their daily lives may require them in an emergency. It is therefore essential to understand the needs of all people with disabilities, including those not known to the government ministries.

## People with disabilities who were evacuated from their homes

 During the war, the inhabitants of communities along the borders with Gaza in the south (red) and Lebanon in the north (green) were evacuated by the government. From the war's outbreak on October 7 until the middle of November 2023, some 70,000 people were evacuated from the south, and another 60,000 from the north.<sup>2</sup> The inhabitants of Ashkelon, north of Gaza, were also offered the option to leave the city for a limited period (it is unknown how many out of the city's 150,000 inhabitants were indeed evacuated), but it is unclear how many of the evacuees are people with disabilities.

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<sup>2</sup> Myers-JDC-Brookdale Institute's data processing based on the list of local authorities evacuated, provided by the Tkuma Administration, the Municipalities File (ICBS, 2022), and the Local Authorities File (ICBS, 2021).

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## Communities on the border with Lebanon

Total evacuees: **60,000**

### Ministry of Welfare:

Evacuees recognized by the Disabilities Administration of the Ministry **2,799**

Service users **1,189**

### Ministry of Health:

Users of community mental health rehabilitation services **283**

### Ministry of Education:

Special education pupils **2,026**

## Communities on the border with Gaza

Total evacuees: **70,000**

### Ministry of Welfare

Recognized by the Disabilities Administration **1,539**

Service users **783**

### Ministry of Health

Users of community mental health rehabilitation services **278**

### Ministry of Education

Special education pupils **2,655**



As of November 2023, the Disabilities Administration recognized 1,539 people with disabilities living within 7 kilometers of the border with Gaza, of whom 723 used its services; it also recognized 2,799 people with disabilities living within 5 kilometers of the border with Lebanon, of whom 1,189 used its services.

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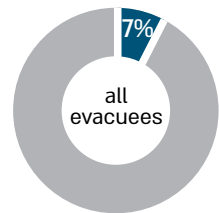
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👤 According to the Ministry of Health, as of October 2023, the number of people with mental disabilities using community rehabilitation services was 278 in the local authorities bordering on Gaza (of whom 141 in Sderot), and 283 along the northern border (of whom 175 in Kiryat Shmona).

👤 According to the Ministry of Education, in the beginning of the 2023-24 schoolyear, 2,655 pupils along the border with Gaza (of whom 1,049 from Sderot), and 2,026 along the northern border (870 from Kiryat Shmona) used special education services (in regular or special education schools) An additional 4,375 pupils used special education services in the city of Ashkelon (where the evacuation arrangements were different). This data does not include pupils in local authorities where some of the inhabitants have self-evacuated.

👤 Adults and children with disabilities recognized by the Disabilities Administration, Special Education Division in the Ministry of Education, or Division for Rehabilitation of People with Mental Disabilities in the Community in the Ministry of Health represented less than 7% of all evacuees.<sup>3</sup>

Adults and children with disabilities recognized by government ministries



👤 Many professionals reported that there was no systematic registration of the number of people with disabilities among the evacuees. Nevertheless, we may assume that the large majority of adults and children with

<sup>3</sup> Myers-JDC-Brookdale Institute's data processing based on information supplied by different government ministries the list of local authorities evacuated provided by the Tkuma Administration, the Municipalities File (ICBS, 2022), and the Local Authorities File (ICBS, 2021).






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disabilities who are recognized by the Ministries of Welfare, Health and Education were evacuated from their place of residence as a result of the war.

-  The Disabilities Administration reported that the 296 residents of twelve out-of-home care settings under its responsibility were evacuated from the communities bordering on Gaza and Lebanon and from the city of Ashkelon. During November of 2023, 35 residents from Ashkelon returned to their out-of-home care settings.
-  The Disabilities Administration reported that it evacuated a total of some 1,000 people with disabilities who use welfare services and arranged for their absorption in welfare settings in the target communities.
-  The multiple difficulties involved in evacuation, the inaccessibility of evacuation procedures and lack of information about them may leave people with disabilities behind (Priddy, 2029).
-  The experience of being uprooted to a temporary residence is particularly difficult and has a considerable impact on people with disabilities (Battle, 2015). People evacuated from their homes due to the war were forced to leave their familiar environment, their community, and their social support system, and their daily routine has been seriously disrupted. All of these factors result in greater difficulty for people with disabilities, especially children (Battle, 2015; Rabinovitch & Weisblei, 2023).
-  People with physical disabilities need a room that allows for convenient mobility, without stairs, and with enough space for their wheelchair or other mobility aids. Most of the people evacuated from the designated areas were moved to hotels and the interviews for this publication indicate that some people with disabilities were moved to inaccessible or unsuitable rooms. Moreover, staying in the same room with other

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family members is challenging for most people, but particularly for people with disabilities. Interviewees stated that the hotel surroundings were particularly unsuitable for people coping with Sensory Modulation Disorder, such as people with autism spectrum disorders.

-  According to professionals, the number of accessible rooms in the hotels is limited (usually a few in each hotel), and there was no preliminary and centralized source of information about the number and location of accessible rooms in hotels receiving evacuees. Moreover, these rooms were not designated for people with disabilities, so that in some cases, people without disabilities were housed in accessible rooms.
-  Professionals also stated that continuity of treatment is important to all people with disabilities but is especially challenging for evacuees. While health and education services were provided in many hotels, these did not necessarily include all of the services used by people with disabilities, such as paramedical services or special education settings.
-  Some people with disabilities or families with a person with disabilities living in communities not included in the government evacuation program, still needed to evacuate or find alternative housing. These were mainly people who could not protect themselves against the rocket threat or experienced anxiety because of recurring rocket attacks and sirens. Many callers to the various hotlines for people with disabilities sought help in finding and financing alternative housing, particularly during the first month of the war.
-  Examining the calls to the various hotlines indicated that some of the people with disabilities, particularly those with physical disabilities or chronic diseases, required assistance or special transportation in order to be evacuated. Others needed resupply of medical equipment

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or mobility devices because these had been left at home or had been lost while relocating. For certain individuals, there was a need for additional equipment due to the transition to a place not fully adapted to their needs.


 Apart from the evacuation organized by the government, many civil society organizations assisted in the evacuation itself, in locating accessible housing, and in accommodating the evacuees. For example, by mid-November the Purple Vest Mission (of the Access Israel NGO) handled 784 requests for alternative housing, providing a solution for 222 families (971 individuals). The "Purple War Room" hotline for aid to people with disabilities during the war handled some 220 requests for locating or financing alternative housing.

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# Challenges of People with Disabilities in Emergencies

## Protection


-  People with disabilities may find it difficult to reach protected spaces in times of a rocket attack. For example, people with a physical disability or vision impairment can find it hard to reach the protected space on time, while people with a hearing impairment can have difficulty in receiving the rocket alert (for further details, see below in the sections on the specific needs of people with these disabilities).
-  Apart from the heightened risk of injury in the case of a rocket attack, difficulty arriving at the protected space within the time limit defined by the Home Front Command for each area may affect one's sense of personal security and lead people with disabilities to avoid going out of their homes. In such a case, a person with disabilities will require help in obtaining consumer goods and equipment and in alleviating loneliness (for further details, see below in the sections on the specific needs of people with these disabilities).
-  The Home Front Command established an assistance and information hotline regarding protection and behavior during a rocket attack adapted for people with a variety of disabilities. Information is offered in Hebrew, Arabic, Russian, and Amharic. The hotline is accessible by phone and several forms of text media (including text messages, WhatsApp, Messenger, Telegram, and an online form).



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-  From the outbreak of the war to mid-November, the Home Front Command Hotline was contacted by 516 people with disabilities, representing 0.4% of all callers. Presumably, the actual rate was higher since some callers did not present themselves as people with disabilities. Still, this rate is significantly lower than the rate of people with disabilities in Israel, even though the website and phone hotline are accessible.
-  Although the Home Front Command is the authority that provides reliable information regarding personal safety and protection, some people with disabilities turn to other sources for questions about safety and requests for guidelines for their behavior in emergencies.

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## Emotional Support


-  Emergency situations cause stress and anxiety for most of the population (Bar-Tur & Hantman, 2010). People with disabilities are at particular risk for mental distress and PTSD during emergencies (Karni-Visel et al., 2023).
-  Crises can be particularly detrimental to the emotional state of people with disabilities. For example, a study on the impact of the COVID-19 crisis on people with disabilities found that among the various indicators examined (health status, emotional state, general functioning, etc.), their emotional state was most severely impacted: 66% of people with disabilities reported a deterioration in their emotional state due to the COVID-19 crisis. Moreover, 70% of the parents who participated in the study reported a deterioration in the emotional state of their children with disabilities (Barlev et al., 2020). Another study conducted among parents found that the most severe impact of the COVID-19 crisis on children with disabilities was on their emotional condition (Barlev et al., 2021b).
-  Three service providers contracted by the Ministry of Welfare (Shekel, EDNM, and the Argaman Institute) are responsible for providing emotional support to people with disabilities. They employ professionals trained in providing dedicated care for this population. Currently, they provide services in six treatment centers, hotlines, out-of-home care settings and hotels countrywide. The Disabilities Administration reported that from the outbreak of the war to November 23, 2023, 349 people with disabilities were served by hotlines, 169 received emotional therapy in various centers, 70 were treated in hotels, and emotional intervention was provided in 17 out-of-home care settings.


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 In addition to government services, many civil society organizations have rallied to provide emotional support. Some of their services are designed for the entire population and serve people with disabilities as well, while others are dedicated to people with disabilities. Most organizations have reported a multifold increase in the number of calls to emotional support hotlines (Blank, 2023). For example, by mid-November, Eran (Emotional First Aid) reported more than 54,000 calls (about 3,000 a day) – three times the normal amount. This service is provided to the entire population, and the number of calls by people with disabilities is unknown. ALUT (Israeli Society for Autistic Children) received 1,600 calls requesting emotional support (more than half the calls to this hotline), presumably mostly from people with autism and their family members.


 The national trauma as a result of the war has led to an increase in the number of individuals currently, and expected to be, in need of mental health services in the short and long term. For example, the Maccabi health plan HMO reports a 30% increase in medical diagnoses of depression and anxiety, and a 90% increase in purchases of over-the-counter sedatives in its pharmacies (doctorsonly.co.il 2023). Due to the expected increase in the need for help and support in this area, an increase in the mental health workforce in the public sector is also required, particularly given the serious shortage prior to the war (Blank, 2023). Interviewees have expressed concern that given the increase in the demand for services and the sudden and significant overload on the mental health system, people with disabilities will not receive optimal treatment.



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-  Exposure to traumatic events can result in various mental symptoms, including anxiety, anger, helplessness, and insomnia. In most cases, with time, gradual relief will be experienced, even without treatment. Therefore, it may be that many people will require short-term emotional support, while only some of them will develop severe and ongoing mental distress (Blank, 2023).
-  It is yet unclear how many people will become mentally disabled due to the war. In a document submitted to the Knesset Health Committee, the Ministry of Health argues that the current war is an exceptional event, causing a crisis in the citizens' trust in the system and their basic sense of security. Therefore, it is impossible to rely on standard estimates of development of PTSD reported in the literature, and it is impossible to assess the future scope of needs (Blank, 2023).

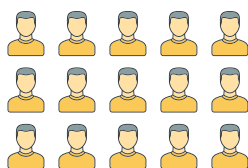
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## Loneliness and Leisure Activities

 In routine times, people with disabilities experience loneliness more than people without disabilities. According to the 2022 Social Survey by the Israel Central Bureau of Statistics (ICBS), 15% of people with disabilities often felt lonely, as opposed to only 3% of people without disabilities.<sup>4</sup>


### People with disabilities experience loneliness more than people without disabilities




People with disabilities  
15%



People without disabilities  
3%

 The sense of loneliness is exacerbated in wartime, as adults and children with disabilities are required to spend long hours confined to their homes, detached from their social environment. Many services (employment, leisure, education, health, etc.) were suspended upon the outbreak of the war, and social encounters were minimized. Moreover, people with disabilities experienced increased difficulty in leaving their homes due to their general anxiety and fear of sirens, and their difficulty in finding shelter in public spaces.

 This created the need for home-based activities (such as online activities, games and art kits) or in places with a shelter located near one's home (such as theaters and afterschool activity centers). Representatives of

<sup>4</sup> Social Survey data (ICBS, 2022), processed by the Myers-JDC-Brookdale Institute.

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many NGOs reported recruiting volunteers to call and even visit people with disabilities in their homes. Some NGOs initiated activities and face-to-face meetings and distributed games and art kits. For example, Enosh (Israeli Mental Health Association), activated its "Beshutaf" (Together) program online, serving some 2,000 individuals by the end of November 2023. ILAN, which serves individuals with physical disabilities, expanded its "Sports at Home" project for recreational exercise in the families' homes or at the locations to which they were evacuated. The Center for Independent Living Online expanded its activities and organized peer dialogues on the internet. Finally, AKIM, serving people with intellectual disabilities, distributed more than 300 tablets to children.


 The Disabilities Administration reported that from the outbreak of the war until late November 2023, the Ministry of Welfare helped hundreds of people with disabilities take short vacations far from the areas of conflict, accompanied by a family member. Together with AKIM, the Administration also created special leisure programs for 164 out-of-home care settings countrywide; and with the help of the Shalem Foundation, it organized leisure activities in 60 hotels. In addition, the Administration created leisure, relaxation, and occupational activities in local community centers for people with disabilities who were evacuated to alternative locations.

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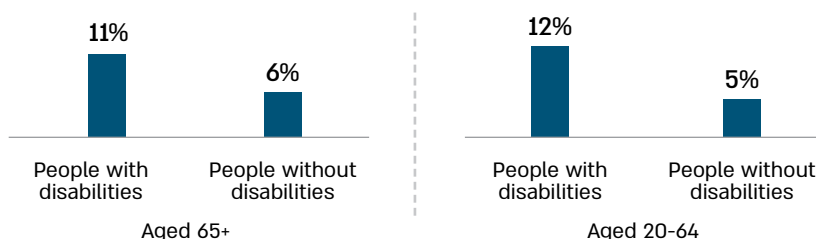
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## Transport and Supply of Food and Equipment

**Compared to people without disabilities, people with disabilities reported that there was no one they could rely on in an emergency or crisis.**




 People with disabilities have less informal support in emergencies. According to the Social Survey (2022), 12% of working age (20-64) people with disabilities reported not having someone to rely on in an emergency or crisis, compared to only 5% of people without disabilities; 11% of older adults (65+) with disabilities reported that they had no one to rely on, compared to only 6% of their peers without disabilities. Hence the need for assistance by NGOs, volunteers, local authorities, and government bodies such as the Ministry of Welfare to supply food and essential equipment to this population.

 According to interviewees, upon the outbreak of the war many shops were closed which created difficulties in obtaining necessary goods. These difficulties, combined with the anxiety people with disabilities experienced and their difficulty of leaving home, as well as the personnel shortage in organizations serving them, meant that medicines and perishable medical supplies had to be supplied to their homes, out-of-



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home care settings and nursing homes. People evacuated from their homes also needed supplies of food and other goods (such as clothing).


-  The various hotlines received requests for help in transportation, for instance to medical treatments, since public transportation was only partly active, certain transportation services were suspended, and in some cases family members were not available to help. For example, from the start of the war to mid-November 2023, the Purple Vest Mission (Accessibility Israel) served more than 300 people with disabilities who remained in their homes and provided for their needs during this period. In addition, they responded to some 100 requests for the supply of equipment, clothing, medicine, etc., and supplied some 2,000 meals to evacuees. The Purple War Room handled more than 250 requests for food supplies, some 150 requests for the supply of medical equipment or medicines, and 50 requests for deliveries or transportation.
-  By late November 2023, the Ministry of Welfare's 118 Hotline received 164 requests from people with disabilities, mainly for assistance in buying food and medicines or for transportation to hotels or leisure centers.

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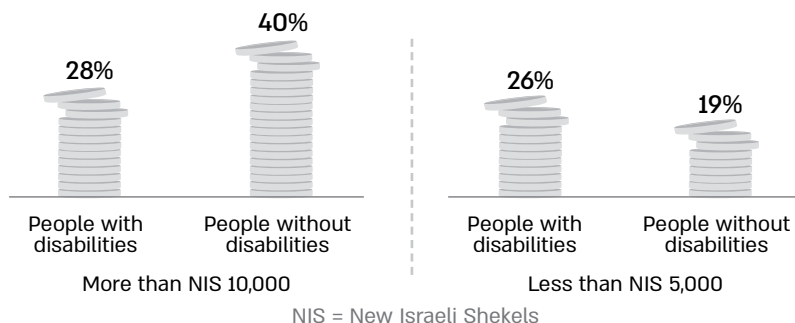
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## Economic Hardship

**The monthly income of employees with disabilities is lower than that of employees without disabilities**



 In routine times, the economic situation of people with disabilities is less good than that of people without disabilities. For example, according to the Social Survey (2022), the income of employees with disabilities is lower than that of employees without disabilities: 26% of working age employees with disabilities reported earning up to NIS 5,000, compared to 19% of their peers without disabilities. In addition, only 28% of employees with disabilities reported earning more than NIS 10,000, compared to 40% of their peers without disabilities.<sup>5</sup>


 People with disabilities are at particular risk of economic hardship after a crisis (Admon-Rick, 2022; Finkelstein & Finkelstein, 2020; Gerson et al., 2013). After the COVID-19 crisis, data on economic resilience pointed to an increased gap between people with and without disabilities. For example, the gap in household income increased from 6% in February 2020 to 15% in November 2021 (Heller et al., 2023). In an emergency,

<sup>5</sup> Social Survey data (ICBS, 2022), processed by the Myers-JDC-Brookdale Institute.

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this population, whose economic situation is already worse to begin with, has greater needs, and it experiences increased difficulties in finding or retaining employment.

- 🗨️ NGO representatives reported that whereas during the first month of the war, they received many requests for food, clothing, and other products, as time went on, they received more requests for economic assistance.

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## Information and Realizing Rights


 There is a shortage of data on people with disabilities. This is true in ordinary times, but more so in emergencies. The findings of the review for this publication indicate that data is not always available or up to date (mainly due to varying definitions among different entities, difficulty in monitoring and gathering of information on a continuous basis, and lack of coordination among the various entities). In some cases, organizations were unable to provide data simply because of their work overload. Even six weeks into the war (in mid-November 2023), there was still no systematic registration and monitoring of certain information by official bodies, such as the number of evacuees with disabilities in hotels, the number of people with disabilities who had self-evacuated, the number of children with disabilities who had no educational setting, or the number of people with disabilities who had sought emotional therapy. The shortage of information about people with disabilities and their families affects the ability of the authorities and other official bodies to plan and provide interventions and prevents synchronized monitoring and follow-up at the individual or family levels (Arnon-Sharabi, 2023; Itzkowitz, 2023).

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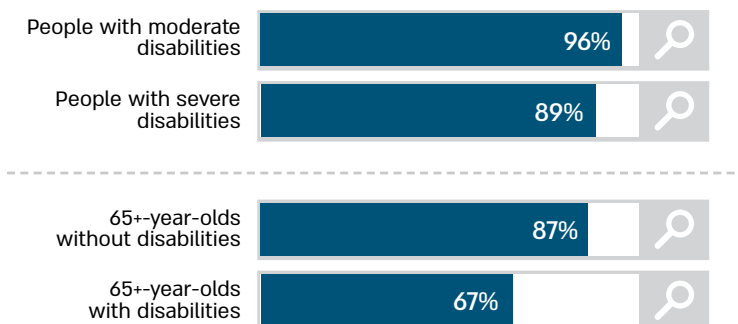
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## People with disabilities, particularly those with severe disabilities, tend to use the internet less



 Due to the war, the provision of some services (including health care and education) has moved online. Some people with disabilities find it difficult to use online services due to their lower digital literacy and general education. For example, people with severe disabilities use the internet less than do their peers with moderate disabilities (89% vs. 96%). 65+-year-olds with disabilities use the internet less than do their non-disabled peers (67% vs. 87%).<sup>6</sup> These people need telephone or face-to-face services or the mediation and support of others in order to use online services (Hercowitz-Amir & Yabo, 2022).


 Even in routine times, much necessary information remains inaccessible to people with disabilities. For example, a survey conducted by the State Comptroller in May 2023 found that 57% of government bodies reported that they had not made all the content and services on their websites accessible, as required. With the outbreak of the war, many government bodies uploaded new pages and updated information on

<sup>6</sup> Social Survey data (ICBS, 2022), processed by the Myers-JDC-Brookdale Institute.


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their websites and social media, much of which remained inaccessible to people with disabilities.

 During the COVID-19 crisis, several issues were raised for discussion in an intersectoral roundtable convened by the Commission of Equal Rights for People with Disabilities: the need for people with disabilities to navigate a flood of daily changing information and multiple practical guidelines; how to act when lacking information specifically relevant to them as people with disabilities; and how to gather information from diverse sources to gain an overview of the situation. Moreover, much of the information published was not accessible to people with disabilities in addition to the difficulty of searching for information from multiple sources. Consequently, people with disabilities often lacked the information required to cope with a rapidly changing reality (Nissim, 2022). The interviews indicated that these difficulties resurfaced during the recent war.

 Services for people with disabilities are highly decentralized in routine times. This makes it difficult for people with disabilities to locate and understand available services and to obtain an integrative and logical response. In an emergency, in addition to the regular service providers, dedicated services are created especially for the emergency. Some of the services and hotlines serve the entire population and others are devoted to people with disabilities. The multiple services and hotlines make it difficult for people with disabilities to decide where to turn. Conversely, many organizations found it difficult to update their websites, so searching for information online was futile.





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-  Information is not always accessible for people with disabilities, especially when it is updated on a daily basis. Moreover, the information is often provided only in Hebrew.
-  Several organizations have managed to consolidate large databases on services provided to people with disabilities: the Commission for Equal Rights of Persons with Disabilities has consolidated Emergency Information and Guidelines (in Hebrew only), and provides an information center; the Keshet NGO (The Association for the Promotion of the Quality of Life and Rights of Families of Children and Adults with Special Needs) has consolidated dedicated wartime information on its website, created an information pamphlet on rights for parents of children with disabilities (in Hebrew only), and operates a center for assistance in realizing rights; and services for this population have been listed in a table (in Hebrew only) on the Myers-JDC-Brookdale Institute website that allows sorting by characteristics and needs.
-  Representatives of various NGOs highlighted the fact that they have been collaborating successfully, and that thanks to their previous acquaintance and information sharing, they have managed to quickly refer people with disabilities to the most appropriate service.
-  From the beginning of the war until mid-November 2023, NGOs have received multiple requests and complaints regarding realizing rights. For example, ALUT received some 1,200 calls (about 40% from the total number of calls to this hotline) for help in realizing rights and how to act during wartime. Bizchut, dedicated to promoting the rights of people with disabilities, received multiple requests for information about wartime rights and emergency-related complaints about inaccessibility.





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## Professionals and Human Resources


-  There is a shortage of human resources specializing in people with disabilities in routine times, and this has increased in recent years. The outbreak of the war resulted in unique difficulties, exacerbating this shortage. For example, professionals from the Israeli Arab and Palestinian populations were afraid to come to work, and professionals evacuated from their homes or drafted into military service could no longer come to work.
-  Interviews indicate that in the weeks after the outbreak of the war, public transportation was only partly active, making it difficult for professionals and caregivers to get to work. Some organizations managed to provide transportation for their employees, but this required budget allocations.
-  Professionals stated that due to the personnel shortage, their organizations had to immediately recruit new employees or volunteers who were not always trained or experienced in working with people with disabilities (see Beit Issie Shapiro, 2023).
-  A professional discussion convened by the Home Front Command on the needs of people with disabilities and older adults among the Arab population raised, among other things, the need to proactively initiate contact with people with disabilities from the general population and particularly with marginalized populations (such as Arabs and older adults) in order to check on how they are managing, to determine whether their needs have changed, and to serve them accordingly. Additional human resources are required to call or visit people with disabilities, since this task is not part of the routine activities of the relevant organizations. Due to lack of personnel, many municipalities

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are unable to initiate contact with people with disabilities, or are able to do so only on a limited scale, which can be particularly detrimental to people with disabilities who lack the personal resources to contact organizations and ask for help (Home Front Command and Civilian Organizations Forum, discussion held on November 28, 2023).


-  JDC-Israel Unlimited and JDC-Eshel, together with the Ministry of Welfare, are currently offering the Community Supporter Program, designed to identify all people with disabilities and senior citizens in each locality, determine their needs, and refer them to community infrastructures for help, as per their needs. The community supporter acts in coordination with and under the guidance of the local social worker and is responsible for proactively identifying people with disabilities and older adults in the community, contacting and providing them with support on an ongoing basis, and referring them to services. Currently, the program focuses on communities in southern Israel located 0-40 kilometers from the border with Gaza and on northern communities located 0-2 kilometers from the border with Lebanon, as well as in five municipalities that have absorbed evacuees. Forty-five out of 54 eligible communities have signed agreements with the JDC, and 25 supporters have been recruited and are already active on the ground.
-  Data from various hotlines suggest that due to the war, the volume of calls from the entire Israeli population has mushroomed. All organizations made an effort to respond to these calls, but due to the work overload and lack of personnel, many have failed to meet the unique needs of people with disabilities.
-  Lack of knowledge, negative attitudes, and false assumptions among service organizations can lead to disregarding and excluding people

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with disabilities when formulating assistance programs (Kett & van Ommeren, 2009; Rohwerder, 2013), or to providing unsuitable services. Indeed, many organizations provided immediate help, but not necessarily help suited to the needs of people with disabilities. For example, there were cases of professionals and volunteers who did not know how to behave with this population or provide it with the appropriate services.


-  Every Israeli is liable to be personally affected by such a crisis, including professionals serving people with disabilities. The interviews indicate that some of them found it difficult to provide optimal interventions due to their own distress, and that they too needed emotional support.
-  Some NGOs have organized training for professionals, usually online, uploading training videos and developing other initiatives to meet their employees' needs. For example, Beit Issie Shapiro (Changing the Lives of People with Disabilities) created a training film for therapists on coping with stress and trained 1,123 employees by late November 2023; Enosh contacted all its staff in communities bordering on Gaza and victims of the October 7 attack to provide them with preliminary emotional-mental therapy.

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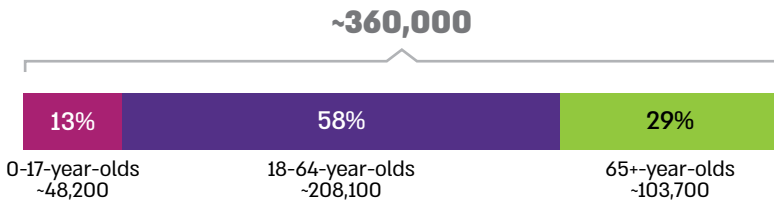
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# Needs of People with Disabilities in an Emergency

People with different disabilities have different or unique needs in an emergency. The fact that many people have more than one disability should be taken into consideration.

## Physical Disability




- According to the Disabilities Registry of the ICBS, in 2022, more than 360,000 people with physical disabilities were officially recognized by the state. They included approximately 48,200 children, 208,100 working-age adults, and 103,700 older adults (65+).
- As of November 2023, out of all people with physical disabilities recognized by the state, 39,704 were recognized by the Ministry of Welfare's Disabilities Administration (7,936 minors, 30,909 aged 19-67, and 678 aged 67+). 8,207 people with physical disabilities recognized by the state used the Administration's services (21% of all those recognized by the Administration including 2,153 minors, 5,724 aged 19-67, and 330 aged 67+).


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 According to the 2022 Social Survey, some 536,000 of all adults aged 20 and above (9%) reported that they are unable to walk or have significant difficulty walking (264,000 of working age and 272,000 aged 65+). Thus, the total number of people with mobility difficulties is higher than the number of those with physical disabilities recognized by the government.

 One of the main challenges faced by people with physical disabilities in wartime is difficulty reaching a shelter or protected space within the time limit defined by the Home Front Command according to their distance from the border (Home Front Command and Civilian Organizations Forum, discussion held on November 28, 2023).

 Some protected spaces are inaccessible to people with physical disabilities, who therefore avoid using them. Factors preventing access include stairs, sharp inclines, non-adapted entrances, or distance (JDC-Israel, 2009; State Comptroller, 2018).


 People with physical disabilities require assistance to remain in their homes in the community during an emergency. This includes purchasing food and medicines, obtaining information and explanations about current events, personal assistance and support, and obtaining emergency equipment. Moreover, services adapted to the needs of people with physical disabilities are an essential element of protected spaces, without which, they cannot be considered accessible and cannot serve their purpose (JDC-Israel, 2009). During prolonged emergency periods, additional needs may arise due to mobility difficulties, including the need for assistive devices and technologies. Some people will require a resupply of medical equipment or assistive devices because their own items have not been evacuated together with them, or because they have been damaged, lost, or become obsolete.


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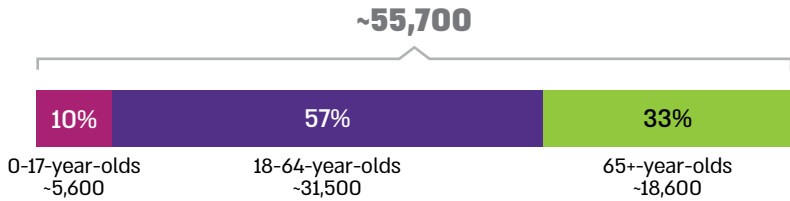
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 Some people with physical disability who do not have an available or sufficiently accessible shelter require evacuation to an alternative place of residence (Eliyahu Hai & Bendell, 2023). If they are assisted by a caregiver, the caregiver needs to be evacuated as well. Interviews indicate that evacuating people with physical disabilities from their homes is a complex task in ordinary times, let alone in emergencies, whether the evacuation is to the home of a relative or volunteer, or to a hotel. The main challenge is to make sure that the alternative housing is accessible to the evacuees and meets their needs.

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## Hearing Impairment



- According to the Disabilities Registry of the ICBS, in 2022, approximately 55,700 people with hearing impairment were officially recognized by the state. They included approximately 5,600 children, 31,500 working-age adults, and 18,600 older adults (65+).
- As of November 2023, out of all people with hearing impairment recognized by the state, 10,728 were recognized by the Ministry of Welfare's Disabilities Administration (2,173 minors, 7,153 aged 19-67, and 1,369 aged 67+). They included 2,514 people with hearing impairment (23% of all those recognized by the Administration) who were users of the Administration's services.
- According to the 2022 ICBS Social Survey, some 141,000 of all adults aged 20 and above (2%; about 61,000 in working age and 80,000 aged 65+) reported either being unable to hear or having considerable difficulty hearing. Thus, the total number of people with hearing impairment is higher than the number of those recognized by the state.
- People with hearing impairment often find it difficult to hear sirens or other alerts (Battle, 2015). During the current war, although the Home Front Command cellular application was adapted for people with hearing impairment and causes the phone to vibrate and turn




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on a light when a siren sounds, many have complained that this is insufficient. For example, the app provides a warning only when the phone is charged and online; it is ineffective when the phone is not adjacent to the owners or when they are asleep; on some phones the light function is not operational; and some people with hearing impairment do not have a smartphone or avoid using their device on the Sabbath for religious reasons.


-  Interviews with professionals serving people with hearing impairment indicate that hundreds of them have contacted various helplines, including that of the Home Front Command, in an attempt to solve the problem of receiving alerts during rocket attacks (for example, by mid-November 2023, Bekol – Organization of Hard of Hearing and Deaf People – received about 200 calls on this matter). Various companies offer solutions such as a “smart bracelet”, but hitherto, none of them have been approved by the Home Front Command and they are not funded by the state.
-  The Disabilities Administration reports that by the end of November 2023, 216 people with hearing impairment purchased a subsidized smart watch or bracelet that vibrates when there is a siren.
-  Representatives of NGOs that provide assistance and services to people with hearing impairment report that they often experience difficulty in receiving news updates through the media. The representatives suggest that news broadcasts should be made simultaneously accessible (using live subtitles), enabling everyone to receive immediate updates about the war and rocket threats. Some broadcasts provide sign language interpretation, but many of those with hearing impairment do not use sign language, making it irrelevant for them.



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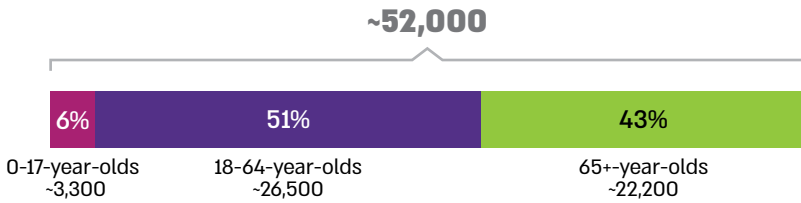
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-  Another need is to make medical care information and emotional support helplines accessible by enabling communication via text or sign language. The NGO representatives interviewed report that many of the helplines currently providing services can be contacted via text, and that some use sign language interpretation services in real time for video chats between people with hearing impairment and the service providers. For example, by mid-November 2023, the Sign Now company reported enabling more than 1,250 calls to various helplines using a sign language interpreter.
-  Among complaints made to NGO helplines for people with hearing impairment was the fact that while running to a shelter or when being evacuated from their homes, some people with hearing impairment forgot or did not manage to take their hearing aids with them, or they fell and lost them. Hence the need for a service for urgent replacement of substitute hearing aids.

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## Vision Impairment




-  According to the Disabilities Registry of the ICBS, in 2022, approximately 52,000 people with vision impairment were officially recognized by the state. They included about 3,300 children, 26,500 working-age adults, and 22,200 older adults (65+).
-  As of November 2023, out of all people with vision impairment recognized by the state, 23,878 were recognized by the Ministry of Welfare's Disabilities Administration (1,091 minors, 9,876 aged 19–67, and 12,908 aged 67+). They included 8,974 (38%) users of the Administration's services.
-  According to the 2022 ICBS Social Survey, some 182,000 of all adults aged 20 and above (3%; about 82,200 of working age and 100,000 aged 65+) reported being either blind or having considerable difficulty seeing. Thus, the total number of people with vision impairment is higher than the number of those recognized by the state.
-  People with vision impairment often face orientation and mobility difficulties and find it difficult to navigate their environment safely (Hochman & Lapid, 2022; Perasso et al., 2023). Therefore, they may take longer to reach shelter when required. When the shelter or protected space is located outside their home, or when they leave home, additional difficulties may be involved (including falling, accessibility difficulties,





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or being unfamiliar with the way to protected spaces), which may prevent them from reaching shelter and even cause secondary injuries.

-  People with vision impairment may find it hard to identify a security threat in their immediate environment (such as terrorists or suspicious items).
-  These difficulties can make people with vision impairment feel anxious and afraid, preventing them from leaving home. Note also that these people do not drive (Hochman & Lapid, 2022). Therefore, some of them need help with shopping and errands, as well as visits to mitigate their loneliness.
-  People with vision impairment require vocal adaptation of textual information (Amemiya & Sugiyama, 2008). The inaccessibility of websites, applications, and graphic information makes it challenging for people with vision impairment to gather information and use certain services, given that many of the services have moved online (Hochman & Lapid, 2022). Websites providing emergency information are required by law to be accessible to people with disabilities, but not all websites have implemented the regulations, particularly those that were created hastily following the outbreak of the war.
-  Some emergency services may be contacted only in writing (for example, by filling out online forms). This medium is not always accessible to the visually impaired. Therefore, they require a human response in hotlines and helplines (for example, those of the Home Front Command, police, medical and mental health services, and information sources). Today, most of these services provide a human response, but there are still some that can be contacted in writing only.

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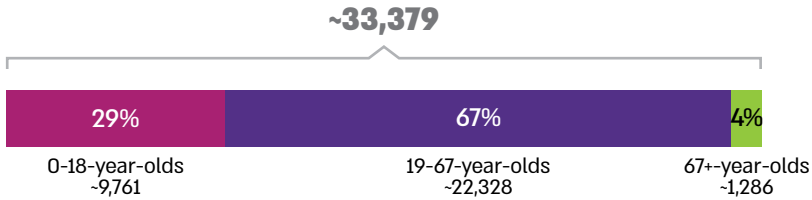


-  People with vision impairment who were required to leave their homes during the war needed an accessible housing alternative adapted to their unique needs (for example, a place which enabled them to keep their guide dog for those assisted by one; or the existence of spatial landmarks that enable safe and easy mobility). Our interviews noted the difficulty of providing appropriate housing for the visually impaired. For example, the Jewish Institute for the Blind in Jerusalem hosted some fifty people with vision impairment evacuated from the areas of conflict or in need of respite, funded by the Ministry of Welfare.
-  For almost all the hotlines, there was no record of whether the people who requested their services were visually impaired. One may assume that people with vision impairment contact the hotlines intended for the general population, since their disabilities do not prevent them from using regular telephone services.

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## Intellectual Disability






- All people with intellectual disability are purported to be recognized by the Disabilities Administration in the Ministry of Welfare. As of November 2023, 33,379 people with intellectual-developmental disability were recognized by the Administration (9,761 minors, 22,328 adults aged 19-67, and 1,286 aged 67+). They included 24,183 people with intellectual disabilities (72% of those recognized by the Administration) who were users of the Administration's services (5,546 minors, 17,583 adults, and 1,054 older adults).
- The data here refer to intellectual-developmental disability only, that is, a disability originating in childhood, and do not include people who have become intellectually disabled later in life due to head injuries, disease, or old age (such as in the case of dementia). According to the Ministry of Health (2023), the number of people with dementia in Israel is estimated at 100,000.
- The data also exclude people with borderline intellectual functioning who do not meet the definition of intellectual disability, but have needs similar to those of people with mild intellectual disability. The Disabilities Administration recognizes 8,909 people with borderline intellectual functioning (2,172 minors, 6,524 aged 19-67, and 213 aged 67+). They include 6,104 (69%) users of Administration services.

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-  People with intellectual disability have difficulty understanding information (Yalon-Chamovitz, 2009), including the wartime situation, its meaning, and implications (Battle, 2015; Rohwerder, 2013). Cognitive difficulty can lead to a misunderstanding of the nature of the threat and of the relation between the threat and the behavior required (Bachner et al., 2023; Nissim, 2020), as well as to difficulty in coping with the crisis and understanding how to seek help (Battle, 2015). This can lead, for example, to resistance when required to enter a shelter.
-  People with intellectual disability require adaptation, mediation, and explanation of the terminology related to the war and the security situation and of news updates and security instructions, all according to their level of understanding. Accordingly, various organizations have published guidelines for family members and professionals to help them discuss the situation with people with intellectual disabilities, as well as adapted (linguistically simplified) explanations. For example, a Hebrew [glossary](#) was published with simplified definitions of war-related terms such as “terrorism”, “Gaza”, or “soldier in the reserves” (Akim, 2023); explanations by the Home Front Command (National Emergency Portal, 2023b) on [rocket attacks and how one should behave in these circumstances](#); as well as guidelines for doctors, nurses, social workers and casualty officers on [breaking bad news](#) such as the death in combat or the captivity of a relative (Edri, 2023).
-  The disruption of routine, as well as the stress communicated by people in their environment, including family members and therapists, can make people with intellectual disability experience heightened distress, confusion, and anxiety (Bachner et al., 2023; Nissim, 2020). These feelings might escalate when a siren is heard, making it difficult for them to function properly and enter the protected space. Nevertheless, we have

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found no clear instructions for professionals and family members on how to act in these situations.

- 💬 When individuals with intellectual disability must be evacuated to an alternative living space, they must be carefully prepared for this change, since they normally have trouble adjusting to changes (Nissim, 2020).

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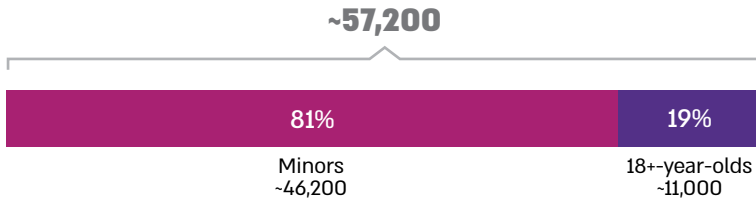
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# Autism






-  In 2022, the ICBS Disabilities Registry included approximately 57,200 people with autism recognized by the state: 46,200 minors and 11,000 adults aged 18+ (including a small number of older adults).
-  As of November 2023, out of all people with autism recognized by the state, 29,499 were recognized by the Ministry of Welfare's Disabilities Administration (20,127 minors, 9,185 adults aged 19–67, and 13 67+-year-olds), of whom 13,341 (45% of those recognized by the Administration) used the Administration's services (7,743 minors, 5,559 adults aged 19–67, and 4 67+ year-olds).
-  Maintaining a strict and carefully planned routine helps people with autism feel safe and conduct themselves independently. Otherwise, feelings such as confusion, anxiety, and sensory and emotional overstimulation are liable to intensify. Breaking the routine can act as a stressor leading to various behaviors such as temper tantrums, avoidance, or overeating (Ben Hai et al., 2021; Sheridan et al., 2023). Activities designed to recover the sense of control by organizing the environment and adjusting daily routines can contribute to reducing these responses (Ben Hai et al., 2021; Ghanouni & Quirke, 2023). Helplines for people with autism have reported thousands of calls (mainly by parents) during the first month of the war.

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-  Most people with autism have sensory modulation difficulties. These are usually manifested by under-responsiveness in most sensory systems and hypersensitivity to touch, noise, or smell. Excessive stimulation can pressure the sensory systems, leading to sensory overload and emotional collapse (Charlton et al., 2021; Marco et al., 2011), which can affect their ability to remain in the sheltered space, which is usually characterized by crowding, noise, and limited personal space.
-  People with autism are usually more anxious than the rest of the population. Factors that contribute to their anxiety include lack of routine (uncertainty), sensory modulation difficulties, as well as difficulties understanding and labeling emotions (South & Rodgers, 2017).
-  Interviews and professional guidelines published during the war<sup>7</sup> suggest that the routine of people with autism was disrupted during the war due to changes in their educational or occupational settings, or the conscription of relatives, friends, and therapists. These disruptions are exacerbated by the overall atmosphere of stress or anxiety due to the war. Adults and children with autism evacuated from their homes during the war have been cut off from their daily environment, distanced from the therapists familiar to them, and have had to adjust to a new environment. Some of them have been evacuated to alternative living arrangements that are not suitable for them in terms of sensory regulation. These extreme changes in their routine pose a heightened risk of behavioral regression and extreme responses, and according to the interviews, some of the evacuated children with autism are already showing signs of regression.

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<sup>7</sup> Professional guidelines provided to the public include [Wartime Tips for Parents and Children and Youth with Autism](#) (Hebrew), by OTI (NGO for people with autism and their families; and [tools for developing resilience and emotional modulation for children with special needs](#) (Hebrew), by the Ministry of Education's Psychological Consulting Service.

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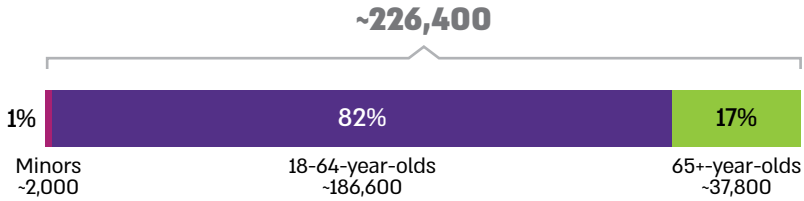
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## Mental Disability






-  In 2022, the ICBS Disabilities Registry included approximately 226,400 people with mental disability recognized by the state: 2,000 minors, 186,600 working age adults, and 37,800 older adults (+65).
-  According to the Ministry of Education, in 2022, there were approximately 16,000 pupils with significant mental difficulties (Rimon-Greenspan & Barlev, 2023). Hence, the number of children with mental disability recognized by the state is significantly higher than their number according to the Disabilities Registry.
-  As of 2022, 35,788 people (from age 18- to retirement) received services from the Ministry of Health through its community mental health rehabilitation services.
-  Emergencies are a source of stress and anxiety for most of the population (Bar-Tur & Hantman, 2010). These difficult emotions are a normal reaction to emergencies and wars. However, these emotions may pose greater difficulty for people with mental disabilities (Sela et al., 2022) and according to professionals, this difficulty is liable to affect their daily functioning to a greater degree than for people without mental disabilities.

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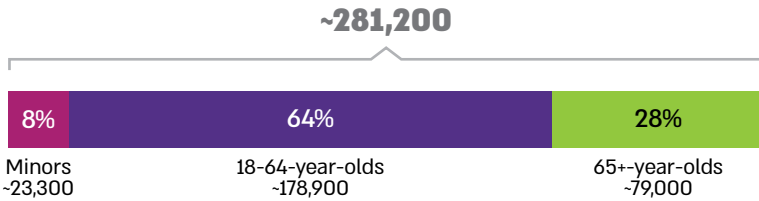
-  Mental health professionals indicated in the interviews that in times of crisis, people with mental disability or emotional difficulties require even more support and assistance services, to serve as a safe space helping them cope with anxieties and concerns and build up their resilience. In addition, they require mental health first aid – short-term professional responses to be provided immediately.
-  Helplines for people with mental disabilities must provide services in a variety of languages, including Hebrew, Arabic, Russian and Amharic. They must also provide culturally sensitive services, particularly for ultra-Orthodox Jewish or Arab clients (Namer Furstenberg et al., 2023; Rimon-Greenspan & Barlev, 2023).





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## Chronic Diseases





-  In 2022, the ICBS Disabilities Registry included approximately 281,200 people with a chronic disease recognized by the government: 23,300 minors, 178,900 working-age adults, and 79,000 older adults.
-  According to the Disability Registry data, a majority (57.9%) of the people with a chronic disease also have a physical disability, and nearly a third (30.5%) also have a mental disability or difficulty, so that the needs of people with physical and mental disabilities are also relevant to this population group (ICBS, 2023).
-  Some individuals with a chronic disease require medical equipment close at hand (such as oxygen tanks), making it difficult for them to reach or remain in protected spaces.
-  In routine times as well as in emergencies, people with chronic diseases must constantly monitor their health status, conduct tests, and ensure regular and appropriate care. Chronic diseases that are not treated or monitored can threaten their life and wellbeing. This difficulty is exacerbated when medical infrastructures are disrupted and access to care and medicines is affected (Ford et al., 2006). As a result of the current war, some clinics closed and routine services were reduced or completely suspended, affecting the continuity of essential treatments.

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-  Many people with chronic diseases need special medicines, foods, medical supplies, and hygienic products (such as adult diapers). During the current war (particularly in the beginning), some found it hard to obtain these necessities independently, due to mobility difficulties (because of their medical condition and/or the fear of going out due to the security situation), or due to the suspension of services or excessive demand that led to shortages among some of the providers of services or products.
-  The inability to receive full medical treatments and feelings of stress and anxiety related to an emergency situation can affect the health of people with chronic diseases and increase their need for healthcare services (Sharma et al., 2008). A survey conducted by the Maccabi health plan HMO among a representative national sample of members of all health plans in Israel found that 30% of people with chronic diseases felt that their illness had deteriorated as a result of the emergency situation (Doctors Only, 2023).

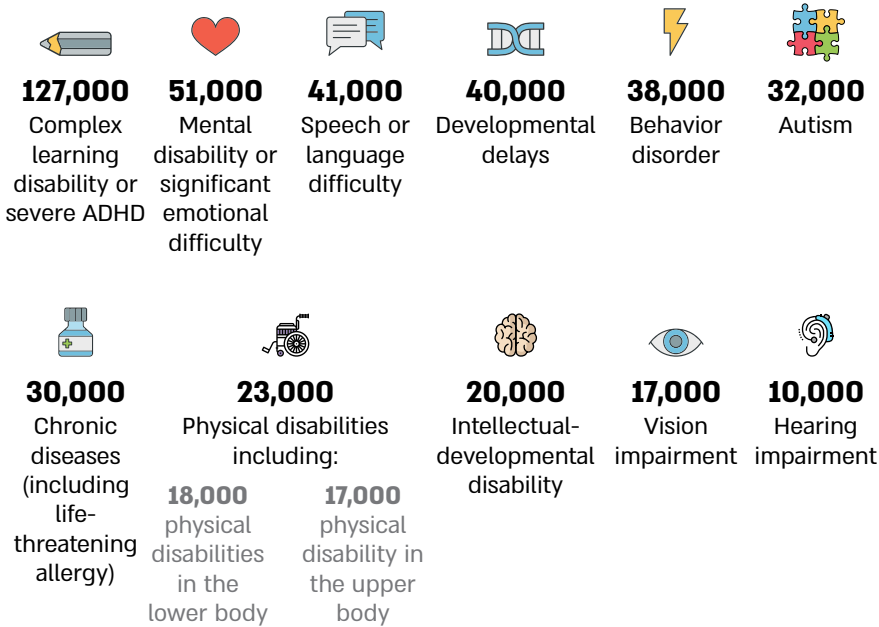
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# Children with Disabilities



Source: Barlev et al., 2021a


Note: 34% of children have more than one disability and each disability is listed separately in the relevant category.

-  According to estimates of all children with disabilities in Israel (both recognized by the state and not recognized), in 2020 there were approximately 326,000 children with disabilities in Israel (aged 0-18, including children with complex learning disability or severe ADHD).
-  War affects the routine of many children, including children with disabilities. During wartime, the education system is usually affected. The special education system is usually more adversely affected and takes longer to return to normal (Battle, 2015). Also in Israel, when the



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current war broke out, studies in all schools and preschools throughout the country were immediately suspended. The Ministry of Education made efforts to resume activity, and the system gradually returned to normal, including the special education system. According to Ministry data, as of October 23, 2023, 57% of all special education preschools, 70% of all special education schools, and 34% of all special education classrooms in mainstream schools were open (Weisblei, 2023). Three weeks later, on November 15, the respective rates were 90%, 93%, and 70% (Rabinowitz & Weisblei, 2023).


-  Children's responses to emergencies depend on their age and personality, the severity and proximity of the event, and the level of support they receive from family and friends ([National Emergency Portal, 2023c](#); Rabinowitz & Weisblei, 2023).
-  Some children with disabilities were unable to receive the regular essential services and treatments they were accustomed to receiving (medical, paramedical, and emotional treatments, academic support, etc.), because some services were suspended or reduced (due to their being located in evacuated communities, a lack of protected spaces, a shortage of personnel, or other reasons). Note that even though rehabilitative daycare centers were opened, not all met the Home Front Command's safety standards, so that only some of them offered the full curriculum to all children. Treatments that are part of the basket of services to which children in rehabilitative daycare center are entitled are supposed to be provided during wartime in an alternative daycare center or in child development clinics (Rabinowitz & Weisblei, 2023). Nevertheless, our interviews indicated that hotlines received calls from parents of children with disabilities who were unable to obtain alternative services or essential treatments. Disrupting the continuity

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of care for children with disabilities can widen gaps and even lead to regression in their functioning or behavior.

-  All children, including children with disabilities, had to cope with the shutdown of their school or preschool, or with the transition to remote or hybrid learning, which involved challenges in its own right, such as the need to own a computer, to be connected to the internet, or to have a parent or another adult available to help and mediate technically or educationally during the online lesson (Rabinowitz & Weisblei, 2023). Remote learning is a challenge for all children, but children with disabilities find it particularly difficult, as they have trouble following the lesson, require mediation, and have lower digital literacy compared to children without disabilities (Barlev et al., 2021b).
-  Children with disabilities have encountered unique challenges making it difficult for them to reintegrate into their educational settings: (1) Difficulties in resuming transportation to their schools and preschools (or in obtaining reimbursement for their travel expenses from localities that do not provide transportation); and (2) lack of suitable alternatives for pupils finding it difficult to reach the protected space in their schools and preschools, and who therefore have to stay at home (Itzkowitz, 2023; Weisblei, 2023).
-  Policies and services provided to children with disabilities during wartime vary across local authorities. There is no uniformity in the number of hours of instruction in the schools and preschools, in paramedical treatments, and in the availability of transportation (Itzkowitz, 2023; Weisblei, 2023). In addition, the local authorities vary in their ability to allocate evacuated pupils to existing educational institutions or to recognize families that have evacuated voluntarily.



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-  In the beginning of the war, children had to stay at home all day, as their ability to go out for leisure and relaxation activities was limited due to the security situation. This highlighted the need to develop leisure activities suitable for children with disabilities in the home environment, such as online physical education lessons, art kits, or online performances (Beit Issie Shapiro, 2023).
-  Many callers to the various helplines were parents seeking help in caring for children with disabilities and in providing activities for them. For example, from the start of the war to mid-November 2023, the Purple War Room handled 204 requests for children's activities that could be performed at home (such as games, books, and workbooks), as well as outdoor activities such as performances and directed activities for children). ILAN held leisure activities and online workshops for hundreds of children. Beit Issie Shapiro recruited volunteers to regularly visit families with children with disabilities and engage them in leisure and relaxation activities; 165 people participated in recreational activity in their swimming pool (see below for details in the section on family members of people with disabilities).




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## Family Members Caring for People with Disabilities


-  The 2019 ICBS Social Survey indicates that approximately 1.2 million Israelis (21% of all 20+-year-olds) have cared for a relative without financial compensation, including 22% of non-ultra-Orthodox Jews, 34% of ultra-Orthodox Jews, and 17% of Arabs. Of these, 550,000 were primary caregivers (first-degree relatives or those living with the person in their care or caring for them for more than four hours a week) (Nagar Eidelman et al., 2023).
-  Caring for family members with disabilities affects caregivers in a range of life areas. For example, caregivers' physical and mental health is generally worse than the health of people not caring for others, as is their employment and financial condition (Nagar Eidelman et al., 2023). Hence, they have fewer personal resources for coping with emergencies to begin with.
-  Together with treating a person with disability, family caregivers spend most of the day at their jobs, since most (71%) of informal caregivers are of working age and are employed full-time and more (Nagar Eidelman et al., 2023). The [2006 Emergency Employee Protection Law](#) ensures the rights of parents of children with disabilities (for details, see below in the section on legislation and rights). Nevertheless, according to professionals, there is uncertainty regarding the law's implementation, including regarding whether parents absent from their workplace will be compensated, to what extent, and by whom. Moreover, the implementation of the law depends on conditions for which the authority responsible for supervising or assessing them is not known (for example, who will determine a spouse's inability to look after a child or the lack of a "proper" arrangement for caring for a child, and how?).




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-  Informal family support has four functions: emotional support, direct practical support, economic support, and support in the form of mediation with service providers (Horowitz, 1985). Even in routine times, families of children with disabilities must serve all these functions, and often experience a heavy care, emotional, and economic burden (Namer Furstenberg et al., 2023). The Israel-Hamas War has exacerbated these burdens on families of children with disabilities. According to interviewees, family members have had to cope on several “fronts”, with some being unable to bear the burden of care and finding it difficult to provide comprehensive care for the child or other family member with disability (see also Beit Issie Shapiro, 2023).
-  With the outbreak of the war, educational institutions, including special education settings, were shut down. Children with disabilities require close supervision. Many calls to helplines dealt with parents’ needs for help in supervising children with disabilities in order to go to work or have a short respite which would enable them to resume their caregiving (see also Beit Issie Shapiro, 2023). This need was particularly great in single-parent families or in families where one of the parents or family members was in the military or had a disability. Note that the rate of children with disabilities growing up in single-parent families (11.6%) is higher than that of children without disabilities (6.2%), and that the rate of parents with disabilities is higher among parents of children with disabilities (9%) than among parents of children without disabilities (3.4%) (Barlev et al., 2021a).
-  Families of people with disabilities must manage a considerable amount of information about their needs and the services they require in order to ensure appropriate and optimal care. Moreover, they need information about needs and services for all family members. In ordinary times, family

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caregivers often raise the need for a professional service that would coordinate the various aspects related to caregiving, including mediation with services and bureaucratic assistance (a treatment coordinator) (Namer Furstenberg et al., 2023). The lack of such assistance is keenly felt in an emergency, as it is unclear which authorities and services the families should turn to for help, and what their responsibilities are (Arnon-Sharabi, 2023).

 In an emergency, family members and other caregivers require additional guidance on how to behave and react when people with disabilities feel stressed, anxious, or overwhelmed due to the war. Volunteers interested in helping families with children or adults with disabilities also require such guidance. This need is relevant to the entire emergency period, since the needs and responses of people with disabilities may change with time (Beit Issie Shapiro, 2023). For example, ALUT held online training workshops and support sessions with 2,000 participants in real time, while another 4,000 people watched the recordings later; the NGO also provides information and support to 1,000 parents through its WhatsApp group.

 Parents and other family members of children and adults with intellectual disabilities or autism also require guidance on mediating war-related information. For example, what terms should they use when talking about the war and its impact, or how to enable exposure to news or social media during the war (see, e.g., Nissim, 2020).


 Professionals point out the lack of dedicated and adapted services for family members caring for adults or children with disabilities. Many of the services are intended for the people with disabilities themselves, but not for their family members. If family members need help (for

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example, with their mental health), they are directed to services intended for the general population. Services of this kind do not always suit the family members' needs, since the family requires help that takes into consideration how the family is coping with the disability and its implications during an emergency. Moreover, using services by a variety of service providers makes it difficult for the family to obtain comprehensive solutions and ensure the wellbeing of all members.


-  Family centers of the Disabilities Administration designated for family members of children and adults with disabilities serve all families requesting their services, in routine times and in emergencies, even if the family is not recognized by the Ministry of Welfare. Representatives of the Administration have reported that in communities that have absorbed evacuated families, the centers provide services for them as well, and that in some cases, services are also provided in hotels.

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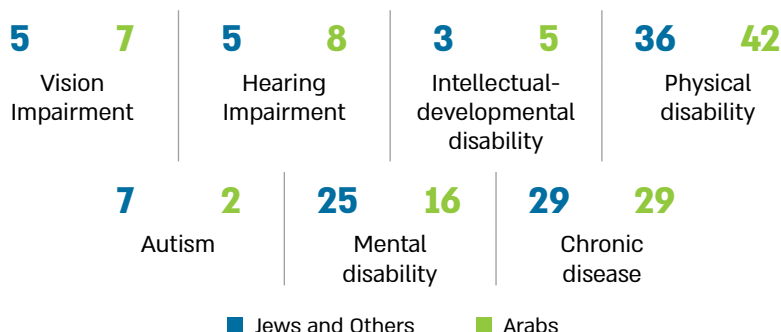
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## Arabs with Disabilities

### People with Disabilities by Population Group and Disability Type (per thousand population)



Source: Myers-JDC-Brookdale Institute data processing of Disabilities Registry data (2022) and data from the [ICBS press release on December 29, 2022 \(Hebrew\)](#)

As of 2022, approximately 204,700 Arabs with disabilities recognized by the state were included in the ICBS's Disabilities Registry. Although the overall rate of Arabs with disabilities is lower than that of Jews (9.4% vs. 10.9%), the Registry indicates that the rate of Arabs recognized as having physical, intellectual-developmental, and sensory disabilities is comparatively higher. On the other hand, the rate of Arabs recognized as having autism and mental disabilities is comparatively lower.

Ministry of Education data indicate that in 2022, the rate of Arab pupils in special education settings (special education schools, special education classes in mainstream schools or mainstream classes with special supports and guidance) was lower than that of Jewish pupils (10% vs. 12.3%).<sup>8</sup>




<sup>8</sup> Processing of Ministry data by the Myers-JDC-Brookdale Institute.

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-  Based on parental self-reports, a national study of children with disabilities in Israel (Barlev et al., 2021a) found, that the rate of children with disabilities among the Arab population was lower than among the Jewish population, albeit by a smaller margin (10.2% vs. 11.0%). As in the Registry data, this study also found higher rates of children with 'visible' (physical, intellectual, or sensory) disabilities, and lower rates of children with 'invisible' disabilities (such as learning disabilities, mental difficulties, or developmental delays).
-  It may be that the relatively low rate of adults and children with 'invisible disabilities' in the Arab population is due to their under-diagnosis (Barlev et al., 2021a). Adults and children with disabilities who are not diagnosed as such are also unknown to service providers, do not receive support and treatment, and their condition may deteriorate. This is true in routine times and, in an emergency, the deterioration in their condition could be more severe.
-  The Arab population suffers from a lack of physical protection from enemy attacks, including the lack of protected spaces in many homes built before 1992, a shortage of public shelters, and inadequate protection of essential buildings such as clinics. In addition, most Arab communities do not have Magen David Adom (Israel Red Cross) ambulance stations, emergency healthcare centers, or emergency and rescue services such as firefighting and police stations (Abu Asba et al., 2013; Lavi et al. 2021). The Home Front Command offers solutions for safeguarding rooms in homes without protected spaces, but the information does not always reach the residents, and there is no systematic mapping of their needs. The lack of protection is particularly problematic when it comes to people with disabilities among the Arab population because the rate of individuals with physical and sensory disabilities, which

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involve mobility difficulties, is relatively higher in this population, creating a challenge in evacuating them to safety in an emergency.


-  Many of the emergency helplines and websites are not accessible to Arabic speakers. Even in routine times, the Arab population tends to use internet services, including government services, less than the Jewish population, due to lower digital literacy, but also due to language barriers. This makes it difficult for Arabs with disabilities to obtain essential information distributed online in both routine and emergency times (State Comptroller, 2023).
-  A national security emergency tends to exacerbate the tensions between the Arab and Jewish populations, and may lead Arabs with disabilities to avoid using essential services as they fear to enter Jewish towns to receive them (Home Front Command and Civilian Organizations Forum, discussion held on November 28, 2023).

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# Legislation and Rights


-  Promoting equal rights for people with disabilities includes protecting their rights in crises and emergencies as well. [Article 11 of the CRPD](#) on situations of risk and humanitarian emergencies states that States/Parties shall take [...] all necessary measures to ensure the protection and safety of people with disabilities in situations of risk. These rights which must be ensured at all times, and cannot be suspended during emergencies, include the right to equal accessibility and non-discrimination. The CRPD calls for raising the awareness of decision makers to the needs of people with disabilities in times of war, conflict or disaster, both when planning emergency interventions, and during the actual conflict or crisis (Battle, 2015; Priddy, 2019). Israel ratified the CRPD in 2012 and has undertaken to implement it in Israeli legislation.
-  The 1998 [Equal Rights for Persons with Disabilities Law](#) states that the right to accessibility is a fundamental principle (Amendment 2, 2005). Article 19B states that a person with disability is entitled to accessibility to a public space and to a public service. Article 19L(b) states that "A person with a disability is entitled to full accessibility to services that are provided to the public with regard to civil defense and state of emergency including shelter and evacuation measures, information about the state of emergency, its existence, inception and ending date, and the measures to be taken, including accessibility and special protective aids adapted for people with disabilities and types of disabilities, and all in accordance to the provisions of this Article".
-  Despite this legislation, people with disabilities tend to be harmed more frequently during wartime and are often denied their basic rights (Priddy, 2019).


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 In recent years, several accessibility regulations have been approved following the 1998 law, stating guidelines and adjustments that must be implemented in order to ensure the rights of people with disabilities in emergencies and their access to essential services:


1. In February 2021, regulations for [accessibility to emergency services in facilities for people with disabilities](#) (Hebrew) were published, regulating adjustments in emergency services to be provided in facilities for people with disabilities, including out-of-home residential settings, geriatric or psychiatric hospitals, and rehabilitation, occupational and educational services.
2. In 2022, regulations for [accessibility to health services in the community during emergencies](#) (Hebrew) were approved, requiring the Ministry of Health, health plans (HMOs), hospitals, the Home Front Command and other organizations to provide adapted and accessible health services should an emergency be declared. Among other things, these regulations stipulate criteria for installing protected spaces in clinics, access to information and accessible means of communication with health plans, accessibility arrangements in temporary treatment centers, access to medications, special food, rehabilitation equipment, ensuring the continuity of health services, etc.
3. In 2022, [accessibility regulations for evacuation and relocation of people with disabilities in emergencies](#) (Hebrew) were approved. These regulations determine accessibility arrangements for people with disabilities in cases which require evacuation from their homes and absorption in appropriate facilities. Among other things, these regulations determine the accessibility adjustments in evacuation and relocation processes, require that relevant information be made

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accessible through multiple channels of communication, regulate accessible local and national absorption facilities, and provides training for the relevant staff, and more. These regulations are highly relevant to the current situation in Israel. They stipulate that authorities evacuating people from a certain area must prioritize the location and evacuation of people with disabilities over the location and evacuation of the general public. They also stipulate the way people with disabilities are to be evacuated. For example, their right to be accompanied by other people, by a service animal, and with supportive equipment; and the duty to relocate them to appropriately accessible facilities (as defined in the regulations). In addition, the regulations also require that the preferences of people with disabilities regarding their evacuation be determined and that they are provided with accessible information regarding the evacuation and the absorption facility, including the services and accessibility adjustments provided therein. Finally, the regulations stipulate that people with disabilities must be accompanied by a caretaker during their stay in the absorption facility to assure that their needs are met. The evacuation itself must be made in an accessible vehicle, and an escort should be provided when a person with disability cannot be escorted by a member of their family.


 The accessibility regulations presented above have been approved and published, but only some of their guidelines have been put into effect: Many of the provisions went into effect during 2023, and the rest will become effective in the coming months (up to April 2024 at the latest). Nevertheless, all guidelines can immediately serve professionals as a basis for interventions on the ground.

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-  Although these regulations are relatively new and some of them are not yet in effect, Israel is experienced in emergencies and wars, including countrywide rocket attacks and evacuation of settlements along the borders in the south, and especially the north. In particular, the 2006 Second Lebanon War highlighted the need to prepare appropriate interventions for people with disabilities during emergencies. Thus, government authorities were aware of the need to prepare for a possible evacuation, even before the new regulations became mandatory
-  These regulations provide guidance not only to relevant authorities on how to prepare for and act in emergencies, but also ensure the rights of people with disabilities in such times, such as the right to be evacuated before others due to medical needs, to be evacuated to accessible facilities suitable for their needs, to be evacuated with an escort and with a service animal and personal effects (including special foods and medicines), to receive accessible information about their evacuation, to obtain medical treatments accessibly from the health plans in temporary residences, as well as to continue receiving routine treatments and education services.
-  The law also protects the rights of parents of children with disabilities. According to the [Law for Protection of Workers in Times of Emergency, 2006](#) (Hebrew), following the declaration of an emergency on the home front, employers must not terminate employees forced to be absent from work in order to care for their children (among children with disabilities – until the age of 21) due to the closure of their educational institutions. Note that in the past, employees forced to stay at home with their children after the Home Front Command had ordered schools to shut down were compensated, but as of October 19, 2023 no decision had been made on this matter ([ALUT newsletter, Hebrew](#)).

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# Summary and Recommendations

The events of October 7 and the ensuing Israel-Hamas War have had serious effects on people with disabilities. Together with their families, service providers and policymakers, people with disabilities have been facing multiple challenges. Government authorities serving people with disabilities have rallied to address their new and changing needs. It is important to highlight the rapid and essential response to the needs of people with disabilities by multiple civil society organizations. These organizations instantly undertook the task of coming up with accessible interventions and solutions for people with a wide range of disabilities and needs throughout the country, at times even before official interventions were initiated.

Reliable, up-to-date data on people with disabilities are not systematically collected in routine times and now, during the emergency, it is difficult to obtain a clear view of the situation. A dynamic and reliable data infrastructure is critical for informed decision making, effective solutions and appropriate channeling of resources.


People with disabilities have fewer personal, mental, and economic resources than do people without disabilities (Nagar Eidelman et al., 2022). Accordingly, not all are able to locate and contact the authority or NGO capable of helping them. Most of the organizations have helped those who contacted them, but what is needed is to reach out to people with disabilities and actively assess their needs. Moreover, it should be noted that not all people with disabilities are officially recognized as such, hence the need to develop a system that will facilitate locating those who are unrecognized, particularly in emergencies.

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It should be noted that the needs arising at wartime are added to the unique needs of people with disabilities in routine times. Therefore, special preparations must be made to provide appropriate interventions, particularly when it comes to people with disabilities in population groups where they are doubly excluded. An effective solution in such a situation can be, for example, providing for individual budgeting (flexible service basket), which allows for the continuous use of services and changes with individual needs, allowing people with disabilities to obtain tailored services.

The emergency is expected to continue for many weeks to come, and all authorities must be prepared accordingly. People with disabilities are at a heightened risk of experiencing distress (mainly emotional, health and economic) following emergencies. Thus, all of the players involved must also be prepared for the long-term effects.

It is important to prepare for emergencies during routine times. Increased preparedness for emergencies will help facilitate better coping skills during the next crisis. Developing the individual, family, and community resilience of people with disabilities in routine times is also important as it improves their day-to-day functioning and can help them cope better with emergencies.


In the past, when people were evacuated, they remained displaced for a short and defined period of time. The current war required all social service systems to deal with the evacuation of tens of thousands, including thousands of people with disabilities, for a long time. This highlighted the need to provide emergency services to people with disabilities that can be operated quickly and simply, in accordance with the situation and needs. These services must be provided, among other things, in a safe and accessible space, and must also attend to the needs of family members and caregivers. It is important to appoint a single entity and charge it with

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locating people with disabilities, finding out what they need, providing them with ongoing care and guidance, and making sure that the services provided to them are adapted to their needs. This entity will be responsible for all people with disabilities in a given local authority, without differentiating according to type of disability or according to the ministry that serves them and will serve as a “one-stop shop” for all their needs.

UN Security Council Resolution 2475 (2019) recommends several actions for protecting people with disabilities in times of armed conflict. The resolution emphasizes the need to provide dedicated *services* for people with disabilities, while emphasizing the need to enable them *access* to services provided for the entire population, including education, health, transportation as well as information technology and the media. The resolution calls upon countries to include people with disabilities and their organizations in decision making and consult with relevant experts (Admon-Rick, 2022). These recommendations mean that the organizations serving the entire population must be made aware of the needs of people with disabilities, so that when a service is developed, the planning will include adjustment for the needs of people with disabilities, since making adjustments retroactively means suboptimal service.


The processes of the rehabilitation - physical, security, emotional and social - of Israel have already begun, and are expected to play a more important role once the war is over. It is critical to include the diverse needs of people with disabilities in planning and implementing the various rehabilitation processes. They must be included in all decision making about their lives, including developing and planning services designed for them. This moment offers Israel a unique opportunity to create a society where people with disabilities are actively included and can contribute to improving their own situation.

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