

# DISABILITY AND WAR:

Analytical report on the results of research



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**FIGHT  
FOR  
RIGHT**



# **DISABILITY AND WAR:**

**Analytical report on  
the results of research**

English edition:  
**DISABILITY AND WAR:**  
Analytical report on the results of research

Ukrainian edition:  
**ІНВАЛІДНІСТЬ ТА ВІЙНА:**  
Аналітичний звіт за результатами дослідження

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## Introduction. Disability and war: questions for research

On 13 December 2006, the [UN General Assembly](#) adopted the text of the Convention on the Rights of Persons with Disabilities, which was opened for signature by states after some time. Ukraine also signed and ratified this document in 2009, and therefore assumed a number of obligations.

[The Council of Europe Strategy on the Rights of Persons with Disabilities 2017-2023](#) defines priority areas with a focus on the priority of respect to human rights. Therefore, these directions are based on the [European Convention on Human Rights](#) and other standards of the Council of Europe. Each of them is also related to the relevant articles of the UN Convention on the Rights of Persons with Disabilities aimed at its implementation in practice.

According to the Convention, every person with a disability has the right to life, liberty, security, freedom from torture, violence, exploitation and abuse.<sup>1</sup>

In addition, States Parties shall take, “in accordance with their obligations under international law, including international humanitarian law and international human rights law, all necessary measures to ensure the protection and safety of persons with disabilities in situations of risk, including situations of armed conflict, humanitarian emergencies and the occurrence of natural disasters”.

Among the priorities, in particular, is freedom from exploitation, violence and ill-treatment.

Meanwhile, every year dozens of armed conflicts take place throughout the world,<sup>2</sup> so some persons with disabilities face all the challenges of war in person. In addition, persons with disabilities are significantly more vulnerable to effects of war than persons without disability are.<sup>3</sup>

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1. The full text of the Convention is available [here](#).

2. Statistic data is available at [Uppsala Conflict Data Program](#).

3. Grove S., Grove N., Myerscough T. (2010) Intellectual Disability and War: Issues for Consideration. *Journal on Developmental Disabilities*, V.16 N.1, p. 85-93.

Researches of the experiences of persons with disabilities in times of war are separated and fragmentary. Majority of these researches concern a study of experiences of persons with disabilities or persons who have been disabled during war, precisely as victims. For example, study of policy on persons with disabilities in Germany during World War II,<sup>4</sup> study on failure of social and welfare policy to address the needs of persons with disabilities during war and conflict times in Afghanistan,<sup>5</sup> Iraq,<sup>6</sup> Kosovo\*<sup>7</sup> etc.

There are a number of researches that contains analysis of aspects of the war and post-war life of veterans of various wars. Namely: how they got a disability, how they experience the disability and adapt to it, in particular, how their gender identity changes after the disability, what social policies exist for this category of people.

The research of disability and the war that Russia is waging against Ukraine has just begun by examining the experiences of veterans of the Anti-terrorist operation which began in the spring of 2014.

The greatest attention in these researches was paid to the determination of mental health disorders as a result of military operations<sup>8,9</sup> and the distinct features of social adaptation in civilian life (in particular, several researches were conducted on specific of employment).<sup>10</sup>

The Russian Federation's aggression against Ukraine at dawn of 24 February 2022 became a new stage for the actualisation of such kind of research.

According to the Office of the UN High Commissioner for Human Rights, from 24 February to 31 May 2022, as result of Russian aggression against Ukraine, there were 9,029 civilian casualties in Ukraine.<sup>11</sup> At least 4,113 people died and 4,916 people were injured.

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\* This designation is without prejudice to positions on status, and is in line with [UNSCR 1244](#) and the ICJ Opinion on [the Kosovo Declaration of Independence](#).

4. Thomson, M. (2010). Disability, Psychiatry and Eugenics. *The Oxford Handbook of the History of Eugenics*, 116-133.

5. Miles, M. (1990). Disability and Afghan reconstruction: Some policy issues. *Disability and Society*, 5(3), 257-267.

6. Popal, G. R. (2000). Impact of sanctions on the population of Iraq. *Eastern Mediterranean Health Journal* 6(4), 791-795.

7. Jones, L., Rrustemi, A., Shahini, M., & Uka A. (2003). Mental health services for war-affected children: Report of a survey in Kosovo. *The British Journal of Psychiatry*, 183, 540-546.

8. Steblyuk, V. (2022). [Problems of medical support and medical and psychological rehabilitation of ATO/JFO veterans](#). *Health of Society*, 10(5), 151-154.

9. S. O. Lukomska, S.V. Zadorozhnyy, E.M. Kulchykovskyy [Psychological support for ATO participants in the system of rehabilitation department of veteran of war's hospital](#). Institute of Psychology named by G.S. Kostuyk of the National Academy of Psychology of Ukraine, Cherkasy Regional Hospital for war veterans of the Cherkasy Regional Council (Cherkasy city).

10. S. Darievska, T. Martsenyuk. [Experience of employment of people with disability in Ukraine \(on example of ATO veterans\)](#). Scientific notes of NaUKMA. Sociology. Volume 3 (2020)

11. [Ukraine: civilian casualty update 31 May 2022](#). Office of the High Commissioner of United Nations Human Rights.

More than five million of Ukrainians have become refugees in the European countries.<sup>12</sup> Most of them went to Poland, Germany, the Czech Republic, Türkiye, Italy, and Spain.

Before the aggression of the Russian Federation against Ukraine, a little more than 6% of Ukrainian men and women had a disability.<sup>13</sup>

Now this number is growing. The vulnerability of persons with disabilities in times of war also increases due to the lack of access to information, shelter, the need for outside assistance and a number of other reasons.

With this research, we would like to open a discussion about experiences of persons with disabilities during Russian aggression against Ukraine, in some way expanding the narratives of presenting such experiences.

The analysis of the received empirical data showed that Ukrainian men and women with disabilities during the war have several experiences at the same time: victims, those who are saving themselves, and those who help other people in different circumstances.

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12. [Ukraine Refugee Situation. Office of the High Commissioner of United Nations for Refugees.](#)

13. [Ukraine Refugee Situation. Office of the High Commissioner of United Nations for Refugees.](#)





## Methodology of research

From 11 to 24 May 2022, the team of the NGO “Fight for Right” conducted a research of experiences of persons with disabilities during the aggression of the Russian Federation against Ukraine.

The purpose of the research was to learn everyday experiences of persons with various forms of disabilities during the aggression of the Russian Federation against Ukraine.

A semi-structured sociological interview was chosen as the research method. It consisted of several blocks: “Acquaintance”, “Beginning of Russian aggression against Ukraine”, “Preparation for a possible Russian aggression against Ukraine”, “Adaptation to the conditions of war”, “Adaptation in a new place” (in the case of a refugee interview), “Employment: then and now”, “Disability and war”, “Gender and war”, “Strategies for the future”.

Interviews were conducted offline – in Lviv and Lviv region – and online. The conducting and recording of an interview took place depending on security situation. We recorded 15 interviews. 5 interviews were recorded offline and 10 interviews were recorded online.

The selection of participants was carried out with respect to several criteria:

- type of disability (physical, psycho-social, intellectual, visual impairment, hearing impairment);
- gender (men and women);
- relocation (stayed at home, became IDPs, went abroad).

Interviews conducted with those participants with whom the team had personal contact over a certain period. Only those who were safe, felt the same way, and had the desire to talk about their experience, had been invited to participate.

We guarantee anonymity and confidentiality to each participant. This is enshrined in the informed consent signed by the participants. All those documents stored in the NGO “Fight for Right” archive.

The collected empirical data were analysed through content-analysis method.



## Acquaintance with the research participants

**PARTICIPANT 1** – woman, 31 years old, lived in Kharkiv, IDP, has physical impairments:

“ I was born in Luhansk region, in Krasnyy Luch city. Then I came to study in Kharkiv. I found a job and stayed to live there. Worked at the “Invasport” and “Sports for All” centres. Took part in the championship of Ukraine in armwrestling (a sport contest).

**PARTICIPANT 2** – man, 41 years old, lived in Mariupol, IDP, has physical impairments:

“ I am from Mariupol. Namely from the urban-type village of Staryy Krym, which is located on the outskirts of the city. I am married, have a child. I am engaged in public activities, I am an activist. And I like to travel.

**PARTICIPANT 3** – woman, 30 years old, lives in Lviv, IDP, has intellectual impairments:

“ I live with my mother and brother. Now I’m unemployed. I am sitting at home. I used to embroider icons with beads, and also different pictures. Now I like to knit a little.

**PARTICIPANT 4** – man, 32 years old, lived in Zaporizhzhia, moved to Switzerland, has hearing impairments:

“ I was born in Donetsk, but then I lived in many other cities of Ukraine. And only that year I moved to Poland for the first time in my life. I was first in Poland, and now I went to Switzerland... I have a hearing problem, I use a hearing aid device, and I have been doing it since the age of seven. I tried to study. I failed to get a higher education. I had three attempts to do it... I changed so many different jobs. I worked at McDonald’s for three years. I worked on a construction site. I worked as a cashier in a supermarket. I was a sales consultant. I was a courier. I worked a little in journalism, wrote materials. I translated a little. And the last period of my life in Ukraine was some chaotic attempts that did not give me financial security. Therefore, during this period, I was engaged a lot in activism. I spoke about inclusion, homophobia, about life of an atypical man in Ukraine.

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**PARTICIPANT 5** – man, 36 years old, lived in the city of Kamianske, Dnipro region, moved to the Netherlands, has psychosocial impairments:

“ *Before the disease, I worked as a sales manager, I had a career. I am also a sportsman. I play chess, checkers, and tennis.*

**PARTICIPANT 6** – man, 34 years old, lives in the city of Berdychiv, Zhytomyr region, has not left his home, and has visual impairments:

“ *I am a journalist and an editor. Edited various books and publications. I was very happy to edit a brochure about life after losing sight. It seems to me that, unfortunately, after the end of hostilities it will be very relevant and useful for many people who have lost their sight in adulthood. I am also a father of four-year-old daughter.*

**PARTICIPANT 7** – woman, 33 years old, lives in Zaporizhzhia, has not left her home, has visual impairments:

“ *I was born in Energodar. Then I lived and studied in Kharkiv for some time. In the end, I got married and came to Zaporizhzhia. I have been here for over 12 years. I am a social teacher and human rights defender. I currently work for a charitable foundation. We have somewhat redirected our activities and are now taking care of patients with cystic fibrosis and all IDPs temporarily or permanently staying in Zaporizhzhia. We are also engaged in transfer of humanitarian aid to temporarily occupied territories.*

**PARTICIPANT 8** – man, 28 years old, lives in Mykolaiv, has not left his home, has physical impairments:

“ *Now I am a volunteer. Therefore, you know, I am limited in mobility, but I am unlimited in multitasking. I am a person with a spinal cord injury and I use a wheelchair to get around.*

**PARTICIPANT 9** – woman, 39 years old, lived in Kyiv, moved to Germany, has a hearing impairments:

“ *Now I am a mother. I have a ten-year-old daughter. In Ukraine, I was engaged in charitable activities, coordinated projects, created grant projects to support persons with disabilities. I have hearing impairment. I use hearing aid devices. And, in fact, the activities of my foundation were aimed at helping people with hearing impairment. This topic is close to me.*

**PARTICIPANT 10** – man, 51 years old, lives in Kharkiv, has not left his home, has visual impairments:

“ *I was born in Myrnodgrad, Donetsk region. When I lost my sight, I studied in a boarding school in Sloviansk. Then I moved to Kharkiv to complete my studies. I received a higher education at the National Law Academy. Since 1998 I am a founder and the head of the Kharkiv Association of Blind Lawyers. Now I work as a lawyer and head the association.*

**PARTICIPANT 11** – woman, 34 years old, lived in Kherson, IDP, has a psychosocial impairments:

“ *In 2014, after the occupation of Crimea, I went to Lviv. I lived there for almost five years. Then I returned to Kherson. Then the occupation began again, and I left. I am a co-founder of a public organisation, and I also cooperate with several human rights organisations.*

**PARTICIPANT 12** – woman, 35 years old, lives in Lviv, has not left her home, has an intellectual impairments:

“ *I work as a secretary at the Ukrainian Catholic University. I recently started studying for being a cook.*

**PARTICIPANT 13** – woman, 28 years old, lives in Kyiv, has not left her home, has a hearing impairments:

“ *I has a hearing impairment, I am a mother of two boys. I studied in an ordinary school. After graduation, I did not go to university or college. I worked for more than a year at McDonald’s, for more than three years at Auchan, and went on maternity leave. I also worked in several public organisations. Now I am actively developing my project on learning sign language in Tik-Tok. And a few days ago, I launched the project “Chirp in Ukrainian” - I help people with hearing impairment to switch to the Ukrainian language.*

**PARTICIPANT 14** – man, 37 years old, lived in Lviv, moved to Switzerland, has an intellectual impairments:

“ *I belong to the “Open Hearts” organisation. I spend time there with my friends. There are friends with whom I went to school. I am also a member of the “Lyarsh-Kovcheg” community. I collect beads there and make friends with boys. Now I’m in Switzerland.*

**PARTICIPANT 15** – man, 37 years old, lived in Dnipro, moved to Switzerland, has physical impairments:

“ *I am a lawyer from Dnipro. I’ve been moving around with the help of a wheelchair since I was 13 years old.*



## Experience “victims of war”

During wars or natural disasters, persons with disabilities are among the first to “die, get sick and get infected”. And among the last ones who receive the necessary resources and medicines”.<sup>14</sup>

Their vulnerability is enhanced by the specifics of disability, (in)accessibility of information, architectural barriers, gender, social status, place of residence, (in)clusion in social and other networks.

There are a number of documents that regulate the treatment and assistance during military conflicts and emergencies for those who have disabilities. These are, in particular, the mentioned before Convention on the Rights of Persons with Disabilities, a number of Geneva Conventions<sup>15</sup> and other international and national treaties and laws. However, the “voices” of persons with disabilities themselves, who have had such a traumatic experience, are often unheard and are not always taken into account when rescuing them. This section presents the experience of persons with disabilities as victims of the the aggression of the Russian Federation against Ukraine.

### **Temporality<sup>16</sup> of the aggression of the Russian Federation against Ukraine**

Counting of the personal start of the aggression of the Russian Federation against Ukraine depends on the previous experience of life (surviving) during this war. Those of the participants, who witnessed the occupation of part of territory of Ukraine by Russia in 2014-2015 understood that sooner or later the war would take on new dimensions:

“ *I was very worried even the day before... It so happened that I already had a very similar experience in the Crimea. In the 14th year it was in a very similar way. I understood that it was happening again. I was very, very worried.*

---

14. Crises, Conflict and Disability. Ed. by D. Mitchell and V. Karr. Routledge, 2014, p. 22.

15. First Geneva Convention on the Amelioration of the Fate of the Wounded and Sick in the Armed Forces Second Geneva Convention on the Amelioration of the Condition of the Wounded, Sick and Shipwrecked Third Geneva Convention on the Treatment of Prisoners of War

The Fourth Geneva Convention on the Protection of Civilian Persons in Time of War

16. Temporality – a category of time covering all varieties of time meaning.

For some others, start of understanding of beginning of Russian aggression against Ukraine began with publishing of Russian attack scenarios in media, beginning from late autumn of 2021, Putin's speech on 21 February 2022, or other political events, which in one way or another represented the escalation of events:

“ *It was scary starting from the fall. Watching news, we saw an accumulation of weapons and troops around Ukraine. I understood that no one would raise such a large number of troops just for exercises, that there are certain plans that are being prepared for an attack.*

---

*I was already ready for such news after Putin's speech on 21 February, when he said that he was considering a law on aid to the "LPR" and "DPR". From my experience, both common and professional, I already knew that it would not be done just like that.*

On the eve of 24 February 2022, some were at the stage of denying of deployment of war throughout the territory of Ukraine:

“ *I did not expect such a format of war. I thought that active hostilities would continue in Donbas. My roommate said in the morning that the war must have started. I smiled and said: "No, it can't be like that! This is probably some kind of training".*

On 24 February 2022 participants of this study woke up in one of two ways: or from the sound of explosions in their city either from calls that their relatives who informed them of the beginning of the aggression of the Russian Federation against Ukraine:

“ *I woke up from explosions at 4:30 a.m., missile and bomb attacks were carried out on Dnipro city*

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*A friend called me and said, "It has been started" – "Where?" – I asked. "Everywhere," – he said.*

---

*I felt a vibration in my head. I understand that someone is calling me because we, the hearing impaired, put phone under pillow to feel the vibration. I look: my father is calling. I turn it off. He calls again. I turn it off again. And already on the third call, I answer, I think, maybe something really happened... He says: "The war has begun!"*

However, not everyone had free access to information about the beginning of Russian aggression against Ukraine, and at the same time - the opportunity to do everything for their safety. On the morning of 24 February one of participants was in a psychiatric hospital of a closed type, where informational isolation of female patients was in practice - they were forbidden to use their own gadgets and had an access to them only for a certain time each day:

“ *At that time, I was in a hospital. After breakfast, girls who came to a kitchen for collected dinner said that cooks secretly told them that the war had begun. That is, the hospital staff did not tell us anything. Only around 10 a.m. we were informed that the war had begun. The doctor said that they will give us phones for ten minutes, and we should urgently inform our relatives that they need to take us home.*

### **First personal reactions to the Russian Federation’s aggression against Ukraine**

At the level of perception, there were two main reactions to the start of a war - denial:

“ *we were drinking coffee and maybe we didn’t recognize the seriousness of the situation*

and acceptance:

“ *I was thinking: “Stop, that’s all! I need to calm myself and start doing something”*

which are conditioned by previous thoughts about possible development of a war. Hearing-impaired people noted that it was somewhat easier for them to adapt to first moments of the Russian Federation’s aggression against Ukraine, and more specifically to sounds of war, precisely because of specifics of their impairment. This allowed them to be a little more relaxed.

In particular, one of the interviewees shared:

“ *I did not hear explosions in the first days. And I think this is one of the factors why there was no anxiety from the first seconds. I see this as a plus.*

However, emotionally it was extremely difficult for the participants to experience Russian aggression against Ukraine. The most frequently mentioned emotions were fear, anger, excitement and panic. A health condition of persons with mental disorders has deteriorated sharply.



This is how the participants of the study describe their emotional state in the first days of Russian aggression against Ukraine:

“ *I was very worried. It was a horror.*

---

*I cried, then screamed. And my children heard it. I looked at them, and then - stupor. I began to sob and go somewhere.*

This range of negative emotions was reflected in physiological reactions - insomnia, lack of hunger, body tremors, headaches, increased body temperature, etc.

“ *I completely stopped eating.*

---

*I didn't want to sleep at all.*

---

*My hands, legs were shaking a lot, as at high temperature.*

At some point, it was extremely exhausting for people.

People's behavior was lead by “creating or searching for a safe corner”. Finding a safe place meant making an important decision for yourself and your loved ones: to stay at home or become a refugee.

The participants noted that they often took responsibility for the final decision:

“ *I made the decision. My wife and son had to be pushed from my side and told that they must go.*

They realised that they could rely only on themselves, in particular, a participant with physical disabilities said:

“ *I realised that I only need to rely on my own strength.*

The strategy for creating safe conditions was quite similar for every participant. The first thing they did was to look for information from reliable sources about development of military operations, recommendations for personal protection and security. Most of the alarming suitcases began to be packed in the morning of 24 February. They collect documents, a small amount of money, warm clothes, a small amount of food for a snack, water, and necessary medicines.

“ *The alarm suitcase began to be collected on the very day when the full-scale war began. We collected it in such a panic mood.*

Then they tried to set up a safe place for hiding at home or find a safe place nearby. In particular, one of the interviewees said:

“ *We decided to hide in a corridor. We started laying down there, taking down blankets and mattresses. My children slept for two weeks in their clothes, in tights and pants, so that they could run away immediately.*

It was a traumatic experience for everyone:

“ *I spent one night in a bathroom.*

---

*We went to a shelter on the first night. And it was probably the most terrible night that can be.*

For some people, the path to a shelter ended near exit from their apartment. For example, in Mykolaiv in the first days of the war, all elevators were out of power. Therefore, a person who uses a wheelchair found himself locked “within four walls”:

“ *My rented apartment is on the fourth floor. After the elevators were turned off, my neighbor had to use his physical abilities directly to get me down.*

A shelter was not always located near a place of residence. Sometimes it was necessary to walk to it for 10-15 minutes or even drive up to it, because the specifics of disability do not allow a person to move quickly:

“ *Under the temple itself, under the assembly hall, there is a shelter. We drove there for five minutes.*

In addition, if you managed to get to a shelter, it would probably be inaccessible. The visually impaired respondent, in particular, shared experience of close friends:

“ *My friends who use wheelchairs did not have a single accessible bomb shelter in Zhytomyr.*

Due to the long distance to shelters, some of the less mobile people have to give up and stay at home during bomb air alerts:

“ *My house was far from one shelter and another. I have a blind mother who has limited mobility, a dog and a wife. When they announced a bomb air alert and told that we need to run, it was very difficult to run somewhere.*

Along with finding a safe place, people tried to form strategic reserves of food, water, essential medicines and fuel. For all this, starting from 24 February, huge queues formed. Process of creation of checkpoints and traffic jams made movement even more difficult.

When buying food, they tried to take products that can be stored for a long time - cereals, pasta, preserves, oil or simply what else could be bought in stores. A respondent from Kharkiv recalled:

“ *I remember very long queues. And all that I managed to buy was ordinary cooked sausage, a whole kilo. I ate it, ate it, ate it.*

In these endless queues, persons with disabilities also felt their vulnerability. Because persons without disabilities did not always behave decently. A person with a disability stood even longer than he or she should have, with the prospect of being left with nothing in result:

“ *Lack of vision does not allow standing in line on an equal footing. Because you cannot figure out who exactly you are behind. Without help of my wife, who can see, I don't know how we would have provided support for ourselves in such conditions,*

– said one of the respondents.

For the next few days, sometimes weeks, the participants decided on a way to save themselves during the war.



## Experience “rescue from war”

There are established mechanisms for rescuing persons with disabilities during natural disasters and catastrophes,<sup>17;18;19</sup> military conflicts<sup>20</sup> and other crisis situations, in particular, due to the efforts of international organisations, civil sector and the scientific community. Therefore, the safety of persons with disabilities, in particular the process of evacuation from closed institutions, must be provided by national authorities. In Ukraine, there is an extensive system of closed institutions where persons with disabilities also live - boarding houses for older people, geriatric boarding houses, boarding houses for war and labour veterans, psychoneurological boarding schools, psychiatric hospitals, closed institutions within education system, as well as children’s boarding houses. Evacuation of persons with disabilities from such facilities should be organised by their administrations. But in practice - when the Russian Federation’s aggression against Ukraine took place, it turned out that the state and international organisations were not ready to quickly respond the needs of persons with disabilities living in closed institutions.<sup>21</sup>

As for the individual evacuation of persons with disabilities, saving life has become an exclusively personal problem for each person. Participants relied in this process on themselves or their loved ones, on their own social connections, and not on state assistance.

Everyone used a certain strategy for their own rescue: they stayed in their homes, moved to other much safer regions of Ukraine (became internally displaced persons), or went abroad.

### **Those who decided to stay home**

Those who decided not to leave their homes justify their decision with several reasons:

- relativesafetyofbeingathomeandinthenativecity,ifyoufollowrecommendations for actions of civilians during hostilities. One of the participants said:

17. World Bank (2006). [Summary Report on “Disabled and other Vulnerable People in Natural Disasters „e-mail discussion](#)

18. [Disability and Armed Conflict](#) (2019). The Geneva Academy of International Humanitarian Law and Human Rights.

19. World Humanitarian Summit, [Charter on Inclusion of Persons with Disabilities in Humanitarian Action](#) (2016).

20. UNICEF. [Children with Disabilities in Situations of Armed Conflict: Discussion Paper](#) (2017).

21. You could find more details about challenges that persons with disabilities faced in closed institutions [here](#).

“ *I don't understand what I'm going to do now. I still have a house, it does not shake from shells. I think: where to go, what to go, why to go? As soon as something approaches, we will go.*

- current conditions of living did not become critical for life, and all necessary needs were covered.

For example, participants share:

“ *If water, electricity, gas disappear and staying in the city becomes unbearable, then I will be forced to leave. Otherwise, I did not plan to leave.*

---

*I still have electricity, gas. I have a certain supply of food. I have lard in my freezer; there are a couple of kilograms of flour, a couple of kilograms of sugar, a couple of kilograms of some kind of cereal, five liters of oil.*

- reluctance to leave home:

“ *No, I will not go anywhere. I'm staying here. If they kill me, it's better to die at home. I don't want to go anywhere.*

- sense of social responsibility connected with work or volunteering:

“ *I understood that I would primarily be useful in the information field. It is necessary to bring important information to the attention of people through resources that I have.*

---

*I have already found myself in this situation here, so I have to do something useful and do what I can for the benefit of our common victory.*

The first weeks of life during the war were spent in constant stress, panic and fear. Changes took place both in personal life and in the urban space.

Some of the research participants who worked before Russian aggression against Ukraine stopped going to work or attending workshops for persons with intellectual or psychosocial disabilities. One of the respondents recalled:

“ *I am very active in everyday life. My whole day was spent in court hearings, communicating with representatives of state bodies. And when I stayed at home. I, like everyone else, was stressed because there is no work, you don't know what to expect.*

In some cases, on the contrary, intensity of work has increased significantly. Due to the specificity of the work, the number of requests from people increased during the war:

“ *My activity is related to helping children and adults with cystic fibrosis. These people have to take a huge amount of drugs, without the necessary therapy, irreversible reactions of the body occur very quickly. That's why I started urgently reviewing my stocks that I have in the fund, and thinking about what to do next... I worked twenty-one hours a day. Communicated with international organisations and European associations.*

In addition, to the “usual” wartime actions, such as moving to shelters or safe places in times of alarm, another activity appeared. For example, one participant mentioned that she started washing her clothes every day so that in case of shelling or damage to communications, she would have a supply of clean clothes and underwear. The husband of one of the research participants, having discovered his culinary talent, began to spend all time in the kitchen. Others turned off the lights after 10 p.m., following the recommendations of the Ministry of Defense of Ukraine and the State Emergency Service of Ukraine.

For some people who live in regions where there are no active hostilities, everyday life has not changed significantly:

“ *There are no such changes. In most cases, nothing has changed.*

In the first weeks of the war, people began to unite with others to help Ukrainian soldiers. Participants teamed up with friends, colleagues or neighbors. They cleaned and equipped the basements of houses for shelter; prepared “Bandera’s smoothie” for self-defense, destroyed tags left by saboteurs, and equipped protective sites in their cities. This unification “from bottom” made it possible to feel not alone, and more secure and protected. There appeared an understanding that people around were facing similar challenges.

People who remained in their homes witnessed impact of the war on their cities and towns. Most often, they mentioned that cities became empty, quiet and dark:

“ *In the first days, the silence on the streets was impressive. Such a tense silence. People walked less, children disappeared from playgrounds.*

All cafes, restaurants, haircut and beauty salons and shops were closed. People faced difficulty in purchasing some products. For example, seasonal clothes in the spring. One of the interviewees recalled:

“ *After the first two months of the war, the weather changed. I realised that I didn't have shoes that fit me, and I didn't have proper clothes, and the clothes shops weren't open.*

Checkpoints, barricades, metal hedgehogs began to appear in the cities, and militaries also became more visible. These changes caused different reactions in people at the same time: on the one hand - fear, and on the other - a sense of security and understanding that the city is ready for defense.

Changes in daily life have brought new challenges for people related to their disabilities.

One of the interviewees, who has hearing impairment, said that at night she and her husband and her mother took turns without sleep to monitor when an alarm signal would be activated in order to go to shelter. If they all were sleep, they would not have heard the air-raid alarm.

“ *I remember we took turns on sleeping. How many times I fell asleep in the kitchen, my mother woke me up at four a.m. and told me to go to sleep. The problem is that we do not hear. In this way, at least, we saw. We walked all the time, opened windows, listened. It was very difficult not to hear.*

Cities have become extremely dangerous for persons with visual impairments due to a possibility of being injured by a projectile or to trap into a stretch. In addition, they had to re-adapt to their usual routes through transformations:

“ *When a blind person gets used to spatial orientation in familiar realities, it is difficult to accept changes. You go, yesterday there was no funnel, but today there is a funnel, or there is a shell lying there that exploded or did not explode. That's what happened to my friend in Saltivka.*

People who use wheelchairs remained “locked” in their houses. Without outside help, they could neither leave the house nor get into shelters, which are completely inaccessible.

“ *I was once in a bomb shelter. And after that I don't know if I want to go there. My friends would sooner break their backs during that war than fall, God forbid, under fire.*

From the stories of persons with intellectual disabilities, it becomes obvious that they did not receive information about the war, about safe behavior during military operations, etc. in form accessible for them.

A constant complex psycho-emotional state and experiences exacerbated disorders of some of the research participants:

“ *After the stress I experienced, I could not look at the carriage number on my own. Because my sight no longer allowed me to do it. I could not see a board with train numbers. I could not see my carriage. I asked people.*

They had to seek urgent treatment or rehabilitation. Solving these challenges fell on the shoulders of persons with disabilities themselves. None of them sought help from state structures that provide services to persons with disabilities. They used personal social networks, and some turned to organisations of persons with disabilities for financial or humanitarian assistance.

Women with disabilities found themselves in a very vulnerable situation. Women who have children began to take care of them all day long when educational institutions were closed. Women provided not only children basic needs, but also education and a stable psycho-emotional state in unusual conditions. They acquire the role of “heroine, because a woman, first of all, protects children”. Women also clearly articulate a greater risk for them of being a victim of wartime violence.

Along with this, everyone gradually adapted to the new everyday life and lived it. Communal services continued to work in cities. One of the respondents says the following:

“ *The city was shelled; garbage was taken out under the shelling. Volunteers started delivering food and medicine to the subway.*



In addition, work on the delivery service was resumed, children appeared on the playgrounds, and services began to be held in churches where possible. One of the participants, for example, said:

“ *We go to church for liturgy. When we hear the siren, the priests themselves tell people to take shelter.* ”

All those who did not leave their homes do not regret their decision to stay at home:

“ *“Why didn’t you leave?” – “Because I am heroically live in Berdychev near the front” (laughing).* ”

### **Those who became IDPs**

Experiencing the danger that war brings, some of the participants decided to escape to safer regions of Ukraine, including from the territory that was occupied in 2014.

The main reason for looking for a place within Ukraine was a conviction of easier adaptation in the new “home” due to knowledge of the language, lifestyle and everyday life here. Instead, particular reasons for choosing a specific destination were different for everyone: presence of acquaintances or relatives, architectural accessibility of housing, previous positive experience of staying in that city, availability of evacuation transport only to certain cities, proximity to the border with the EU countries, in case of the need to leave abroad.

The first challenge for everyone was evacuation from his or her house. Because of the barriers, some persons with disabilities had to make extra efforts to solve logistical issues. They turned to state representatives, civil organisations, and to their relatives who were ready to help: A participant who uses a wheelchair recalled:

“ *Tetyana Barantsova helped me find transport from my house to the station. The driver called me and said that he would be there in 10 minutes, because the curfew would start soon. We only had a few minutes for collecting things.* ”

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If people got out by evacuation transport (train), they packed only the most necessary things in small bags or backpacks. Among such things, there were a lot of common: documents, money, gadgets, hygiene products, medicines, and seasonal clothes.

One of the interviewees shared:

“ *I brought a suit, jacket, tights with a skirt. Socks, toothpaste, shampoo and shower gel. Everything, nothing more. I controlled the bag to be not heavy. I understood that there was nowhere to go, and it would be very difficult to drag the bag.*

Those who traveled by car could take a little more. They took a bit more personal belongings, clothes and equipment.

In addition to the essentials, some took with them valuable things. Their value is measured by those who gave them as a gift - these are relatives:

“ *I always have this little bracelet, this ring, with me! It was made and given to me by my son. He was very small. And now it is always with me. It is always close to the heart, – said a man evacuated from Mariupol.*

Mobility in the hometown at the time of evacuation had already been changed. It was necessary to pass checkpoints, coordinate their crossing, and sometimes, in the process, change route.

More dangerous and alarming was the evacuation from the temporarily occupied territory to the territory controlled by Ukraine:

“ *There are days when they allow to pass, and there are days when they don't allow. People stayed to spend the night in the field.*

Those who drove their own transport had to carefully consider the route, which included stops for refueling the car, resting and spending night. Some of the interviewees needed places to stay overnight available to them. However, in conditions of evacuation it was difficult to be ensured:

“ *We traveled for 3 days. The road was very difficult. The first night we stayed in Kropyvnytskyi. We were well accepted there. But there were difficulties with architectural accessibility. The second night we stayed in Lviv in “Dzherelo”. And then we arrived to the final destination.*

Using a car was almost the only chance of evacuation from the occupied territory. At every centimeter of a path, people felt fear for their next step. In conditions of extreme danger, there was no question of ensuring basic human needs and respecting human dignity:

“ *Part of the roadside was mined. Two cars blew up on the side of the road. That’s why I couldn’t go to the toilet just behind a tree, everything could be mined there. I had to walk right next to the car where the column is standing.*

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*I had a very unusual experience: changing pads in a field. Not in a forest belt, but just in a middle of a field.*

Most of those who took part in this research were evacuated by a train. They mention the huge amount of people at stations and fear that they will not be able to get on train because of their disability.

Railway employees played a significant role in escorting at railway stations. They helped people get to the carriage:

“ *Then there was a terrible rush near the trains. It was simply impossible to get there. I turned to the city authorities for help. They promised to help me with escort. However, no one showed up. Two hours later, a station employee approached us. They stopped a train traveling from Zaporizzhia to Lviv. The train was already full. Several men, soldiers and railway workers, were able to lift me up.*

Due to the unavailability of trains, rush and ignorance of the people who helped, the man almost broke his leg.

There were already many people in the carriage. Their pets were with them. Everyone travelled in silence, without lights or mobile internet for safety.

“ *There were a lot of adults, children, and animals in the train. Everyone travelled in silence. Atmosphere, you know, like in WWII movies. When you look at the echelons that are going nowhere. And I had the same impression: you don't know where you're going, or when you'll return, what awaits you there. You go only to get out.*

During this anxious time of evacuation, the participants noted that they felt unity and mutual support of people. They helped each other, shared what was necessary, and listened:

“ *I remember such a very pleasant moment: in one village, local women shared with people who were evacuating some hot food, soup, tea and bread. It was very in time. It was very touching, to tears.*

Arriving at a destination or at a temporary point caused different feelings: it depended on which places they were evacuating from, what their evacuation was like, whether they had a certain plan for what to do next.

It was a moving moment to get out of the occupation and into territory controlled by Ukraine:

“ *We passed through the “gray zone”, where shelling is going on. When we drove up to the first checkpoint, seeing the Ukrainian soldiers, we hugged them, shook their hands (laughs), the children greeted them and waved.*

Arriving in relatively safe areas, people faced the problem of finding transportation and housing. Although volunteer services worked at stations, people still used personal acquaintances to solve these issues.

In particular, one of the interviewees said:

“ *The coach called me and said that he found a place for me in a kindergarten in the village of Murovane near Lviv.*

Living conditions in new places were different. For someone, everything suited and was well arranged for persons with disabilities:

“ *The conditions are very convenient for me. This centre is adapted for persons with disabilities. Paralympians train here. We have a separate room with a bathroom and a corridor.*

Others were accommodated in conditions where it was difficult for persons with disabilities to stay:

“ *We were fed very well. There was a shower and a toilet. But I slept on a mattress on floor. It is very difficult and inconvenient for me. It was still cold to sleep. I slept dressed: in a jacket and two pants,*

or in rooms that are not very suitable for living. A woman who was evacuated recalled:

“ *When we arrived, we were a little surprised by the conditions... It was a long-closed sanatorium. It was opened for IDPs. There was old Soviet furniture; there was no separate shower room.*

Gradually, people began to adapt to a new place: to look for more comfortable housing, to buy products that became scarce at home:

“ *I bought “Roshen” chocolate and ate it right away. I couldn’t believe that you can just come to the pharmacy and buy what you need.*

They are trying to rebuild their lives: doing household activities, going for walks.

“ *I grew up in the village, so I helped with the household.*

Those who were employed before the aggression of the Russian Federation against Ukraine either lost their jobs or went online, but significantly fewer.

One of the participants is trying to find a job in the region to which she moved. She was looking for a job by profession among advertisements on the Internet. But:

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“ *There were no vacancies. I read the announcements regularly. If something is found, I will go to work.*

In the labour market in regions where many IDPs were evacuated, demand exceeds suggestion. This reduces the chances of getting a job for persons with disabilities, because they have to compete with local residents and persons without disabilities at the same time.

When establishing a life in a new place, respondents always return their thoughts to their “home”. They miss their city, its residents, life there.

A man who was forced to leave Mariupol recalled:

“ *I miss home...I miss what Mariupol used to be...I miss my city, which is no longer there.*

They reflect a lot about their condition and feelings:

“ *I felt so weak at the beginning. I couldn't handle much.*

And they understand how to find a resource to live, which means to win.

“ *The people who surround me give me self-confidence and strength.*

### **Those who went abroad**

Some persons with disabilities decided to evacuate abroad. Some of them left Ukraine immediately, and some stayed in the Western regions for a short time.

The country of destination was chosen for their own reasons: they went to places where they had relatives or acquaintances for adaptation and support:

“ *I chose the Netherlands, because my sister lives here,*

where acquaintances or civil organisations offered to evacuate, as well as where they communicate in the language they speak:

“Open Hearts” organisation offered to go to Switzerland.

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*I have an international diploma on knowledge of the French language. I learned that there are already very, very, very, very many people in France, and the system is very slow. I was advised a good alternative - this is Switzerland. There is a French-speaking part of Switzerland.*

In addition, for many respondents, a financial issue is important when choosing a country for evacuation: where there are more chances to find a job in a specialty or where life is relatively inexpensive.

Participants share their experience:

“It seemed to me that it would be easier for me to find a job in Switzerland, where there are many international organisations, where the headquarters of human rights organisations are located.

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*We are thinking about Georgia. This is a very inexpensive country.*

The heroes had an experience of evacuation across the Ukrainian-Polish, Ukrainian-Slovak borders and the border between Ukraine and the temporarily occupied Crimea.

As the interviewees crossed the border in the end of February and throughout March 2022, they faced a number of obstacles and inconveniences.

Hundreds of thousands of people were leaving at that time. Kilometer-long queues of people and cars stuck at all borders. There were difficulties with food and heating while waiting in line:

“There were many people at Hrushiv. People stood for several days under the open sky. There were many little children, infants. It was dark and cold. Children were screaming, there were clashes between people.

There was a risk of injury due to the stampede. People were not very considerate of others and their needs due to stress and anxiety. A man described the situation as follows:

“ *I stood in line. But people began to gather, a stampede began. I realised that a little more - and I will be inside. And those who stood behind, they do not see me and they will press, and someone will fall on me, and they will simply trample me, crush me. That is why I left this queue. I drove up to the border guard and said that I would stand next to him as long as necessary until he let me through. Because in the queue they will simply kill me, crush me.*

The rules regarding the crossing of the Ukrainian border by men of conscription age were vaguely formulated. People had very different experiences when going through border control. The ability to evacuate without hindrance did not depend on the type of health disorder, group of disability, visibility of the disability, or presence of necessary documents at that time. It was somewhat a matter of luck in terms of mood and choice of decision maker at the border.

For example, one of the respondents, who uses a wheelchair and had all the documents confirming his disability, faced problems when crossing the border:

“ *I have a disability that is visually obvious. I've never had a problem crossing the border before. When I left, I took all the documents with me. But the documents I showed them were not enough. They say: "We cannot allow you to go. You are at a good age. Come back and defend Ukraine". I told them it would be an honor and I would love to come back. But I can't even press a hook of a machine gun. I was stopped for about an hour or an hour and a half. I stood alone between two borders - Poland and Ukraine, not knowing what awaited me next, whether I would be allowed to pass or not.*

Another respondent encountered prejudice against his gender while being in line, where he was pushed away from a crowd of women and children who were evacuating. In his opinion, this was due to the fact that he is a man with an invisible disability.

“ *I was standing in a crowd and the police pushed me away. Outwardly, I look like a man without any visible disability.*



This man failed to cross the border the first time. This was argued by the fact that he did not have enough documents that would confirm his status as “unfit for military service”. Therefore, he repeatedly passed the medical examination at a local military commissariat. To emphasize his own health disorder, the man refused to use hearing aids for a while.

He recalled, in particular:

“ *I was very aware that as a person with an invisible disability, I looked very suspicious when I spoke, when I responded to sounds, when I did not look like a person with a disability in any way. So I decided not to use a hearing aid device. I tried not to talk, to communicate in writing.*

Having received the same certificate as he already had, he was able to evacuate to Slovakia two days later.

On the other hand, for some men, even with an invisible disability, crossing the border did not become something problematic:

“ *I presented all my disability documents, that I have a disease, that I have been receiving treatment for more than six years. They checked it all. There were no problems.*

There are polar different stories about how residents of the EU countries and representatives of the occupying “power” met Ukrainian refugees at the border.

A woman who left the Kherson region for the temporarily occupied Crimea recalled how she prepared her appearance, thoughts, and gadgets for a meeting with Russian border guards. She had to talk to FSB employees:

“ *At the border, a border guard didn't like me for something, and she sent me to be filtered by the FSB. They completely checked my phone, asked about contacts, asked about Ukraine.*

Instead, after crossing the border with the EU countries, all participants of the research noted that they were immediately helped by volunteers with snacks, transportation, finding temporary housing, just a small talk:

“ Polish people helped a lot. It was visible both in their actions and in their words. It was very important to see and feel this support. They also wrapped the children in blankets, and told where you can get hot food, and when the train will be, and helped carry the bags.

Some agreed the day before about the possibility of escorting at the border and transportation to a temporary place. This was supported by a number of Ukrainian and foreign civil organisations, which established work on the evacuation of persons with disabilities from Ukraine<sup>22</sup>.

For the participants of this research, the countries bordering Ukraine did not become the final destination. Their evacuation still lasted from several days to weeks. During that time, they resolved issues with documents, finally decided on the country of destination and tried to regain strength.

Upon arriving at the final destinations, the male and female interviewees remember the warm and sincere reception in their new “home”, efforts of the local people to help them and create comfortable conditions:

“ We are now in excellent conditions. I am just flying now. We received and receive a lot of support from the people who accepted us. They help us with filling out documents and sending them.

People are satisfied with living conditions in the EU countries. All interviewees live in separate rooms or premises, having access to all means to meet their own needs.

Those of them who need assistive technology in the home were able to get it. In particular, a man in a wheelchair talks about his experience as a refugee:

“ Here, they found me a place to live in an institute that specifically deals with persons with physical disabilities. Here, everything is arranged for this, assistants are more prepared to provide physical assistance.

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22. For example, the NGO “Open Hearts” and the NGO “Fight for Rights” were mentioned.

Each and every one of the interviewees is trying to adapt in a new country. First, they start learning the local language. The courses are free and compulsory for those who fled the war.

Certain difficulties in language learning appear with persons who have hearing impairment. They put much more effort into learning. Because inclusive methods of language learning are not used during classes.

They also try to restore the psycho-emotional state. This is especially needed by women with disabilities who evacuated with children. They are faced with a need to take care of themselves and their children around the clock.

“ *At first it was very scary and it was not clear how to communicate with the child, so as not to harm or sow fear, anxiety. I understand that I am responsible for the child, I have to somehow overcome this fear in order to preserve her sense of security. But everyday life is also very difficult. Online lessons began; registration and other issues had to be resolved. And even in terms of procurement, there were difficulties. To get to the nearest store, you need a car.*

Some regain their mental health by joining wartime psychological support groups. Others try to find a hobby or do their favorite things.

Those who worked in Ukraine are trying to continue doing so. First of all, they are looking for a job locally in order to receive a salary at the level of local salaries, because

“ *the cost of living in Ukraine and here is completely different. In order to survive here and pay the bills, you need to get another salary. You need to work here.*

Those of the participants who are looking for work in new countries try to find it among those specialties that are close to what they did in Ukraine. They do this on their own, by sending their CVs to a company where they would like to work, or by distributing it to new acquaintances on the spot. However, they understand that they are doubly discriminated by the labour market in their host country. First, because of competition with citizens of this country, who are native speakers and, most likely, more qualified. Secondly, because of competition with persons without disabilities.

One of the participants said:

“ *I practice jurisprudence - admission to the profession is higher, there is a Swiss legal system, the legislation is in German language.*

The policy adaptation process for persons with disabilities in European countries, public attitude towards disability and inclusiveness of the environment greatly facilitates the adaptation process. Some of the respondents emphasized that their (self-)identification changed after the evacuation abroad:

“ *After I got to Poland and then to Switzerland, I had, in my opinion, a sense of dignity.*

Any adaptation to new conditions involves encountering challenges that must be overcome.

The first challenge is the communication problems with others due to ignorance or insufficient knowledge of the local language. Quarantine restrictions, in particular, wearing masks, which were still in place in most countries at the time of evacuation - made communication even more difficult. This made it difficult to monitor articulation, read words and emotions during a conversation. Persons with hearing impairment felt this especially acutely.

It is difficult for some respondents to expand their circle of communication, although there is a desire to do so. The respondent, who has an intellectual disability, noted that he attended a day care program for persons with disabilities in Ukraine. He and his parents tried to find something similar in the host country, and “we need to drive there for more than an hour”. Therefore, now he communicates only with his parents and a few acquaintances with whom he evacuated.

It also became clear that Ukrainian men and women with disabilities who were evacuated abroad, faced legal conflicts regarding their social protection. Abroad, they are seen only as people escaping from war. They receive the same social support as other evacuees. Disability-related social security needs are not taken into account:

“ *Refugees with disabilities do not have any additional social support compared to other refugees. We are put on equal terms with other people. But a little more is needed to ensure our livelihoods.*

Those who went abroad consider their decision correct. In this way, they created conditions for safety and preservation of mental health for themselves and their loved ones, who were also evacuated.

It is difficult for respondents of the research who went abroad to assess their plans for the future. Some of them are going to stay abroad, considering European society is more comfortable and favorable for themselves:



*I will try to integrate into society. I will find my ways here. I love Ukraine, I love people in Ukraine. But it was very difficult for me there because of the manifestations of discrimination.*

Others plan to return to Ukraine in order to implement the experience and knowledge gained abroad:



*I want to gain positive experience and useful things in Germany that are not available in Ukraine. And bring it to Ukraine. I would like to participate in the development and strategic planning of the reconstruction of Ukraine. To reconstruction, where inclusion will not be some fashionable infrastructural feature, but where it will be the norm.*



## Experience “activists”

“ *I immediately decided that I wanted to sit just like that. Come to your senses, how to speak, just doing nothing. I decided that the best way to distract yourself from all this horror, what happens is start working.*

(Participant 15)

When talking about war or emergency situations, persons with disabilities are rarely represented as activists. The concept of activism and involvement of persons with disabilities during war appeared under the influence of use of the human rights model of disability.

The concept of activism of persons with disabilities in war appears in isolated researches,<sup>23</sup> mainly related to recent military conflicts,<sup>24;25</sup> very rarely – World War II.<sup>26</sup>

The events of the aggression of the Russian Federation against Ukraine strengthen the concept of effectiveness of persons with disabilities in times of crisis.

All participants of the research are actively involved in overcoming outstanding difficulties which came with start of the aggression in one way or another. It's a way to feel included and important. As one respondent noted:

“ *When I started to act, I felt like a person again.*

Persons with disabilities have become more active in various fields. Most of them engaged in volunteer activities.

● They sorted and delivered humanitarian aid:

“ *I delivered humanitarian goods to occupied territories.*

● engaged in evacuation of people:

“ *I was engaged in evacuation of people from Donetsk and Luhansk regions.*

23. Grove S., Grove N., Myerscough T. (2010) Intellectual Disability and War: Issues for Consideration. *Journal on Developmental Disabilities*, V.16 N.1, p. 85-93.

24. Bruun, F. J. (1995) Hero, beggar, or sports star? Negotiating the identity of the disabled person in Nicaragua. In B. Ingstad & S. Reynolds Whyte (Eds.), *Disability and Culture* (pp. 196-200). CA: University of California Press.

25. French, S. (1994). *On equal terms: Working with disabled people*. Oxford: Butterworth-Heinemann.

26. Whitney, E. A., & MacIntyre, E. M. (1944). War record of Elwyn boys. *American Journal of Mental Deficiency*, 49, 80-85.

- prepared food, found the necessary contacts and things, donated to the Armed Forces of Ukraine and charitable initiatives, helped those in need:

“ *Many elderly people, persons with disabilities, who live in neighborhoods under fire, could not evacuate. I help them, sometimes bring them food, sometimes give them water.* ”

- Others began to use their professional knowledge and skills to help others. For example, they created effective information channels for dissemination of local news:

“ *I created the “Mykolaivka 24/7” telegram channel, which shared with locals of Mykolaiv where you can get help, how you can do it and how you can provide it.* ”

- Some provided legal advice and support:

“ *I joined human rights activities. Helped people who were persecuted in occupied territories. And now I am more helping the Swiss organisation to somewhat adapt their legislation to the challenges associated with the new migration flow.* ”

One of the respondents managed to create a network of lawyers who advised people on crossing the border, methods of evacuation, continuation of disability, obtaining means of rehabilitation.

One female participant was under a direct risk for her own health and life by joining pro-Ukrainian rallies in the already occupied territory of Ukraine:

“ *I was at all pro-Ukrainian rallies all the time I was in Kherson. At one rally, a Russian military fired into the air when it was just a peaceful march. They drove up on an armored personnel carrier and started shooting in the air.* ”

Thanks to effectiveness, persons with disabilities become included in the process of (surviving) the war, and therefore - victory. They express their desire to join the restoration of Ukraine:

“ *I want my experience gained over the years to be applied and useful precisely in the restoration and revival of Ukraine, which will now take place.*

This can become an opportunity for the formation of a truly reborn inclusive Ukrainian society.



## Conclusions

The war shows us stories of heroism, courage, survival, losses and the whole range of experiences of persons with disabilities.

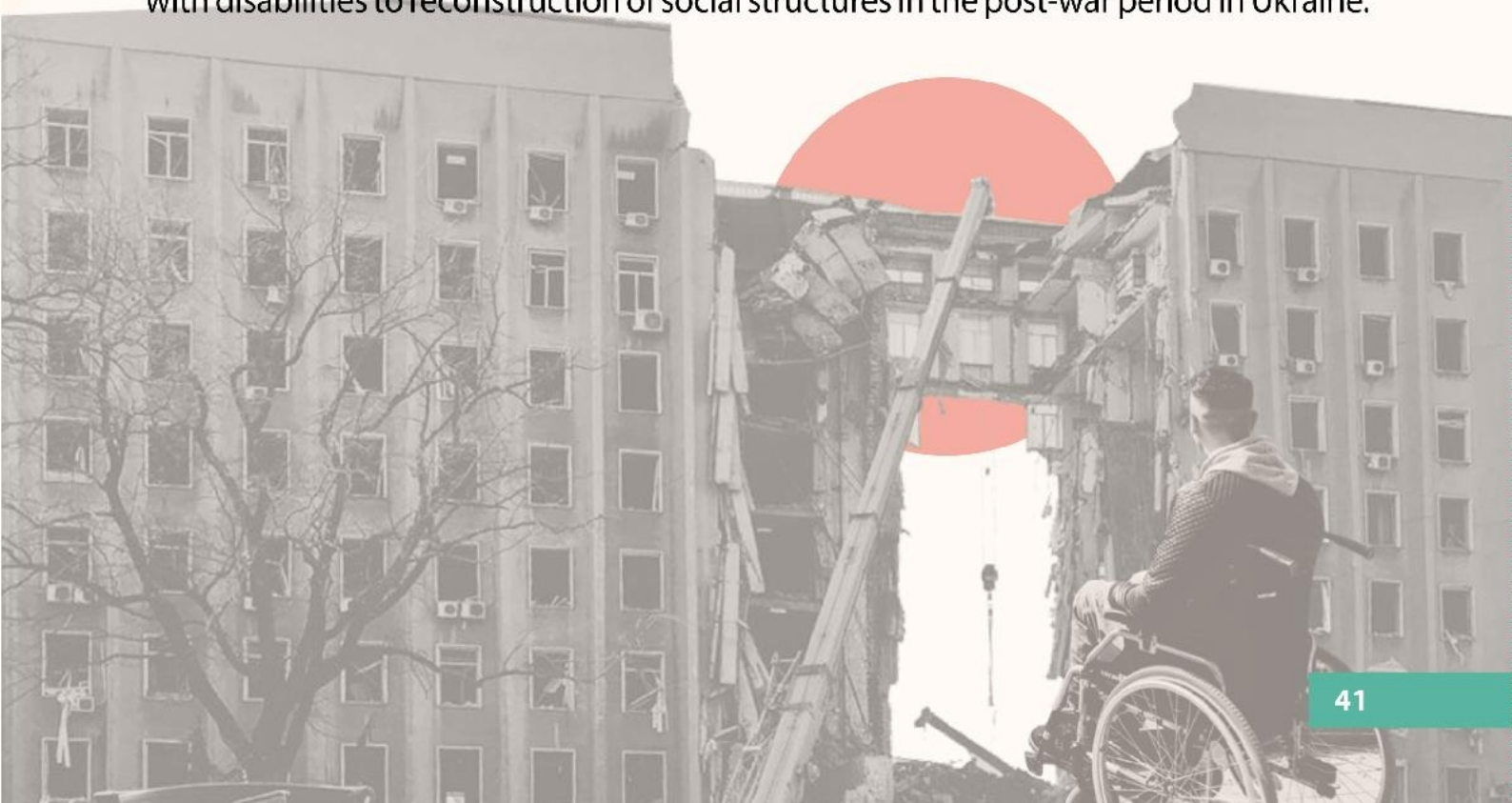
The analysis of received data indicates that persons with disabilities receive different experiences at the same time during the aggression of the Russian Federation against Ukraine. They are victims of war, they are escaping from war and they become activists during war.

It is clear that persons with disabilities have different risks because of war than persons without disabilities. During war persons with disabilities face a number of challenges related to access to information, availability of shelter, provision of basic needs, maintenance of appropriate health status, difficulties of evacuation at each of its stages.

Challenges that people with disabilities faced during the initial phase of the Russian aggression against Ukraine demonstrated, in particular, the limited effectiveness of the system of social protection of people with disabilities in the conditions prevailing at that time.

Rescue during the war was undertaken by persons with disabilities themselves. In addition, they are trying to save other people who suffered from Russian aggression against Ukraine. Perhaps it is for the first time in the history of wars, when persons with disabilities become activists during a war.

This shapes meta-narratives about disability and war in a different light. And it can open a discussion about the importance of involvement and contribution of persons with disabilities to reconstruction of social structures in the post-war period in Ukraine.



Non-governmental organisation of persons with disabilities “Fight For Right” as part of the grant “From discrimination to inclusion: promoting right to work for all persons with disabilities in Ukraine”, produced in the framework of the project “Strengthening the access to justice through non-judiciary redress mechanisms for victims of discrimination, hate crime and hate speech in Eastern Partnership countries” conducted during May 2022 research of everyday experiences of persons with of disabilities during the initial phase of aggression of the Russian Federation against Ukraine. The purpose of the research was to learn everyday experiences of persons with various forms of disabilities, in particular, experience of “victims of war”, “rescue from war”, “activists”.

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