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Social participation and inclusion of ex-combatants with disabilities in Colombia

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The purpose of this paper is to explore ex-combatants’ understandings of disability and the pathways for social reintegration available to them in Colombia. The qualitative data for the study include seven in-depth interviews with ex-combatants and 29 with key informants, including disabled people’s organisations, government agencies, international organisations and academic groups. Findings suggest that transition to civilian life for ex-combatants is made more difficult by inadequate procedures, lack of support and complex administrative data vacuums. Social determinants, historical prejudice against persons with disabilities, high levels of unemployment and political polarisation in a post conflict context combine to trigger poverty traps. The findings indicate pitfalls in the early implementation of the Colombian peace process, which did not consider structural issues that affected transition to civilian life for ex-combatants with disabilities. Furthermore, key enablers for social inclusion such as peer-to-peer support have been identified by respondents. This paper concludes that more needs to be done to enhance the voices of ex-combatants with disabilities and to understand the profound meaning of acquiring impairments through participation in conflict, as well as how post-conflict responses could enable these individuals to gain the skills they need to successfully reintegrate into their communities.

Keywords: Conflict aftermath; ex-combatants with disabilities; Colombia; Convention on the Rights of Persons with Disabilities.

Background

Little is known about ex-combatants with disabilities in low and middle-income countries, either as agents of change, as a political group, or in their roles as civilians (Berghs, 2015; Lord and Stein, 2015; Meyers, 2014). This issue becomes more relevant as conflict is on the rise. The number of people affected by humanitarian crises and conflicts has almost doubled over the past decade, and is expected to keep rising (UN, 2015). Armed conflict is the cause...
Disability and the Global South

of many disabilities; countries affected by conflict experience a high number of injuries as a result of combat, landmines and unexploded ordnance remaining after the war (Blanchet et al., 2014; Crock et al., 2014).

Barriers and facilitators for the social reintegration of ex-combatants with disabilities have only rarely been studied (Lord and Stein, 2015). There is scarce data on the extent to which ex-combatants with disabilities are able to gain sustainable employment, an adequate standard of living, or full participation in the life of their community. Furthermore, existing disarmament, demobilization and reintegration processes are not adequately serving disabled ex-combatants (ibid, 2015). Available literature shows that those who acquire disabilities or secondary impairments during conflicts, may find it hard to reintegrate into their communities for a variety of specific reasons (Dos Santos-Zingale, 2011; Hawkins et al., 2015; Lamichhane, 2014) on top of the general problem that disabled people are more likely to be poor, excluded from social services and discriminated against (WHO and World Bank, 2011). Dos Santos-Zingale (2011) and Berghs (2011) found that acquiring a disability as a result of participating in conflict, shaped persons’ identities and social dynamics and exacerbated at times, the influence of poverty and social deprivation in identity reformation. Scholarship on intersectionality between disability identities, gender, poverty and ethnicity has shown how lived experiences of disability are heavily influenced by culture and social dynamics (Grech, 2015; Rivas Velarde, 2018). Furthermore, social and political minorities with disabilities are more likely to experience multiple layers of discrimination (Rivas Velarde, 2017). Lack of engagement of disability scholarship with the bodily experience and cultural, social and political elements that contribute to the understanding of disability of these individuals, negatively impacts upon persons with disabilities.

Historically, the soldier’s body has been portrayed as an icon of masculinity that is unsettled through disability (Wool, 2015). Research tends to focus on issues pertaining to mental health and post-traumatic stress disorders, reinforcing a rather traditional approach to disability as a medical problem, rather than understanding the sense of selfhood and restoration of ordinary life after injury and participation in combat (MacLeish, 2013; Penningthong, 2015). Hawkins et al. (2015) found that service people are more likely to report difficulty in transitioning into civilian life than other civilians, despite reporting sufficient access to specialized adaptive equipment. Their findings suggest that barriers go well beyond environmental factors and access to specialised services, including rehabilitation. For ex-combatants with disabilities, identity reformation after injury is charged with a variety of cultural and political elements that trigger barriers to social reintegration. For example Griffin and Stein (2015) found that ex-combatants might delay or even refuse access to specialised services and support, due to downplaying their injuries or being reluctant to be labeled as disabled, which in turn generates hindrances in transitioning into civilian life, particularly the world of work. As a result, a growing numbers of studies show that being active in the workforce, helps veterans to integrate back into society (Araten-Bergman et al., 2015; Corner et al., 2014; Redmond,
Identity reformation is also influenced by whether the person fought for a rebel group or a national army; and whether their communities have perceived this group positively or negatively. Meyers (2014) studied identity negotiation of both ex-Sandinista and ex-Contra combatants with disabilities in Nicaragua. He found that each group developed different strategies of identity development, depending on the social context and the benefits they would obtain. The ex-Contra group holds on to the disability identity, presumably because it helps them conceal their history as ‘traitors’. The ex-Sandinistas, however, were reluctant about disability identity and would rather self-identify as ‘war-wounded’, because this is how they get their benefits. Yet, as their benefits diminish over time, and their barriers to access to disability benefits become more pronounced, the findings suggest that their identity association might change.

Other barriers to reintegration stem from political favouritism influencing the distribution of the scarce resources available in the post conflict context. Brinkerhoff (2007) found that access to social and health services, cash transfers or any other support available for those who took part in combat are often politicised, and this bias inevitably sets some ex-combatants on the path to severe poverty and neglect. Lamichhane (2014) reaffirmed Brinkerhoff’s findings, documenting how many years after the cessation of the Nepalese Civil War, ex-combatants with disabilities from the Nepalese army tended to have access to better social protection mechanisms and more community support than ex-Maoist combatants with disability. Literature from Nicaragua (Meyers, 2014), Sierra Leone (Dos Santos-Zingale, 2011; Berghs, 2011) and Nepal (Lamichhane, 2014) highlights how initial goodwill and moral power linked to acquiring a disability during conflict and being perceived as a war hero, tend to fade as time passes by and people are given aid and resources. Furthermore, in some cases, this divide increases the risk of neglect, poverty and exclusion.

This paper reports on research exploring such ex-combatants’ understandings of impairment and disability as well as the pathways for social reintegration available to ex-combatants in Colombia.

**Ex-combatants in Colombia**

Colombia still does not have an exact figure of the number of persons with disabilities in the country, according to the Ministry of Health and Social Protection (2017). However, it recognizes that, according to the last national census of 2005, the number of people with disabilities corresponded to 2,624,898 million (6.1% of the population) and that through the Location and Characterization Registry of Persons with Disabilities (RLCPD), 1,379,001 people have been identified until January 2018, according to the National Disability Observatory (ibid, 2018).
Based on this registry, and according to the population types, it is stated that 13% (172,503) of people with disabilities identified are victims of the armed conflict and the departments with the highest rate of cases are: Antioquia, Bogotá, Magdalena, Valle del Cauca, Nariño and Cesar (ibid, 2018). However, in this case, it is not possible to identify the magnitude of disability in relation to members of the Public Force (Army, Police, Armed Forces, Air Force), civil society or ex-combatants coming from guerrilla groups.

It is important to mention that the way in which the country considers cases of registration of people with disabilities, is represented by ‘types of alteration’ (ibid, 2018) mainly of a functional nature (movement of body limbs, nervous systems, cardio-respiratory, reproductive and sensory organs). According to the National Department of Statistics (Gómez Beltrán, 2008) in the document entitled ‘Identification of persons with disabilities in the territories’, ‘the approach that should be used to address the issue is that of limitations in the activities of daily life’.

Colombia ratified the Convention on the Rights of Persons with Disabilities (CRPD) on May 10, 2011. Since this ratification, the country has issued new legislation promoting the rights of persons with disabilities. The UN Committee on the Rights of Persons with Disabilities (UN, 2016), recognized this legislation as positive development in the Concluding Observations in the first report submitted by Colombia (REF) within the framework of the implementation process of the Convention. These legislative developments comprise:

1) Law 1618 of 2013, which establishes the provisions to guarantee the full exercise of the rights of persons with disabilities;
2) The National Public Policy, determined by the document CONPES 166 (National Council of Economic and Social Policy);
3) Law 1752 of 2015, which defines the criminal type of discrimination based on disability;
4) Law 1448 of 2011 for attention, assistance and reparation for victims of violence, as well as the rules that recognize the Colombian sign language for Deaf and deafblind people.

Further recommendations made by the CRPD committee include the need to adopt the human rights approach across the agencies, registries, policies and programs related to disability.

Regarding the situation of ex-combatants with disabilities in Colombia, after having signed the Peace Agreement (2016), and based on the Socioeconomic Census of the Community FARC-EP conducted by the National University of Colombia in July 2017, there were 10,015 displaced guerrillas, of whom 3,305 were identified as having some type of physical, sensory or mental limitation. This registry was built upon criteria established by the Colombian registration for the Location and Characterization of Persons with Disabilities discussed above.
Currently, the demobilized ex-combatants occupy specific areas recognized as ‘Territorial Training and Reintegration Spaces’ (ETCR), but to date there are no policies or programs focused on re-integrating ex-combatants with disabilities. Some press releases (El Espectador, 2018; La Stampa, 2018; WRadio, 2017), present the existence of multiple disadvantages in accessing complex and specialised health services, education and employment. For example, the Colombian state has an Inclusive Rehabilitation Center (founded in 2016) exclusively for members of the armed forces who are victims of the armed conflict; however, until now, displaced former guerrilla ex-combatants do not participate in the programs offered by this center.

In the Peace Agreement (Alto Comisionado para la Paz, 2016), a public document of more than three hundred pages, it is not possible to identify particular references to how the Colombian state will develop strategies for reincorporation and return to civilian life of ex-combatants with disabilities. In different sources, the Ministry of Health and Social Protection is recognized as the entity that leads the social policy related to people with disabilities in coordination with other sectors. This perspective may be one of the reasons for the country's approach towards understanding the social realities that disability implies, as well as the perception that it is through overcoming ‘personal deficiencies’ that the process of reincorporation can be achieved. This conception could become an obstacle undermining opportunities to achieve equity and the progressive consolidation of peace.

**Research question**

The literature review revealed that the voices, concerns and pathways for reintegration of ex-combatants with disabilities are under-researched, as well as the adequacy of existing DDR processes and protection frameworks. Our review also points out how the disability experience of ex-combatants is influenced by their social and political context. There is little evidence as to whether ex-combatants with disabilities have enough support available to them in order to fully reintegrate into community life, particularly in low and middle-income countries. This paper explores the needs and priorities of ex-combatants with disabilities, the specific barriers they face, and how their claims and needs resonate with current national and international standards.

The realities faced by ex-combatants with disabilities resulting from the armed conflict need to become visible in the agendas of a nation recognized as post-conflict and that requires a re-evaluation of the relevance of social policies on disability.

In this way, it is worth asking: how are the circumstances of the demobilization of ex-combatants with disabilities recognized in reintegration processes within the framework of peace agreements and in the design of social policies?
Methodology

An exploratory case study was selected as the most appropriate research design to portray the lived experiences of ex-combatants with disabilities, given the challenges in studying a phenomenon whose limits cannot be clearly defined (Yin, 2007). Yin suggests the use of exploratory case studies as a tool to ‘facilitate the analysis of interventions, which do not have a clear single set of outcomes’ (2017). This case study explored the following elements:

- Transitions from combatants to ex-combatants and from able to disabled
- Social inclusion/exclusion
- The adequacy and implementation of relevant legal frameworks

The research protocol was approved by the Swiss Ethics Committee on research involving humans, on the basis of fully informed consent and anonymity of participants (protocol number: 2018-00260).

The qualitative data for the study included seven in-depth interviews with ex-combatants, and 29 with key informants, including representatives from disabled people’s organisations, government agencies, international organisations and academic groups. Two of the authors conducted all interviews in Spanish. The data were audio-recorded and transcribed verbatim before thematic analysis was applied, working inductively with the transcripts. Additionally, field notes and grey literature from a fact-finding mission were also considered for the analysis. Summaries of each of these documents were translated into English. Close and repeated reading of the data-set led to themes being identified by the first author, and grouped into categories through discussion with other authors.

Results

In this section we will first present an overview of the political context and time during which this study took place, and will then lay out the four emerging themes from the study: i) invisibility; ii) lack of engagement with dominant disability discourse; iii) identity; and iv) legislation vs. realities. Quotes from participants will be presented throughout: ex-combatants will be referred to as ‘ex-combatant’, whereas policy makers, NGO representatives, and academics will be referred to as ‘participant’. No further personal or professional details will be included, as given the specificity of the topic, it might lead to identification of the participants. The discussion section will further elaborate on the data.

Political context and timing

This study took place two months before the presidential election (2018). The candidate of
the conservative right, Ivan Duque, was advocating getting rid of fundamental parts of the peace treaty related to transitional justice. Petro, the left wing candidate, wanted to continue with the implementation of the peace agreement, which for FARC meant complying with what they have accepted. FARC was often described as divided, and their ex-combatants with disabilities expressed feelings of vulnerability and fear regarding their future. Some participants said that right-wing extremists would kill FARC combatants and all of those who supported the peace agreement if Duque were to win the presidency. In the period following the interviews, Duque won the presidential election. Since then, disability activists involved in this research and who expressed publicly their support for the treaty, have received death threats (personal communication). Various national and international newspapers and NGOs have reported that FARC has taken up arms again. To this day, this has not been officially confirmed, either by the government of Colombia or the FARC leadership.

In the words of one participant, ‘more than 50 years of conflict cannot be erased with the signing of a treaty.’ This sums up the complexities experienced by a country that is trying to move towards peace and reconciliation, whilst dealing with its past. The effects of this long lasting conflict mean that people with disabilities continue to face violence, severe neglect and exclusion. Acquiring a disability through participation in conflict has a profound social and political effect that challenges peace building.

i) Invisibility

Invisibility emerged as a theme in various forms through the narratives of participants. They either referred to their lack of participation in the available political platforms, or cited the lack of information available about where ex-combatants with disabilities were, whether or not they have successfully integrated into civilian life or what their issues were.

At the time of this study (April–May 2018), there was no centralised or well established information on how many ex-combatants with disabilities there were in Colombia. In regards to the Colombian Army, participants attributed this vacuum of data to the structural challenges involved, and a need for better coordination across institutions integrated with the Ministry of Defence. It was not possible to establish how many active and retired members of the army had acquired a permanent disability, nor where or in what circumstances this disabled population was living. Participants from the army claimed that permanent disabilities were more common across lower ranks, as they tended to be more exposed to open combat, munitions and landmines. If permanent disability occurred, ex-combatants usually lived on minimal retirement pensions, facing risks of poverty, discrimination and poor access to appropriate specialised services, including rehabilitation:

A recent ruling of the Supreme Court established reinforced labour security, ensuring
that no military person can lose their job on the basis of a disability. Before this law, people were simply laid off! (Participant)

When it comes to the FARC ex-combatants with disabilities, it was clear from key informants that there was no data on their numbers. FARC did not have these statistics, and failures in registration during the demobilisation in 2017 hampered subsequent opportunities to obtain them. Barriers listed by participants included a lack of access to demobilisation posts; an absence of accessible information about the process which took place in isolated, hard to reach zones of rural remote in Colombia with no access to specialised health care; and ultimately the fear and mistrust regarding the process. Many participants, both ex-combatants and key informants, claimed that ex-combatants with disabilities felt vulnerable during the process and opted to leave and seek support via family networks and other sources:

We are not protected, we fear, we are vulnerable and we’ll get killed. My son, he is blind, he does not have money for rent or anything (ex-combatant)

Fear might be linked to lack of trust in the agreement, their leadership or in the Colombian government. The deprivation they experienced, their lack of basic assistive devices and support that would enable them to achieve self-sufficiency and active participation in the process, all contributed to this feeling of fear.

Inadvertently, the post conflict period imposed double layers of neglect on ex-combatants with disabilities. Not only were they not able to enter the demobilisation and support processes available to others, such as access to training and livelihoods, but they were also left with only the option of trying to re-enter life as civilians facing discrimination and neglect, since the cause of their impairments and their militancy with FARC made them targets of hatred in a deeply sorrowful and divided country.

The intersectionality of disability, ethnicity, military rank, social class and gender led to this invisibility and to the multiple layers of discrimination. Additionally, indigenous-controlled lands in the South Western part of the country were heavily affected by conflict and faced severe scarcity as a result. Some participants claimed that the circumstances in which indigenous ex-combatants with disabilities lived, and even how many of them there were, were unknown to government agencies, as indigenous authorities tend to govern their communities separately, and data might not always be collected or shared. Furthermore, poverty emerged as a key determinant of discrimination and social neglect. Participants stated that, in poor regions of Colombia, violence and high unemployment forced youth into joining one side or the other to stay alive. According to the participants in this study, young people with limited education tend to hold entry-level posts in the military, which involve more risks in combat and more exposure to injuries and permanent disabilities. The economic gaps that divide Colombia do have an impact on the production of conflict, impairment and disability.
Ex-combatants and key informants from military related positions also claimed that, if disability occurred, those with limited education are less likely to access career support:

For soldiers it is the worst; they do not even have the means to have a dignified life...And we are expected to get in a job in the open market in Colombia; that is not going to happen. (Ex-combatant)

I was 20 when I entered the force. I was not able to finish high school or get a degree. I needed to work, so I did, but the army wants you when you are strong, then you get injured and you know you are a waste. They will look for something to kick you out! (Ex-combatant)

Invisibility in the form of neglect was evident throughout these testimonies, demonstrated by the lack of efficient social protection schemes, and the risk of poverty and violence. One of the interviewees faced homelessness, and suggested that for FARC ex-combatants, this risk was much higher. Before the peace agreement, the fear of being jailed often stopped them from accessing any type of support. Scarcity was experienced by all low ranking ex-military personnel. They also suggested that they were lucky to be alive; one of them explained that because the combat took place in rural Colombia, the injured could not always be taken to hospital fast enough to survive. The following quote brings this to life:

I was lucky that the helicopter was bringing food and supplies when I fell, so I was taken out in less than 40 min, I woke up two days later. (Ex-combatant)

Ex-combatants with disabilities were also politically invisible. Key informants stated that disability is still an emerging issue on the political agenda of Colombia and opportunities were still struggling; therefore, elaborating on intersectional issues such as ex-combatants with disabilities was difficult. They claimed that, in the pre-election times when this research took place, key political actors could not take risks, such as engaging in complex issues that were not perceived to have political gain. This narrative shows the politicisation of acquiring disability through conflict, participants’ awareness of the denial of political participation as a social group facing discrimination, and also the lack of importance that national actors give to honouring their commitment to the peace agreement and international frameworks such as the CRPD.

Participants also noted that disability issues were not sufficiently considered in the negotiation of the agreement and that disability advocates were not present in Havana, Cuba. This claimed absence may have been triggered by negative attitudes towards disability displayed by political figures. A leader of the FARC who is blind has distanced himself from the disability rights movement and from local DPOs, denying being a disabled person while appearing on national media. This rejection of affiliation with DPOs or with the disability
Disability and the Global South

The disability rights movement has generated stigma and division. It is important to ask if such disengagement has had an impact on the weak consideration given to ex-combatants with disabilities during the registration and overall peace process.

However, ex-combatants with disabilities interviewed from both the FARC and the military also rejected representation by DPOs or being described as ‘a person with a disability’. The following quotes illustrate this point:

Because he says that disability does not resonate with him, it does not interest him, because he says ‘I am not a person with a disability’ (Participant)

We shall focus on political literacy, literacy for participation to move forward on the implementation of the CRPD. (Participant)

This rejection was often followed by portraying disability identity in a negative light and rejecting concepts such as impairment, limitation and dis/ability. It could be that this denial was a reflection of fears and prejudice inherent in Colombian society. Whilst political literacy could improve issues related to political invisibility, participants assumed that the CRPD does represent all disabled people. This assumption was then contested by ex-combatants with disabilities interviewed and who rejected this. This raises questions about how the international disability rights movement is engaging, or not, with the variety of experiences of disability. Hence, some persons with disabilities in the global North have rejected this identity (Shakespeare, 1996), alongside some disabled people in the global South who in the context of uneven power relations highlight the importance of considering the potential harm of ongoing colonisation. The following section will further explore findings regarding how the international disability rights advocacy model is not engaging with this group, and could indeed be contributing to major invisibility.

Lack of engagement with the disability rights advocacy movement

The results of this research suggest that acquiring a disability through participation in conflict has a profound social and political effect. While narratives of ex-combatants with impairments evoke pain and injuries, the poor fit between their impairment and their environments, a lack of civil participation and political representation, and social discrimination, they still did not wish to be characterised as a person with a disability; nor did they feel represented by DPOs in the political movement. Furthermore, the origins of their impairment and their lives after actively participating in conflict seem to be also misunderstood by DPOs. Key actors and DPOs said that they struggle to engage with ex-combatants, stating that they do not want to accept the truth- that is that they are people with disabilities ‘just like us’. Some DPOs turned this into an argument around social privilege...
and called into question their own understanding of disability, social barriers and bodily identity, wondering if disability, understood as limitation, might indeed not be experienced by some who, in their view, have very privileged lives. The following quote elaborates on this:

This is restrictive for him, for us as a social movement and the political process to get rights recognized, because we do not even know what disability is, nor how bodily identity is constructed, nor why we resist seeing our own bodies. [A leader from FARC] I said, ‘do not tell me I’m a person with a disability or in a condition of disability or disabled...just don’t tell me anything, I have no disability’, then he is denying himself from being...But he might be right though; he is a leader, he is driven around, has help to get everywhere, does not live like others, he might indeed not experience barriers, namely disability (Participant)

Ex-combatants with disabilities, both FARC and government combatants, did not self-identity as persons with a disability, and felt more represented by terms such as ‘war wounded’, ‘veteran’, ‘war crippled’, ‘hors de combat’. The following quotation exemplifies these narratives:

But we are war wounded, that’s how we would like to be referred to. Disability is about being limited...it does not feel like that, I don’t feel that way, I do not want to be disabled (Ex-Combatant)

This rejection of disability seems to be linked to a refusal to carry the stigma associated with disability. It suggests that, for these individuals, the vindicating nature of the disability rights movements resulted in invalidating their sense of self. Being dis-abled did not resonate with their self-perception. Resilience seems to be associated with identity as combatants, as well as celebrating strength not only of their personality, but of their bodies too. It is perhaps this construction of the identity as combatants built during their training and their time active on the front that helps transitioning through their bodily identity after injury. The combatant identity therefore might be helping people to find the resilience they need in identity reformation following their injury. Their portrayal of identity as combatants either by the rebel forces or the army was linked to concepts of strength, sense of purpose and protection. This resonates with the way in which, historically, soldiers have been schooled about warfare. Furthermore, this rejection is not exclusive to ex-combatants. In a similar fashion, indigenous persons with disabilities have been found to be not only reluctant to be associated with the concept of disability, but with the disability rights movement as a whole, claiming that ideologies of the global North do not extrapolate to them (Rivas Velarde, 2018). Perhaps, this reflects a rejection of a dominant political movement that does not represent their voices or understand their needs.

The main discourses of disability call attention to transitions of their bodily identity or the
struggles of political identities and human agency. The following themes illustrate findings in this area.

**Identity and transitions**

Changes, struggles and re-definitions of the self were common in the narratives of participants while describing their transition after injury. First, the sudden disruption caused by injury was often linked with suicide attempts, as people declared that they did not want to continue their lives; they felt alone and distressed, as well as very vulnerable:

> That was very traumatic, very hard, the hardest that any human can imagine; in those circumstances at that moment at the hospital the first thing I did was to ask the police man to kill me, and he answered me ‘I would like to, but I can no longer do it as I’ve already reported you’ (Ex-combatant)

They also declared that before their injury occurred, disability was a concept that they had not engaged with or gained any awareness of. They declared that they first listened to that word after their injury and that their first contact with health personnel was non-empathetic and pitying. It reinforced their fears that they were no longer ‘useful’ or capable of either fulfilling their duties or serving their cause as they did before:

> And then… your life and your expectations are gone, because they make you feel that you cannot serve your country, that you are useless because you are disabled, amputated from the leg, to be amputated from the hand (Ex-combatant)

Being a militant for them was being able to physically participate in combat. They suggested that disability was the ultimate sacrifice that one could make for their cause. Construction of strength and masculinity were also referred to but without much emphasis. Gender identity did not emerge as an issue regarding reaffirmation of identity, perhaps because the large majority of male participants were married, had children, and described their relationships and families as sources of strength. Often, their narratives reaffirmed traditional social constructs of masculinity, such as their role as spouses and fathers. Issues with rediscovering masculinity, virility and fertility were only brought up by one participant. Struggles with fertility led him to experiencing low self-stem and depression. However, he stated that timely support by peers and specialists allowed him to accept his body and access services such as IVF to pursue his desire of having children:

> I remember that there was a very good program about sexuality, so one thinks that this is over, but they are options, I was not able to have children normally, but I got
Bodily discourse and public portrayals of disability among ex-combatants were contradictory. All participants, both key informants and ex-combatants, recalled that disability had been used as the symbol for war, often linked to narratives of heroism. The ‘March of the Heroes’ was an athletic race for disabled veterans which took place a few days after the interviews, and in talk about it, bravery was often linked to overcoming the fear of becoming disabled. Participants felt insulted by this event and thought it was hypocritical. Ex-combatants suggested that this imagery is particularly problematic, as the media and even the State continue to employ it, so that the realities of disability are not discussed: vulnerability, risk of violence and risk of neglect and poverty. The following quote elaborates on this and highlights how violence continues to affect underserved areas of Colombia:

The wounded solder is being used, for pictures, for publicity, as a symbol, but we are left behind. They put five men, the most visible, the ones that look very vulnerable, and then the president stands beside them to say that, thanks to the agreement, we are not going to have more disabled people…but yesterday a bomb went off in Tumaco, the peace is for him, not for us, not the poor Colombians. We are going to have more disabled people, but they will be hidden (Ex-combatant)

It is in their military ability that strength is found. Ex-combatants expressed how their mission within their side’s forces defined them and gave them not only strength, but the inspiration to re-conceive their life and their purpose:

Disability is a limitation, but I think that disability for me does not exist at this moment, it does not exist anymore because, I see that life gives you more options, opens up the possibilities of being independent. I continued my militancy, I reported back from jail, I looked for information, I re-invented the way in which I exercise my militancy. My ideals got stronger, as, in jail, I saw the injustice, the Colombia that we want to change, the legal system is biased and bad (Ex-combatant)

Peer-to-peer was a key positive component in identity reformation, as well as to access adequate support to re-enter civilian life. Peer-to-peer support emerged as key to overcoming the trauma of injury and identity reformation as a person living with a permanent impairment. Participants recalled that being able to share the experience with somebody who had experienced permanent disability, was very powerful; it helped them to overcome depression and navigate access to key services, such as, rehabilitation. The following quote elaborates on the importance of peer-to-peer support:

Support. It is good to see a professional, but it also helps to see another person who
has gone through the same, in my case it was an officer I remember a lot. He just worked with me, he talked to me, he was facing the same situation that I was facing, it did change my perspective in life...It helped me a lot to have the support of somebody who knew what I was going through (Ex-combatant)

Thus, for dissidents, issues of identity and access to support networks are much more complex. Aside from issues regarding access to social protection, they are heavily affected by prejudice and social exclusion. For some, FARC offered the protection they needed, and feelings of loyalty and gratitude were high amongst these people. Thus, for some, deciding to leave the group became very problematic, as they felt that they were much more vulnerable and alone. They struggled, as they thought they had become traitors and deserved to suffer. This feeling triggered a sense of discrimination linked to who they were:

FARC protected me; my family was killed when I was 8. I saw my family being killed; the police came and raped the women, the FARC were neighbours who were trying to protect each other, people don’t tell you that part! I was offered help, but I needed to give information to the government. I will not betray the FARC; I will not turn my back on those that helped me when I needed. I will die if needed, I’ll die with honour, they can cut my tongue out. I respect the FARC, my generals, our plight, our ideals…The problem is that people sometimes discriminate against me for having been in the mountains (FARC)...yes...that's why I have not got a job...I'm a good cabinet-maker, I'm a mining worker, I know mechanics (Ex-combatant)

Legislation vs. realities

The conception and implementation of policy was a recurrent topic in the narratives of all participants. They felt that disability was not sufficiently considered, and some participants claimed that this could be because of the lack of engagement of DPOs during the drafting. Furthermore, the implementation of the plan and its sustainability was heavily questioned, given that participants claimed that the Colombian movement was not fulfilling its obligation under this agreement. This was seen not only as a threat to the peace process overall, but a source of major vulnerability for ex-combatants with disabilities:

The government didn’t fulfil the agreement, we thought they would because of the presence of the UN, the international community, but they didn’t, we don’t have even the basics, we cannot access health care, we are fearful (Ex-combatant)

Participants stated that the lack of fulfilment of the agreement left them unprotected. Opportunities for employment, education and a good quality of life overall without the support promised by the agreement was difficult, if not impossible. In parallel, ex-combatants
from the army reported that the poor pension system and forced retirement due to disability occurred despite legislation that was supposed to prohibit this:

For soldiers, the conditions are deplorable, it seems like Peace was made between 4 here and [reference to Habana negotiation committee 5 Colombia, 5 FARC] here, and the rest are disposable. We feel for the guerrilla, those at the bottom, they are just like us (Ex-combatant)

Colombia has passed very progressive legislation over the last decade. Nevertheless, all participants stated that there are major discrepancies between the progressive legislation achieved and the realities on the ground:

Laws 1618 and 1145 enforce the CRPD. We are very far away from bringing alive the legislation that we already have. On paper, Colombia looks really good (Participant).

People believed that the laws were very progressive but they are not enforced, partly because of data collection deficiencies. Participants said that talking about progress on the implementation of the CRPD cannot be contemplated when the state is struggling to identify disabled people in the first place. They felt that the available tools are not adequate for the Colombian context, since neither is their cost plausible nor their results satisfying. Furthermore, concerns about neglect of underserved populations were raised:

Registration is a failure. In 2005, Colombia registered 2,600,000 PWD. We are not using the Washington [Group] questions; we liaised with them and developed our own eight questions, but we could only include four in the paper census and eight in the online version. Nobody is looking at psychosocial impairments; that is uncharted territory. A country with 52 years living with conflict, we don’t know the impact of it (Participant)

Lack of inter-ministry cooperation and the creation of specialised silos across the movement were seen as major barriers to accountability regarding monitoring and evaluating laws and policies. This also interfered with the coordination of strategies and ultimately with the accessibility and availability of services to the end user:

Our fragmented system produces part of the problem of disability policy in the country; it is the fragmented services. This is especially true, for a military man, when the pension and health systems are completely different: one belongs to civilians and the other is that of Military Forces, so that, in part, those difficulties, let's say, arise from integration. Our official data and projections tell us that we might have 3.5 million PWD in Colombia, but we have registered only 1,378,000. We don’t know about the Ministry of Defence and their registry (Participant)
Overall, participants believed that the necessary legal frameworks needed to move towards improving the lives of people with disabilities and what had been achieved. Thus, the work needed to focus now on accountability and allowing domestic mechanisms to enforce the legislation. Constant comparisons were made with different countries in Europe and their progress in implementing the CRPD. But key informants believed that might not be the best thing to do, and suggested that income was not the main difference. Latin America is different from Europe, and the CRPD for them, needs to take a different pathway to be responsive to PWDs:

Conventions need milestones; the norm needs to be observed and countries need to be called out if they don’t do it…the efficiency of those laws is to be proved. (Latin America) shall stand apart from Europe; otherwise, we could continue with some forms of colonialism (Participant)

There was an overall feeling that CRPD is not offering enough support to LMIC or a grounded connection to their realities. While income and level of development on infrastructure was discussed, key informants often went on to say that focusing in monitoring and barrier removal will not be sufficient. Thus, it appears that more needs to be done to anchor this framework to the realities of the governance systems of LMIC where the majority of disabled people live.

Discussion

Data suggest that transition to civilian life for ex-combatants is undermined by inadequate procedures, lack of support and complex administrative data vacuums. All participants pointed out a number of structural issues that affected transition to civilian life for ex-combatants with disabilities and triggered poverty traps, namely: historical prejudice against persons with disability, high levels of unemployment, political polarisation of the Colombian society which impose barriers to reintegration for FARC ex-combatants and dissidents; and lastly pitfalls related to the conception and implementation of the peace agreement. All participants stated that the peace agreement did not sufficiently consider disability-related issues such as reasonable accommodation, non-discrimination and accessibility. This lack of trust in the Colombian government left ex-combatants with disabilities feeling vulnerable.

Peer-to-peer support emerged as a key enabler to social inclusion and access to specialised services, including rehabilitation services. However, this seems to be happening only on an informal basis. All participants described peer-to-peer support as useful, sincere, empathetic and trustworthy. With phrases such as ‘because we understand each other’, participants claimed that the best help they could have received was meeting a fellow ex-combatant with
a disability, who helped them with overcoming trauma after injury, providing emotional support in bodily and identity reformation, as well as with recovering a sense of purpose and personhood. Peers also helped them to find specialised services such as rehabilitation and community activities that enable integration. Ex-combatants claimed that professional services such as rehabilitation and all services targeting ex-combatants with disabilities would be more effective if peer-to-peer support was promoted and embraced by institutions.

Furthermore, lack of infrastructure for data sharing and effective coordination is also diminishing the government’s capacity to identify and respond to the needs of ex-combatants with disabilities. Findings show that lack of disability awareness during the DDR process left many ex-combatants with disabilities out of the programme, and little is known about the scale of the issue. While agencies debate about the numbers of individuals that were not reached during the DDR process, there is little or no discussion about how to make ongoing programmes accessible for those who did enter the DDR. Data recorded how accommodation at the concentration areas is not accessible, nor is transportation, which hinders access to many livelihood programs and continuing education and assistive devices. For example, the government did not provide prosthetics to those at the DDR. The ex-combatants sought help from international organisations to make assistive devices such as wheelchairs and prosthetics available to those who still remained in the concentration areas, as due to their remote location and inaccessibility, many were left out during the first phases of the DDR.

Overall, it is plausible to think that individuals with disabilities are not benefited to the same extent by the peace agreement and the DDR components as persons without disabilities. The same issues of discrimination and inequity occurred for the army, as the participants claimed that they had been forced to retire due to disability. Although specialised support and comprehensive rehabilitation seem to be available, participants claim that the availability of these services is not well publicised and is unavailable for those outside the capital city Bogota. Furthermore, data from this case study suggest that the international disability rights advocacy movement is not engaging with this group, and could inadvertently be leading to further segregation. More needs to be done to enhance the voices of ex-combatants with disabilities and to understand the profound meaning of acquiring impairments by participating in conflict, as well as how post-conflict responses could enable these individuals to gain skills they need to successfully reintegrate into their communities.

Data collected, confirms the point raised by Lord and Stein (2015) about the pitfalls to peace building and the reintegration framework and its implementation. However, their proposal to use the CRPD as the principal normative framework for assessing the inclusion of ex-combatants with disabilities requires further analysis. While the CRPD is widely ratified and indeed offers the best framework for assessing progress in the realisation of the rights of person with disabilities, key concepts from the text such as non-discrimination and self-determination need to be broadened to represent the variety of voices and realities existing amongst persons with disabilities.
Sadly, increasing conflict around the globe will result in high numbers of permanent and severe disability among ex-combatants, as well as among civilians. In addition, conflict-affected countries such as Colombia might face great difficulties in identifying those affected, since available tools are either too expensive or their results are not efficient enough. This leads us to conclude that more is required to both understand and to resolve these difficulties.

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1753


rehabilitación de personas con discapacidad física por situaciones de guerra.
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