PRELIMINARY OBSERVATIONS

STATUS OF IMPLEMENTATION – COLOMBIA

COMMITTEE ON VICTIM ASSISTANCE
(Italy, Chile, Sweden and Thailand)
Intersessional Meetings
30 June – 2 July 2020

Observations of the Committee on the information submitted by Colombia

1. The Committee welcomes the submission by Colombia of updated information on its victim assistance activities. Based on the information provided, the Committee presents the following preliminary observations.

Mine casualties in 2019

2. The Committee observed that Colombia reported registering 108 casualties including 98 men, 9 boys and 1 woman, of which 60 were civilians and 48 were members of military. This represents a decrease of 60% than the casualty reported by Colombia last year. Colombia also reported having registered a total of 11,811 victims since 1990. The Committee would welcome further information on casualties disaggregated by persons injured/killed.

Establish or strengthen of a centralised database (Action #35)

3. The Committee observed that Colombia reported that information on civilian mine victims have been registered in the Anti-personnel Mine Survivors Information Service (SISMAP). Colombia reported that the information is disaggregated by gender, age, disability, status, ethnicity and shared with relevant ministries including with public health surveillance protocol of the National Institute of Health. Colombia also indicated that a centralised database on disabilities exists within the Ministry of Health and Social Protection (MOHSP).

Integrating victim assistance into broader national policies, plans and legal frameworks and designation of a government entity to oversee the integration (Action #33)

4. The Committee observed that Colombia reported that there is well-established coordination between the mine action authority and relevant ministries, such as the ministries of public health, social protection, labour, the office of ombudsman, the regulatory centres for emergencies, the Colombian institute of family welfare, the national learning service and other institutions both, at policy and programme levels with regards to meeting the needs and rights of mine victims.

5. Colombia reported that victim assistance efforts are included in the following coordination bodies/forums:
   a) the Unit for Comprehensive Care and Repair of Victims (UARIV) is the lead agency in setting up measures for care, assistance and comprehensive reparation of victims of the conflict including mine victims. The “National Participation Table” under UARIV coordinates victim assistance activities on a regular basis;
   b) the State Ministry for the Participation of People with Disabilities leads an inter-ministerial/intersectoral coordination on disability, including through its technical body, the Sector Liaison Group on Disability;
   c) the National Council on Disability led by the MOHSP; and
d) the Technical Intersectoral Subcommittee on Victim Assistance which operates under the mine action centre, coordinate policies and programmes specifically associated to the needs and rights of mine and UXO victims.

6. The Committee also observed that Colombia reported that the integration or mainstreaming of rights and needs of persons with disabilities is regulated by national Law 1145 of 2007 which obliges all organs of the government of Colombia, at all levels, to include the needs of persons with disabilities and their families in their respective development plans and to guarantee their access to available social services.

**Developing and implementing measurable, realistic and time-bound national action plan (Action #33)**

7. The Committee observed that Colombia reported the following efforts in strengthening planning in victim assistance:

   a) in addition to having included victim assistance in the mine action Strategic Plan 2020-2025, in 2019 the mine action centre implemented a Victim Assistance Action Plan and in December 2019 the Technical Intersectoral Subcommittee on Victim Assistance has initiated the work on a new Action Plan for the year 2020;
   b) the Action Plan did not include indicators, but the implementation was constantly monitored;
   c) in accordance with Law 1448, the Dignity and Memory strategy (DIME) continued to guide the country’s efforts on victim assistance; and
   d) having a strategy for mobilisation of national and international resources and cooperation including for victim assistance activities.

8. The Committee would welcome further information consideration of gender and diversity in the plans and budgets available for their implementation. The Committee would also welcome receiving copies of the DIME and the 2020 Action Plan.

**Removing barriers including physical, social, cultural, political, attitudinal and communication barriers to access such services (Action #33)**

9. The Committee observed that Colombia reported on measures that are in place to address issues related to accessibility, affordability and equality of services, as follows:

   a) law 1448 (for victims’ rights) and the Law 1618 (for persons with disabilities’ rights) respectively include the principles of human rights, accessibility, affordability, gender equality and non-discrimination;
   b) the National Development Plan requires the Ministry of Transport to formulate a National Accessibility Plan, in coordination with all relevant ministries and institutions, to ensure physical accessibility of public and private services that open to the public, transportation, information and communication, including information communication technology (ICT) throughout the country;
   c) law 1421 of 2007 requires education activities and other efforts to be made in order to increase social, economic and cultural inclusion of persons with disabilities; and
   d) while significant progress has been made in various areas, there are important accessibility challenges concerning the availability of medical care, psychosocial and rehabilitation services in or close to mine contaminated areas.
10. The Committee would welcome further information on specific progress made in increasing mine victims’ access to services by removing physical, social, cultural, political, attitudinal and communication barriers that may be impeding access to services in Colombia.

Applying multi-sectoral efforts to ensure that the needs and rights of mine victims are effectively addressed in line with the Convention on the Rights of Persons with Disabilities (Action #34)

11. The Committee observed that Colombia reported progress made in aligning victim assistance with the provisions of the Convention on the Rights of Persons with Disabilities in 2019 as a result of collective efforts by relevant ministries, national institutions, advocacy organisations and service providers. The Committee would welcome further information on efforts made in this regard.

Access to first aid and ongoing emergency medical care (Action #36)

12. The Committee observed that Colombia reported that support was provided to all new casualties in 2019 according to the established five stages of pre-hospital care, emergency healthcare including surgery, rehabilitation, continued healthcare and inclusion. Colombia also reported that victim assistance faced challenges with regards to the availability of certain services in the vicinity to affected areas.

Developing national referral mechanism (Action #37)

13. The Committee observed that Colombia reported that a referral mechanism has been in place within the General System of Social Security in Health (SGSSS) and referrals were also made by the regulatory centre for emergencies of each department contributing to the management of the referral process. Colombia also indicated that a special directory of health service providers was used to ensure access to services.

Access to rehabilitation services including physiotherapy, assistive devices and occupational therapy (Action #38)

14. The Committee observed that Colombia reported efforts in meeting the rehabilitation needs of mine victims through the following activities:
   
a) 40 comprehensive roadmaps for comprehensive assistance to victims were developed and 23 existing roadmaps updated in 33 municipalities and seven departments in 2019;
   
b) having human capacity and professionals in areas of physiotherapy, occupational therapy, language therapy, audiologists, optometrists, specialists in orthopaedics, ophthalmology and otolaryngology; and
   
c) the MOHSP was working a mechanism that can contribute to improving tariff conditions for the importation of assistive devices.

15. The Committee observed that Colombia reported that there was a lack of continuity in “prosthesis adaptation processes” due to lengthy administrative procedures and the fact that these services are available in places other than where victims reside. Colombia indicated that the mine action authority has been working with the MOHSP to seek a solution to this challenge.

16. The Committee would welcome further information on the number of mine victims (girls, women, boys, men) that have benefited from rehabilitation services in 2019.

Access to psychological and psychosocial services including peer-to-peer support (Action #38)
17. The Committee observed that Colombia reported that psychological support was available to everyone in need of support through mental health programme and that peer support was provided through some of the mine survivors networks in remote areas with financial support provided by the mine action authority. The Committee would welcome additional disaggregated information on mine victims that have received psychological and peer support in 2019.

Access to social and economic inclusion services, including in rural and remote areas (Action #39)

18. The Committee observed that Colombia reported that social and economic inclusion needs of mine victims were addressed by various ministries according to several different laws and regulations and that victim assistance has been synergised with the Sustainable Development Goals of Colombia. The Committee would welcome information on specific efforts Colombia made to ensure the social and economic needs mine victims are met including in remote and rural areas, including through activities such as capacity building and creating employment opportunities.

Taking measures for safety and protection of mine survivors in situations of risks and emergencies (Action #40)

19. The Committee observed that Colombia reported that in coordination with the Office of Risk Management, Emergencies and Disasters, the mine action authority included necessary actions in the Roadmap for Comprehensive Healthcare and Functional Rehabilitation of mine and UXO victims ensuring prevention, mitigation and response for mine victims and their families in situation of risk and disasters.

Strengthening inclusion and participation of mine victims and their representative organisations in all matters that affect them (Action #41)

20. The Committee observed that Colombia reported that efforts were made to strengthen inclusion and participation of mine victims including by providing financial resources to organisations of victims and by facilitating election of one representative of mine victims into the national “Victims Table” for two a period of two years, in collaboration with the Ombudsman Office in October 2019. Colombia also indicated that in order to enhance participation of mine victims in relevant matters, the mine action authority will host a national stakeholder dialogue in 2020 to create/strengthen a national network of mine victims.

Challenges in implementation of Colombia’s Victim Assistance Commitments

21. The Committee would welcome additional information on the main remaining challenges faced by Colombia in the fulfilment of its victim assistance commitments and any specific proposal it may have on how the Committee and the international community could be of further support to Colombia’s efforts in fulling its victim assistance obligations.