As this is the first time the Philippine Delegation is taking the floor this week, I would first like to pay tribute to Minister Prak Soroth and the Cambodian Team for the success of the 11th Meeting MSP held last year in Phnom Penh. We would like to also commend his strenuous efforts in promoting the vision and objectives of a Mine-Free world, particularly universalization in our region. Together with Cambodia, the Philippines looks forward to the day when all 10 members of the Association of Southeast Asian Nations will proudly stand together as states-parties to the APLMC. We would also like to take this opportunity to thank the APLMC Community, particularly Civil Society, for its invaluable role in advancing the Convention. We would like to convey our gratitute to the ICBL-CMC Partnership and its Philippine Campaigns, the ICRC, Landmine Monitor, Human Rights Watch, Action on Armed Violence, Swiss Foundation for Mine Action and Handicap International, and our other friends, and of course the many individual campaigners and advocates. Engagement with Armed Non-State Actors is particularly important, and we thank Geneva Call, the ICBL / Philippine CBL and the Geneva Academy for IHL and Human Rights for their efforts.

We would also like to thank our tireless Co-Chairs for Victim Assistance, Algeria and Croatia for their work on behalf of the victims of landmines and in our Convention Process. The Philippines inputs in this sector is to encourage coordination and synergy in VA activity across related Humanitarian Disarmament, Human Security and Armed Violence processes. We thank the VA leaders in the Convention on Cluster Munitions and Convention on Certain Conventional Weapons for their synergistic approaches. A special thanks goes to the Austrian and Croatian Missions in Geneva in leading our brainstorming for such synergy. As our delegation had stated in the recent expert meetings in the CCM and CCW, we would like to emphasize identifying and engaging the medical and health professional VA actors and stakeholders across the spectrum of response and care, and advancing South-South and Triangular Cooperation. I would like to cite the work the Philippines is engaged with on the extreme ends of the process - (1) immediate response by, first responders, paramedics and emergency medical technicians, (2) psychosocial counseling, and (3) livelihood and socio-economic integration. In this connection, we are working closely with our Ministries of Health and Social Welfare and Development, our Armed Forces and Police medical commands, and our Public-Private Partnership Community. On the South-South angle, we are looking at possible cooperation with fellow ASEAN countries, Iraq and others for sharing of experience and expertise on paramedic response. Fortunately the Philippines is not a heavily mine-affected country, but we do have our share of victims from Improvised Explosive Devices and terrorism using explosive weapons in populated areas, such as hand grenades - the profile and needs of victims from IEDs, landmines and cluster munitions share many commonalities. We would also like to thank AOAV for their wholistic reseach and analysis of Explosive Weapons victims, and Handicap International for their mapping of macro, meso and micro needs and activity. My delegation looks forward to further engagement and constructive collaboration with the landmines, explosive weapons and broader humanitarian and development communities.

Thank you, Co-Chairs.