

**Standing Committee on Victim Assistance
and Socio-Economic Reintegration**

Update on Activities of the Victim Assistance Experts

27 April 2007

The *Geneva Progress Report* recorded that “in keeping with Actions #38 and #39 of the *Nairobi Action Plan*, which call on States Parties and relevant organizations to continue to ensure effective integration of mine victims in the work of the Convention and an effective contribution in all relevant deliberations by health, rehabilitation and social services professionals, at least 9 States Parties included relevant victim assistance specialists in their delegations to the May 2006 meetings of the Standing Committees.” At this meeting 17 victim assistance specialists have participated not only in the meeting of this Standing Committee but other victim assistance-focused activities. We take this opportunity to again thank the Sponsorship Program’s Donor’s Group for facilitating the participation of 16 of these experts.

As Co-Chairs, it was our intention to make the best possible use of the time dedicated by these professionals to the work of the Convention. On Monday, a lunch time briefing was held to introduce the experts, some of whom were participating in a convention-related meeting for the first time, to the issue of victim assistance in the context of the Anti-Personnel Mine Ban Convention.

Since this Standing Committee adjourned on Tuesday afternoon, health, rehabilitation and social services professionals representing 17 of the 24 States Parties that have reported responsibility for significant numbers of landmine survivors have been actively engaged in meetings to discuss some of the key components of victim assistance.

I take this opportunity to thank the Honourable Sulaiman KYEBAKOZE MADADA, Uganda’s Minister of State for Elderly and Disability Affairs whose active participation over the past few days sends a clear message of the political will of Uganda to take seriously their obligations to mine survivors and other persons with disabilities. Thanks also to the other health, rehabilitation and social services professionals who took time out of their busy schedules to make valuable contributions to the discussions.

As Co-Chairs we have also taken to heart the call of disability advocates, “Nothing about us without us”, and thank Firoz, Zdravko, Prasanna, Nhar, Adnan, Saba, Saleh, Rula, Abdellatif, Ali, and Taher for their participation in the discussions.

We were also able to profit from the active participation of several UN agencies including UNDP, UNOPS, UNMAS, UNICEF, WHO, ILO, and the Office of the High Commissioner for Human Rights, as well as the ICRC, ICBL, Landmine Survivors Network, Handicap International, JMU’s Mine Action Information Centre and the Polus Center.

The parallel program was intended to stimulate discussion and increase the knowledge of the expert participants on key components of victim assistance. Particular emphasis was given to the place of victim assistance in the broader contexts of disability, health care, social services, and development. The program was organised in a series of three-hour sessions focused on particular thematic issues. We were especially grateful to the European Commission for providing interpretation services during the 2 days of meetings which enabled us to communicate freely. And naturally we hope for continued support in the future.

The various sessions focused on physical rehabilitation, including community based rehabilitation, psychological support and social and economic reintegration, legislation and policy, data collection and the process of developing a comprehensive plan of action. Each session started with presentations by experts in the field which focused on key components of the particular issue, principles, lessons learnt and challenges in providing appropriate and sustainable services or in developing comprehensive plans and data collection mechanisms. Practical experiences of particular States were also shared. We heard some very positive examples of how governments are addressing disability issues at the national level. The Co-Chairs are very grateful to all the expert presenters whose presentations provided the foundations for stimulating discussions.

I will just mention two documents that were discussed during the session on physical rehabilitation on a Common Approach to Prosthetics and Orthotics. This Common Approach is the product of a collaborative effort of 35 organizations and agencies. It is endorsed by the International Society for Prosthetics and Orthotics, and has been financed and facilitated by the Swiss Agency for Development & Cooperation, UNMAS, and Landmine Survivors Network.

The two documents making up the Common Approach are the Project Guide which is intended for organizations that provide support to Prosthetic and Orthotic programmes in low-income countries, while the Programme Guide is intended for local implementing programme organizations and institutions. While the Project Guide sets forth the approach of a project, the Programme Guide sets forth the end goals by presenting the features of a local Prosthetic and Orthotic programme ideally in place when the project phase is over. As Co-Chairs we commend the Programme Guide as an important tool for supporting organizations to use when planning and implementing projects. Copies of these documents are available outside the room.

Time does not permit me to go into detail on all the discussions but I will highlight some issues and challenges identified.

Some of the key issues included the importance of:

- National ownership
- Building local capacities
- Sustainability of services
- A holistic approach to assisting mine survivors and other persons with disabilities
- Collaboration and cooperation between government ministries and other actors
- Inclusion of persons with disabilities in decision making processes

Some of the key challenges identified included:

- Services not meeting the needs in terms of both quantity and quality
- Lack of accessibility to or awareness of services
- Disability often not seen as a priority by policy makers
- Lack of political will to affect change
- Lack of capacity to address disability issues at all levels including within the governmental and non governmental sectors
- Poverty and lack of development in affected communities hindering the economic reintegration of survivors
- Lack of donor support
- Lack of inclusion of persons with disabilities in decision making processes
- Victim assistance not given the same priority as other pillars of mine action
- Disability still seen as a charity issue not a human rights issue

In addition, in relation to the collection of data to better understand the extent of the challenges faced the question of “expectations” was raised. In our efforts to obtain more and more data on casualties and through needs assessments we should never lose sight of the fact that we are dealing with human beings not statistics. And each time we ask questions of survivors on their needs we raise the expectation that someone will actually do something to meet those needs.

On Thursday morning we also convened a meeting on resource mobilisation for victim assistance which brought together representatives of the donor community, the victim assistance experts, NGOs, and survivors. The frank and open discussions provided an opportunity for all parties to raise awareness of some of the challenges faced in both implementing programs and in allocating resources to particular programs. We particularly thank the representatives of those States and organisations in a position to assist for their participation.

The feedback received from participants on the parallel program was generally very positive with most stating that they had learnt a lot over the past few days and looked forward to future opportunities for sharing information and experiences. Several suggestions were made for future activities. These include further work on the economics of victim assistance, the prioritization of VA activities, issues of microfinance, creating a network of VA experts, a checklist for establishing national plans of action, etc. As Co-Chair we have taken due note of all these suggestions and will consider appropriate ways forward.

A more detailed report on the victim assistance program and recommendations emerging from the discussions will be available on the GICHD website.