Enhancing international cooperation and assistance as concerns victim assistance

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CONTEXT:

Victim assistance is the most complex and challenging issue for the States Parties and it is fundamentally distinct from the collection of activities that we call humanitarian demining.

This complexity arises from several key issues:

a. First: Victim assistance is a human rights issue that aims to address the rights and needs of people who are often marginalised and living in vulnerable situations in countries with limited resources and many competing priorities.

b. Second: Victim assistance is not a stand-alone activity but requires the coordination of and collaboration between a wide range of actors including several government ministries and agencies as well as non-state entities.

c. Third: Victim assistance should be inclusive of all persons with disabilities, regardless of the cause of disability.

d. Fourth: Victim assistance should be integrated into broader national policies, plans and legal frameworks related to disability, health, education, employment, development and poverty reduction.

At the Cartagena Summit we recognised that guaranteeing the rights and addressing the needs of mine victims requires a long term commitment.

And we recognised that this involves sustained political, financial and material commitments, both made by affected States themselves and
through international cooperation and assistance, in accordance with our Article 6 obligations.

Three actions in the Cartagena Action Plan’s cooperation and assistance section relate specifically to assisting the victims:

Action #39 calls on the States Parties to: “Support the national efforts of those States Parties with clearly demonstrated needs to develop their capacities to provide assistance to mine victims and other persons with disabilities by providing where possible multi-year financial, material or technical assistance in response to the priorities of the affected State to facilitate long-term planning, implementation and monitoring of victim assistance-related activities.”

Action #41 calls on the States Parties to: “Ensure that international cooperation and assistance, including development cooperation, is age-appropriate and gender-sensitive and inclusive of, and accessible to, persons with disabilities, including mine survivors.”

And Action #46 calls on the States Parties to: “Develop and promote regional and bilateral cooperation in sharing and effectively using national experiences and good practices, resources, technology and expertise in addressing the rights and needs of mine victims and other persons with disabilities, to implement the Convention and to engage the cooperation of regional organisations.”

VICTIM ASSISTANCE ACTORS:

There are a wide range of actors involved in making cooperation and assistance happen as concerns victim assistance.

First and foremost we must respect that the ultimate responsibility of guaranteeing the rights and meeting the needs of landmine victims within a particular state rests with that state.

Within a particular affected State, we must appreciate that victim assistance-related activities concern a wide range of ministries and agencies responsible for health, social affairs, labour, education, transport, justice, planning, finance, and possibly others.

In States in a position to assist, the main actors are usually development agencies and ministries that engage in international cooperation efforts.
However, within these agencies, there could be multiple relevant sub-actors, including those responsible for bilateral development assistance or for providing assistance through multilateral entities such as the WHO or ICRC.

We should be clear that States Parties in position to assist include any State that has any form of assistance that it could offer to another State to help in improving its response to landmine survivors and other persons with disabilities. In this Convention, we are fortunate that there are 156 States Parties in a position to fulfil Article 6.3 obligations.

International organisations are also key actors in generating resources or implementing programmes. Again, these actors, like States, are not monolithic but complex. For instance, several aspects of the work of the WHO may be relevant to what we consider “assisting the victims”.

Associations of landmine survivors and disabled persons organisations are important stakeholders in victim assistance-related activities, as are other non-governmental organizations.

While some, like Handicap International, are well known members of the Convention community, others that are actively involved at the national level working on disability and/or development issues may not see themselves as working on what we call “victim assistance”.

In order to better understand the scope of services available in affected States, a comprehensive mapping of all actors involved in services relevant to “assisting the victims” is needed.

In terms of actors, we should also recall the importance or the potential of regional organizations and the private sector.

ISSUES AND OPPORTUNITIES:

Because cooperation and assistance is the heart and soul of our Convention, we must be clear regarding the issues and opportunities as concerns victim assistance.

First: To date, there is no clarity on the true magnitude of what is provided by States in a position to assist.
The bulk of what is made available for activities considered consistent with “assisting the victims” is not captured in any assessment of “mine action” funding.

The bulk of what is provided is through bilateral cooperation between States to enhance healthcare systems, physical rehabilitation programmes, mental health services, the exercise of rights by persons with disabilities, et cetera.

A dialogue on enhanced cooperation and assistance on “assisting the victims” could itself be enhanced if those giving and receiving development assistance, including core budget support, could provide greater clarity regarding the true magnitude of the effort being made to assist States in developing the responses necessary to meet the rights and needs of all individuals who are injured or who live with disabilities.

Second: What we do know about “victim assistance” funding is that more than US$ 232 million has been reported since 2004 in support of emergency medical care, physical rehabilitation and other assistance carried out by international service providers such as the ICRC, Handicap International, other NGOs and relevant UN agencies.

With an overwhelming message from NGOs in 2009 being that the majority of survivors are no better off than in 2004, our dialogue could be aided by knowing what actually resulted from this US$ 232 million + investment.

Third: We need to move beyond calls that a specific percent of “mine action” funding should be dedicated to victim assistance for several reasons:

a. As noted, we do not know much about what surely amounts to the greatest investment being made in “assisting the victims” – support provided through bilateral cooperation between States to enhance healthcare systems, physical rehabilitation programmes, mental health services, the exercise of rights by persons with disabilities, et cetera;

b. To argue for a greater piece of a finite “pie” for one activity may mean less for another. More funding for victim assistance at the expense of humanitarian demining – particularly when demining is one of the main activities to address the victimization of communities and to prevent additional victims – may be counterproductive.
c. As well, we do not know how big the “pie” should be.

A fourth issue or opportunity concerns defining what we expect from affected States in terms of “national ownership”.

In this regard, I am pleased to report that progress has been made this week. During the victim assistance experts’ parallel programme, we came up with a number of ideas that the States Parties may wish to consider:

That is, national ownership in relation to victim assistance could include the following:

- High level interest and leadership in addressing the rights and needs of mine victims and other persons with disabilities;

- A national coordination mechanism empowered and provided with the human, financial and material capacity to carry out its responsibilities;

- A comprehensive policy and plan, and, legislation to address the rights and needs of persons with disabilities including mine victims;

- A regular significant national financial commitment to implement the policy, plan, and legislation and to provide services;

- Capacity to implement the policy, plan and legislation or steps taken to acquire the resources necessary to build this capacity; and,

- A national focal entity for disability-related issues.

A fifth issue or opportunity is the need to recognise that cooperation and assistance is not only about financial resources. The provision of technical support, support for national capacity building and contributions of equipment and supplies are all important.

A sixth matter that we should consider relates to the challenges in channelling resources for victim assistance-related activities from States in a position to assist.

For instance, a Ministry of Health may not be a direct interlocutor in discussions concerning bilateral cooperation even though it is the State entity primarily responsible for what we call victim assistance.
Another resource channelling issue that has arisen concerns the months or even years it may take for the funds to be released by an international funding channel.

These issues and challenges are the tip of the iceberg. In the discussion paper that was distributed by the President, there are even more matters that we may wish to consider.

However, I do hope through my overview I have set the scene for dialogue on this matter.

Please allow me to close by briefly summarising the questions that are contained in the discussion paper, as this might help prompt such a dialogue:

First: How can we gain greater clarity regarding the true magnitude of the effort being made to assist States Parties that are responsible for significant numbers of landmine victims?

Second: What difference has been made from the sizable investment that we do know about? What lessons have we learned?

Third: Given that “assisting the victims” exists within broader healthcare, social services, development and human rights contexts, what is the role – and the extent of the role – of our Convention in addressing what amounts to a profound set of challenges to overcome in many countries?

Fourth: Do we agree with the definition of national ownership as concerns victim assistance that has been discussed this week by the victim assistance experts?

Fifth: What specific blockages do States Parties that are responsible for significant numbers of survivors face in being able to mobilise resources internally and from international sources?

And sixth, how can States Parties to our Convention – whether they are party to the CRPD or not – ensure coherence in acting upon the cooperation and assistance provisions of both Conventions?

Thank you.