Thank you, Mr. President,

Thailand is among the countries that hold the responsibility to provide for the well-being of a significant number for landmine survivors. As we now reach the mid-point of the implementation of the Cartagena Action Plan, it is my pleasure to share with you our progress made in implementing the victim assistance related actions as well as our lesson learnt and experiences in our victim assistance effort.

The latest development are reflected in our revised Master Plan on Victim Assistance 2012-2016 to be in line with the Cartagena Action Plan. The revised Master Plan provides five action plans aiming to strengthen our victim assistance effort in a comprehensive and sustainable manner.

Mr. President,

Realizing that victim assistance is multi-faceted, Thailand always strives to apply a holistic and integrated approach to our victim assistance. Two out of the five action plans are devoted to cover from the emergency and continuing medical care, physical rehabilitation, psychological support, and social and economic inclusion. The Action plan #2 focuses on a continuity of assistance needed by the victims from emergency health care to physical rehabilitation and psychological support. In the meantime, the Action plan #3 focuses on a life-long process of social and economic reintegration, which is crucial in helping the victims regain their normal life and fully reintegrate into their society.

These two action plans aim to ensure a comprehensiveness of our VA work as well as to promote the integration of all aspects of our VA effort into a broader national policies, plans and legal framework, especially regarding disability, health, development and poverty reduction. Thus, the National Sub-Committee on Victim Assistance, which is an inter-sectoral coordination mechanism comprised all the agencies and stakeholders concerned, is tasked not only to develop but also to monitor and evaluate the implementation of these two
action plans, in order to make sure that each task covered under the action plans is properly carried out by the agencies concerned. The committee’s mandate is also to ensure that the disabled mine victims are entitled to the same rights and benefits provided by the national legal frameworks the same way and standard as applied to other persons with disabilities.

The recent development in this area is the enforcement of the Person with Disabilities’ Quality of Life Promotion Act B.E. 2550 (2007). This act is designed to provide benefits to all persons with disabilities regardless of gender, physical, social, economic, political or other barriers, including the cause of disability.

Mr. President,

The past experiences also help us realize that an inclusive action plan requires practical and sustainable implementing mechanisms and strategies. The other two action plans are, therefore, devoted specifically for this purpose. The Action plan # 1 focuses on strengthening our database collection and management capacity. We aim to fully utilize the database on mine victim and the database on persons with disabilities as a main mechanism for agencies concerned to develop, implement, monitor and evaluate victim assistance policies, action plans and legal framework.

Thailand believes in sustainability. We, therefore, devote the Action plan # 4 to focus on how to fully apply a community-based rehabilitation (CBR) approach to our VA effort. Our aim is to provide a forum where active participation by all stakeholders, including the victim themselves and their representative organizations at the community level is encouraged and systematized. We also value and strive to empower the landmine survivor networks at the local level and utilize it as a mechanism to support and monitor the implementation of our VA plan and policies, especially in the process of social and economic reintegration, on the ground.

One of the most important development is this area is a series of vocational training programmes conducted by cooperation between the village health volunteer network and the local administrative units in all 27 mine-affected provinces. Over the past years, the National Institute for Emergency Medicine has successfully developed the community emergency health volunteer groups in every province in Thailand. The Institute has also raised a number of local administrative units which has extended their mandates to cover emergency health care service to 85.10 percent in all 77 provinces.