VICTIM ASSISTANCE IN ZIMBABWE

The Government of Zimbabwe has through the Ministry of Public Service, Labour and Social Welfare provided rights-based services to Persons with Disabilities. The Victims Assistance portfolio falls under the overall social protection programmes targeted towards Persons with Disabilities. The Ministry is responsible for the provision of social protection services to landmine and explosive remnants of war (ERW) victims and it has committed to provide victim assistance through The Maputo Action Plan and other relevant legislation.

In landmine infested areas, victims of landmines access services from Government through the Department of Social Services targeted to Persons with Disabilities without reference to what caused the disablement. These services include,

1. Emergency and continuing medical care
   Victims who need continued medical care are assisted to access Government hospitals through the issuance of a voucher that enables them to access services and a cost that will be borne by the Government.

2. Physical and other rehabilitation
   The country has three National Rehabilitation Centres that are accessible to everyone including victims of mines. The Ministry also procures assistive and mobile technologies for Persons with Disabilities

3. Social and economic inclusion and Disability Awareness
   The Government through the Ministry facilitates access to inclusive education which encompasses academic education and vocational training.
School fees are paid for Persons with Disabilities who want to pursue vocational training and tertiary education at colleges and universities around the country. Children with Disabilities access primary and secondary education through the Basic Education Assistance Module Programme which is also funded by the government.

The Ministry of Public Service, Labour and Social Welfare also offers Persons with Disabilities access to a revolving micro-finance loan facility to carry out incoming generating projects.

Through the Food Deficit Mitigation Programme, food insecure households in the rural and peri-urban areas that include Persons with Disabilities are also receiving maize grain on a monthly basis.

In order to raise disability awareness, every year the country commemorates the International Day for Persons with Disabilities in all the country’s ten (10) Provinces. Commemorations for this day are fully funded by the Government.

**4. Establishment, enforcement and implementation of relevant laws and public policies**

Significant progress has been made in crafting enabling legislation responsive to the developmental needs of Persons with Disabilities. Zimbabwe’s adoption of a new Constitution in 2013 gave constitutional Rights to Persons with Disabilities. This marked a breakthrough as far as the rights of Persons with Disabilities is concerned since this had not been articulated in previous constitutional legislation. Section 83 of the constitution has comprehensive provisions for disability inclusion which allows for equal opportunities and disability mainstreaming in all spheres of life.
The Government of Zimbabwe has to date undertaken several programmes and policies aimed at mainstreaming disability. These include equalization of opportunities, initiation of development efforts on the rights, well-being and livelihood of Persons with Disabilities. This provision and indeed many others in our legislative framework reflect the major generating principles underlying the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD).

Zimbabwe is in the process of finalizing the drafting a National Disability policy document to inform and address the rights of Persons with Disabilities. Consultative meetings on the policy draft will be held in most parts of the country’s ten Provinces that include areas mostly affected by landmines.

In order to allow for the smooth and concrete implementation of disability programming, a separate Directorate, the Department of Disability Affairs was recently created within the Ministry to handle disability issues. This is another milestone achievement in disability service provision.

**CHALLENGES**

The absence of a biometric database that encompasses landmine victims disaggregated according to age, gender and location such as village, ward, district and Province has comprised quality of service provision specific to landmine victims. It proposed that attention be urgently accorded to the creation of this national database.
Location of medical facilities remains a hindrance in responding to emergencies and access to medical services particularly for landmine victims. Most landmine infested areas are in hard-to-reach remote areas of the country. There is need to increase mobile health clinics in these areas.

**Conclusion**

The Government of Zimbabwe remains fully committed to implementing obligations of victims assistance as provided for in the Maputo Action Plan. Victims of landmines have and continue to benefit from a number of social protection programmes that have put in place for Persons with Disabilities. Disaggregated data collection for Persons with Disabilities that fully encompasses victims of landmines has to date been slow and remains a priority for the Government of Zimbabwe.