Third Global Conference on Assistance to Victims of Anti-Personnel Mines and Other Explosive Ordnance in a Disability Rights Context: For Greater Inclusion



An opportunity to **REFLECT. INSPIRE. LEARN. EMPOWER.**





The Anti-Personnel Mine Ban Convention is a short reference to the:

CONVENTION ON THE PROHIBITION OF THE USE, STOCKPILING, PRODUCTION, AND TRANSFER OF ANTI-PERSONNEL MINES AND ON THEIR DESTRUCTION

...also known as the Ottawa Convention

In 1997 the international community responded with unprecedented multilateral cooperation and called for determined action to rid the world of anti-personnel mines. The Convention became the first multilateral arms control treaty to make provisions for the victims of a particular weapon system.

Article 6.3 states that,

"Each State Party in a position to do so shall provide assistance for the care and rehabilitation, and social and economic reintegration, of mine victims".

The inclusion of a provision to assist the victims in the text of the Convention was the result of hard negotiations by survivors and many champions among States, international organisations, and civil society.

Today this is the norm, and any international law instrument dealing with the humanitarian problems caused by conventional weapons is considered "incomplete", if it does not contain a provision to assist the victims.

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- 1. The Third Global Conference on Assistance to Victims of Anti-Personnel Mines and Other Explosive Ordnance in a Disability Rights Context: For Greater Inclusion sought to reinforce the resolve of the States Parties to the Anti-Personnel Mine Ban Convention to meet its victim assistance obligations.
- 2. The *Conference* aimed to reflect, inspire, learn, and empower as it built on the global conferences hosted by Colombia (2014) and Jordan (2019).
- 3. The *Conference* was hosted by Cambodia, through its Mine Action and Victim Assistance Authority (CMAA), through a global project sponsored by the Council of the European Union seeking to support States Parties to the Convention to implement various aspects of their obligations, including victim assistance. The Convention's Implementation Support Unit (ISU) provided technical support to the conference.
 - 4. The *Conference* was Co-Chaired by the current President of the Convention, H.E. Thomas Göbel, Permanent Representative of Germany to the Conference on Disarmament, and the Senior Minister and First Vice President of the CMAA and President-Designate of the Siem Reap Review Conference, Ly Thuch.



- 5. Almost 25 years since the entry-into-force of the Convention and in the lead-up to the Convention's Fifth Review Conference (Siem Reap Review Conference) it was timely to reflect, inspire, learn, empower and to continue building bridges and fostering partnerships with a wealth of international efforts and instruments, including the Convention on the Rights of Persons with Disabilities (CRPD) and the 2030 Agenda for Sustainable Development.
- 6. To date, 164 States have agreed to "put an end to the suffering and casualties caused by anti-personnel mines, that kill or maim hundreds of people every week, mostly innocent and defenceless civilians and especially children, obstruct economic development and reconstruction, inhibit the repatriation of refugees and internally displaced persons, and have other severe consequences for years after emplacement."

- 7. Article 6.3 of the Convention states that "each State Party in a position to do so shall provide assistance for the care and rehabilitation, and social and economic reintegration, of mine victims".
- 8. In the fulfilment of their promise to mine victims, the States Parties have come to understand that what they call victim assistance (VA) "should be integrated into broader national policies, plans and legal frameworks related to the rights of persons with disabilities, health, education, employment, development and poverty reduction."
- 9. States Parties have agreed that the term 'victim' refers to persons either individually or collectively, who have suffered physical, emotional, and psychological injury, economic loss or substantial impairment of their fundamental rights through acts or omissions related to the use of explosive ordnance (EO).
- 10. Victims, therefore, include individuals injured or killed as well as their families and affected communities.
- II. At the Convention's First Review Conference in 2004, the States Parties agreed that "victim assistance" included work related to:



- 12 At the same Meeting, the States Parties also agreed that victim assistance is a human right and that efforts in this regard should be guided by this and other principles such as non-discrimination.
- At the Convention's Second Review Conference (2009), the States Parties noted that victim assistance is better understood as a process involving a holistic approach through integration into broader national policies, programmes, and frameworks rather than as a series of separate actions.
 - Since then, the aim of the holistic and integrated approach has been to remove, or reduce, the barriers that may limit mine victims from achieving and maintaining the highest possible level of independence and quality of life.
- 14. Victim assistance is not a standalone action needed in the immediate aftermath of an accident but rather should be understood as a long-term cycle of support that may be required at different times over a lifetime.
- 15. There should be a clear understanding that after mine clearance ends, survivors, and the families of those killed or injured, will continue to require access to services and opportunities to participate on an equal basis with others in all aspects of the life of their communities.

- 16. The *Conference* therefore, provided a forum to continue advancing understandings and enhancing collaboration between victim assistance actors and practitioners working in all fields relevant to assisting the victims. The *Conference* also provided national experts, decision makers, development partners, and survivors and other persons with disabilities, with opportunities to further explore global challenges, opportunities, and good practices in aligning efforts to assist victims in broader contexts.
- 17. The *Conference* brought together over 200 delegates from 17-19 October 2023 in Phnom Penh. The location of the event was significant as Cambodia is among the States Parties¹ that routinely report on efforts to fulfil victim assistance obligations in areas under their jurisdiction or control.
- States Parties and not party were invited as it is recognised that all play a role in achieving the full inclusion and meaningful participation of survivors and persons of all ages and types of disability in their communities on an equal basis with others. In total, 39 States attended the conference; many, represented by officials with responsibilities related to disability rights, healthcare, rehabilitation, employment, development cooperation, or victim assistance, and mine action more broadly.
- 19. Survivors and other expert panellists contributed to discussions on a range of key themes, including:

victim assistance beyond mine action	is the integrated approach the right track?	making data work	prioritising access to health care services
a strategic approach to making assistive technology available	the decisive role of mental health and psychological support	the global reality of inclusion; socioeconomic equity for mine victims	safety and protection of survivors in situations of risk and emergencies
	planning, monitoring, and reporting	cooperation and assistance	

All themes developed and inspired based on information, feedback, and inputs shared by victim assistance experts and other stakeholders including survivors.

- 20. The Conference addressed fundamental questions, such as:
 - a. How can efforts, to assist victims, build bridges and foster partnerships with broader frameworks to avoid working in isolation, and ensure sustainability of efforts?
 - b. Are there trends and approaches we should be aware of which can further empower landmine and other explosive ordnance (EO) survivors, on an equal basis with others in their communities?

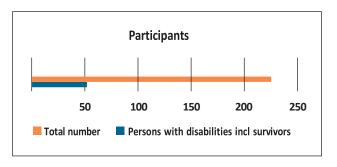
^{&#}x27;Afghanistan, Albania, Algeria, Angola, Bosnia and Herzegovina, Burundi, Cambodia, Chad, Chile, Colombia, Croatia, the Democratic Republic of the Congo, El Salvador, Eritrea, Ethiopia, Guinea-Bissau, Iraq, Jordan, Mauritania, Mozambique, Nicaragua, Niger, Nigeria, Palestine (State of), Peru, Senegal, Serbia, Somalia, South Sudan, Sri Lanka, Sudan, Tajikistan, Thailand, Türkiye, Uganda, Ukraine, Yemen, and Zimbabwe.







- c. Is the integrated approach to assisting victims the right approach?
- d. What are the main challenges that remain in assisting victims?
- e. To fulfil the promise to mine victims, what are the priority issues to be considered at the Siem Reap Review Conference and beyond?
- 21. The participation of relevant international and non-governmental organisations in the *Third Global Conference* was encouraged, including organisations with a specific focus on issues relating to mines and other EO, representative organisations and networks of mine survivors and organisations working in the fields of disability rights and other relevant domains. It was understood that the participation and expertise of international and non-governmental organisations was vital to the success of the conference.
- 22. Importantly, the Third Global Conference benefited from the active participation and expert knowledge of more than 50 women and men who have survived accidents with anti-personnel mines or other EO and other persons with a disability, many of whom shared their personal stories and experience.



23. Survivors and other persons with disabilities, and representatives of government, international organisations, non-governmental organisations, and mine action authorities, reflected on how far the international community has come in fulfilling the promise made to the victims of landmines in 1997. The world we live in has changed since 1997 with new frameworks and competing priorities especially since the Fourth Review Conference, with the COVID-19 pandemic and new conflicts, impacting on the lives and well-being of victims. Importantly, delegates took the opportunity to look forward and collectively identify new and tangible ways to ensure the sustainability of efforts.







- 24. Mine action authorities continue to play a leading role in the collection of data on persons killed or injured by mines and other EO, and on the needs of survivors. In some affected countries, broader injury surveillance mechanisms or Health Management Information Systems record landmines and/or EO as a cause of injury. Landmine and other EO survivors are also identified when accessing physical rehabilitation services in several countries.
- 25. More countries are now using the Washington Group questions in their national census, to identify persons with disabilities based on functioning. However, there is currently a lack of national level data on unmet needs for services, particularly in rural and remote areas to support better planning. Yet, there is potential to improve planning processes through a better understanding of the needs, by strengthening collaboration with academia. For example, a recent study² on the direct health impacts of EO analysed data on over 100,000 persons of all ages and genders injured or killed in EO incidents across 17 countries and autonomous regions. The analysis has the potential to contribute to programming to address mortality, disability across the lifespan, and gender-specific needs.
- 26. Some mine action authorities are raising awareness on available services through the creation and dissemination of a Directory of Services. However, it was noted that even when victims and survivors are aware of services, they may not be able to access them due to factors such as distance, economic circumstances, or discrimination. Two main challenges remain: limited resources for comprehensive data collection; and, ensuring that available data on survivors can be integrated into broader disability mechanisms, or can be used by authorities to assist in broader planning processes.
- 27. After several years of a decline in recorded mine and other EO casualties at a global level, new conflicts have resulted in an increase in casualties resulting in death. A new programme will be piloted with a focus on emergency care in conflict settings which has the potential to build community capacities to reduce the number of people dying.
- 28. Access to health is a fundamental right. All States have an obligation to provide accessible and affordable healthcare. Progress has been made on community first aid training and in training nurses in rural and remote areas. Progress is also being made on health system strengthening more broadly. Nevertheless, many survivors, particularly those living in rural and remote areas, do not have access to the ongoing healthcare needed to improve the quality of their daily life or to enable them to reach their full potential on an equal basis with others in their communities.

²Pizzino, S., (2023). Unsafe Ground: Counting the Direct Health Impacts of Landmines and Explosive Ordnance [Doctoral Dissertation]. The University of Queensland. https://public-health.uq.edu.au/profile/9862/stacey-pizzino

- 29. There remains a need for more investment in primary health care closer to where victims and survivors live, and in building the capacity of the workforce on disability inclusion. Challenges identified include: limited human, technical and financial resources to meet the needs in affected areas; information on available services not disseminated widely; and, limited consideration given to the diversity of users.
- 30. Over time, understandings on physical rehabilitation have expanded to include not only the provision of prostheses for amputees, but also other assistive technology and products to improve a person's functioning, such as orthoses, wheelchairs, hearing aids, eyeglasses, and self-care equipment. Panellists presented the 5Ps framework³ policy and planning; provision of services, products including availability and affordability; personnel including capacity building and referrals; and, people-centred action to guide efforts to improve access to services and devices.

Guidance and examples of good practice are available to support affected States.

- 31. While advances have been made in technology, many survivors do not have access to rehabilitation facilities, affordable devices, or devices that are appropriate to where they live. There is also need to improve understanding on roles and responsibilities among national ministries with regards to national rehabilitation programmes as often there is a lack of clarity on the agency best placed to lead (e.g. ministries of health or ministry of social affairs). This lack of clarity can negatively affect the delivery of rehabilitation programmes. Other challenges, in many countries, include the continued over-reliance on external actors and donors to provide services and, a lack of human, financial and material resources.
- 32. The provision of timely and culturally appropriate psychosocial support for survivors and the families of those killed or injured can make a significant difference to their mental health and well-being. Many guidelines, tools and resources have been developed to improve responses. In addition to the training of local doctors in affected areas in psychological first aid, progress has been reported in the provision of support through summer camps, art therapy, dancing, singing, music, sport, and through income generation opportunities.
- 33. In many affected countries, there is a lack of qualified psychologists to provide the support needed. Support from non-professionals, such as peers and the community, can also make a valuable contribution to helping survivors adjust to their new situation. Survivors shared the value of being able to sit with someone who has had a similar experience to listen and offer emotional and practical support, not only immediately after the accident but throughout their lifetimes as needs and wants may change.
- 34. The benefits of peer support include increased confidence and self-esteem; empowerment; reduced isolation; new friendships; increased optimism; and, reduced stigma. It was acknowledged that professional support is also needed as not all survivors can be counsellors. And because success is based on personal connections, it does not work for everyone. A significant challenge remains that, in many countries, mental health is not prioritised in the health system, and survivors and their associations lack the resources to provide the peer support needed, particularly in rural and remote areas. To address this challenge, peer support should be integrated into national health policies and programmes.

³In 2014, WHO and partners established the Global Cooperation on Assistive Technology (GATE) to promote joint efforts to improve access to high-quality and affordable assistive products, focusing on five interlinked areas (5Ps): people, policy, products, provision, and personnel.

- 35. For two decades, efforts to assist the victims have aimed to promote the full and effective participation and inclusion of survivors in the social, cultural, economic and political life of their communities. This aim is also reflected in the CRPD. Survivors and other persons with disabilities shared their perspectives throughout the Conference on whether progress has been made on achieving this aim.
- 36. It is clear that while some progress has been made, more needs to be done to remove the barriers that prevent full and effective participation and inclusion. This can only be achieved through a focus on four groups: survivors and other persons with disabilities; representative organisations; on the family and community; and, on local, regional, and national authorities.
- 37. Survivors and other persons with disabilities need the confidence and capacity to claim their rights. This could be achieved through opportunities to share their stories, through education and employment, through training to build capacities, and through the support of their family and community. To be supportive and to remove attitudinal barriers, continued awareness raising is needed with the family and the community.
- 38. Advocacy and awareness raising with local authorities, and authorities more broadly, on meaningful disability inclusion, rights, equality, and on removing barriers is also needed. The inclusion of survivors in planning, implementation and monitoring of plans and programmes remains limited in some affected areas.
- 39. Activities such as team sports, which bring survivors and other persons with disabilities out of the isolation of their homes and into public spaces, can be an effective tool for reducing social isolation. Sport and social activities not only have the potential to improve the self-confidence and self-esteem of survivors and other persons with disabilities but can transform negative social perceptions of disability and improve social inclusion in their communities. Challenges, that hinder progress in social inclusion are limited financial resources to implement activities, particularly in rural and remote areas; lack of adapted sports in most affected communities and, limited opportunities to share experiences and good practice with other survivor associations.







40. Opportunities for economic inclusion are essential to promoting the self-sufficiency and independence of survivors and other persons with disabilities. Nevertheless, in many countries, there is a shortage of accessible employment, and limited opportunities in the informal sector. Workplace reforms and more accessible training opportunities for professional qualifications and vocational training are needed. Ongoing support and appropriate policies should be a consideration in all efforts to promote economic inclusion to address the reality that many survivor-run small businesses fail within two years because of high overhead costs and taxes.

- 41. An increased focus is needed to ensure that young survivors and other youth with disabilities have opportunities to join the workforce, or access school or vocational training to equip them with the skills to earn an income. A greater focus is also needed on making accessible technologies available to improve access to employment opportunities, and on ensuring strategies and laws support sustainable livelihoods, particularly in rural and remote areas.
- 42. Delegates were informed about the work currently underway by the Committee on the Rights of Persons with disabilities to draft a General Comment on Article II of the CRPD relating to situations of risk and humanitarian emergencies. Article II is also reflected in the Oslo Action Plan. Many States have disaster risk plans but the rights and needs of survivors and other persons with disabilities are not always included, or information is not shared in rural and remote areas. The General Comment on Article II will provide interpretive guidance and all stakeholders, including survivors, are encouraged to engage in the drafting process to ensure that victim assistance is specifically included.
- 41. States Parties with responsibility for victims are encouraged to develop an inclusive national plan of action, integrated into broader national frameworks such as disability, health, rehabilitation, education, employment, social protection, and development. Survivors and other persons with disabilities should be actively and meaningfully involved in the planning, monitoring, and reporting of national plans.
- 44. A few States have developed specific victim assistance plans involving relevant ministries. In the large majority however, responsibility has been delegated to relevant ministries, or actions to assist survivors are part of broader national disability action plans. In many cases States have reported a lack of financial, human, and technical resources to adequately respond to needs, and implement and monitor the implementation of plans of action. In this regard, challenges remain in ensuring that services and opportunities are available and accessible to victims and survivors in rural and remote areas.
- 45. In many affected countries, mine action authorities continue to play an important role in assisting victims with their efforts guided by International Mine Action Standard (IMAS) 13.10 on Victim Assistance in Mine Action. Through data collection, advocacy, resource mobilisation and referrals, mine action can work to ensure the integration of efforts into broader frameworks to promote and ensure sustainability.

- 46. To date, 38 States Parties have reported mine victims in areas under their jurisdiction or control. Of these States, nine (9)⁴ have fulfilled their Article 5 obligations to clear mined areas. Past experience indicates that the completion of Article 5 Implementation by States Parties is often followed by the closure of national mine action programmes. In many cases, this has been followed by disengagement with the work of the Convention, including on matters related to victim assistance. In this regard, ensuring integration of victim assistance into broader frameworks well ahead of Article 5 completion is key.
- 47. Two frameworks are particularly relevant to the sustainability of victim assistance efforts: the CRPD and the 2030 Agenda for Sustainable Development. The CRPD provides all States with the highest accepted legal and normative standards as concerns disability rights. Of the 38 States Parties with responsibility for mine survivors, 35 are party to the CRPD. The CRPD covers all aspects of life and provides a sustainable approach to guaranteeing the rights and addressing the needs of survivors with disability. In some affected States, collaboration between efforts to implement the CRPD and efforts to address the rights and needs of mine and other EO survivors continues to need strengthening.
- 48. The 2030 Agenda for Sustainable Development, with the 17 Sustainable Development Goals (SDGs) at its heart, also provides a blueprint to guide our work with its aim to leave no one behind. Actions to achieve the SDGs have the potential to address the needs of a victim namely by assisting those directly impacted by mines, the families of those killed and injured, and affected communities. The SDGs can only be realised through inclusive action.
- 49. To ensure that States Parties can continue to report on progress in assisting victims after the integration of efforts into broader frameworks, access to services and opportunities by victims and survivors should be visible in monitoring mechanisms and in reporting. It will also be necessary to enhance efforts to raise awareness among policy makers at the national level of the State's obligations to assist victims under international humanitarian law.
- 50. A significant challenge in many affected States, and in those that have completed implementation of Article 5, is the shortages of human, technical, material and financial resources to provide accessible, affordable, appropriate, and quality services to meet the needs of victims, with an over-reliance on international donor support. In many States, national budget allocations are inadequate to provide essential services, particularly in rural and remote areas.
- 51. Clarity on the extent of resources available to assist the victims is difficult to measure, particularly when integrating actions into broader frameworks. A range of services and opportunities, including disability programmes that are accessible to survivors, continue to be provided by government agencies, international and non-government organisations, survivor associations, and other organisations of persons with disabilities through development cooperation and other bilateral funding mechanisms.

It is however important to note that often national disability programmes remain underfunded, which need to be considered when integrating victim assistance into disability programmes and policies. The ultimate aim of support should be to build national capacities to provide quality services and opportunities into the future.

⁴As of October 2023.







- 52 Conflicts and competing priorities, such as disasters and pandemics, in both affected States and those in a position to assist, have impacted on the availability of funding to assist mine and EO victims, or persons with disabilities more broadly. Access to funding is especially challenging for survivor associations and local non-governmental organisations working in rural and remote areas.
- 53. Strengthening the role and inclusion of organisations of persons with disabilities is a fundamental matter given the role these organisations play, including in ensuring support is prioritized for the most vulnerable. In this regard, there is great importance of strengthening their ability to access international funding directly.
- 54. More focus may be needed to better understand the motivation of potential donors, and what is important to them in relation to assisting victims or persons with disabilities more broadly. The donor community may be more likely to support States that take responsibility, to the greatest extent possible, for guaranteeing the rights and addressing the needs of their victims and survivors. Embassies and delegations in affected States should be encouraged to provide small grants to survivor associations and local non-governmental organisations to support their activities.
- 55. Delegates met in regional groups Africa (Anglophone); Africa (Francophone); Africa (Lusophone); ASEAN region; Asia; Europe; Latin America; and Middle East and North Africa to discuss challenges and opportunities in implementing the Oslo Action Plan. This was done with a view to considering how victim assistance may be pursued by the States Parties following the Siem Reap Review Conference. It was also emphasised that the outcomes of the *Third Global Conference* were more broadly applicable given the consistent approach taken to assisting the victims by all relevant instruments of international humanitarian law.
- 56. The *Third Global Conference* achieved its aim to **reflect, inspire,** (provide a space for) **learning, and empower** in particular by advancing understanding on the place of assistance to mine and other EO survivors in the broader context of disability rights. To be effective and sustainable however, an intersectoral approach to the CRPD and with the *2030 Agenda for Sustainable Development* is essential.

3 CHAIRPERSONS' CONCLUSIONS

"We need to do more and we need to do better"

- 57. States Parties to the Convention and other relevant instruments of international humanitarian law recognise the importance of a human rights-based approach to assisting the victims. Collaboration with actors working in the fields of health, rehabilitation, mental health, education, employment, disability rights, development, and poverty reduction is growing. Many survivors receive services and have access to opportunities to improve the quality of their daily lives. While clear progress has been made over the past 25 years, a large number of victims remained unreached; the goal has not yet been reached.
- 58. To achieve greater inclusion, survivors need to be given a voice and be heard. To promote inclusion, tangible steps are needed to break down physical and attitudinal barriers. National capacities to assist victims in rural and remote areas need to be strengthened. New and creative ways are needed to support survivors.
- 59. A call for greater inclusion of survivors in the work of the Convention and in the life of their communities in accordance with the commitments made by the States Parties in the Oslo Action Plan, was a constant throughout the Conference.
- 60. Survivors called for resources to build capacities and support the work of their associations and other organisations of persons with disabilities, particularly in rural and remote areas.
- 61. All actors should continue to work together and do more by investing in survivors and other persons with disabilities to promote their meaningful inclusion and participation based on respect for human rights, gender equality, and non-discrimination. Only then will the victims live their best life and contribute to their communities.
- 62 Since the Oslo Review Conference there has been an enhanced understanding on key issues, the development of tools and guidance documents, and disability inclusive development. Nevertheless, it is important to recognise that not all affected States, or States that have completed implementation of Article 5, are at the same level of development. Many victims still do not have access to the services and opportunities needed to improve the quality of their daily life. With several competing priorities, the issue of disability rights is often not high on the agenda in some affected States.
- 63. Through the sharing of challenges, experiences and good practice, a variety of practical steps have been identified to improve the outcomes to live dignified and productive lives and for equal opportunities in their communities:
 - a. Ensure that all services and opportunities are people-centred and take into account the breadth of guidance and other tools that have been developed.
 - b. Raise awareness among policymakers at the highest level in affected States and those that have completed implementation of Article 5, of the <u>State's continued obligations to assist victims and survivors under the Convention and international humanitarian law.</u>
 - c. Facilitate stakeholder dialogue at the national level in affected States and those that have completed implementation of Article 5, to ensure that disability rights and development agendas are specifically inclusive of victims.

3 CHAIRPERSONS' CONCLUSIONS

- d. Expand target areas for services and opportunities to areas close to where victims and survivors live this should be done whenever efforts are carried out to integrate victim assistance into broader plans, programmes, and frameworks.
- e. Ensure that the paradigm of intersectionality including gender, age, race is considered throughout the processes, planning, and implementation of victim assistance efforts.
- f. Improve planning and coordination across all relevant stakeholders in affected States and those that have completed implementation of Article 5, including the active participation of survivor associations and organisations of other persons with disabilities.
- g. Facilitate more opportunities at the regional and international level for survivors, practitioners, and potential donors to share experiences, technical support, and resources.
- h. Develop and implement capacity-building and training plans for those charged with delivering services and with implementing relevant national policies, plans, programmes, and legal frameworks, in order to improve access to quality and appropriate services.
- i. Ensure national disability coordination mechanisms take into account the rights and needs of survivors, and that indicators and mechanisms are in place to enable improved reporting on access to services and opportunities by survivors, on an equal basis with others.
- j. Decentralise approaches and give greater focus to activities at the local level; many victims and survivors live in rural or remote areas with limited access to services and opportunities.
- k. Make resources available at the local level to empower and build the capacities of survivors and other persons with disabilities to achieve effective participation and inclusion in decision-making processes. Do not neglect peer-support in this process.
- I. Promote and support collaboration between survivor associations and other organisations of persons with disabilities at the national and local level to strengthen capacities to advocate for their rights and needs.
- m. [For States Parties where mine action authorities are taking a leading role in coordinating victim assistance activities and mine clearance may soon be complete] Develop a checklist to ensure that relevant government authorities are aware of their responsibilities to for reporting and for guaranteeing the rights and addressing the needs of victims, including at the local level.
- n. Reporting on victim assistance by the States Parties should not only include successes but also challenges faced and inputs from survivors.
- 64. The forthcoming Siem Reap Review Conference and the development of a new Action Plan for 2025-2029, provides an opportunity to learn from past efforts and do better in the future. *The Third Global Conference* with its observations and conclusions was an important building block.
- 65. All States Parties should proactively consult with survivors, their representative organisations and be creative to identify opportunities to do things differently through concrete impactful actions.

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- 66. The issues addressed in the nine (9) victim assistance actions of the Oslo Action Plan remain relevant. Nevertheless, in drafting the next Action Plan, States Parties are encouraged to take into account the following considerations in order to do more and do better:
 - a. Focus actions on the individuals directly impacted by a mine or other EO explosion.
 - b. Disaggregate each action on whether it is focused on the individual directly impacted (survivors), the families of those killed or injured, or the affected community rather than simply using the broad term of mine victims.
 - c. Develop indicators to measure impact, services, and opportunities outlined in plans and frameworks to see if these are accessible to victims and survivors, particularly at the local level. Indicators should not simply record the number of States Parties reporting or indicating that something has been or is being done.
 - d. Actions should also be relevant to States Parties that have declared completion of their Article 5, to ensure that survivors continue to have access to services and opportunities they need to promote their well-being, on an equal basis with others.
 - e. Actions should take into consideration challenges and difficulties faced by the States Parties in implementing the Oslo Action Plan.
 - f. Rehabilitation services and psychological and psychosocial support should be separated into two actions to reflect the importance of access to appropriate and quality services to the well-being and quality of life of survivors.
 - g. Any action on psychological and psychosocial support should seek to empower local communities to improve access to peer support and to other local opportunities.
 - h. Avoid complex languages with multilayered commitments under one action, rather take a one-commitmentper-action approach when developing the new Action Plan, as this will have a positive impact on measuring implementation and reporting.
 - i. To enhance the potential for ongoing progress in keeping the promise to victims and survivors, States Parties should be provided with practical guidance on what steps could be taken to achieve each action relating to victim assistance. Guidance could include advice on links to relevant State plans of action for disability, health, education, employment, social protection, development, or other relevant frameworks to assist with monitoring and reporting.



This report was prepared by the Implementation Support Unit of the Anti-Personnel Mine Ban Convention with support of Victim Assistance and Disability Rights Advisor, Sheree Bailey.

The Implementation Support Unit (ISU) is the secretariat to the 1997 Convention on the Prohibition of the Use, Stockpiling, Production and Transfer of Anti-Personnel Mines and on Their Destruction.

The ISU is mandated to support the States Parties to the Convention, including by:

- Providing advice and technical support on implementation and universalization;
- Providing support to the Convention's office holders;
- Communicating on behalf of the President and States Parties and providing information about the Convention;
- Keeping records of formal and informal meetings under the Convention; and
- Liaising and coordinating with relevant international and non-governmental organisations that participate in the work of the Convention.

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