

PRELIMINARY OBSERVATIONS

STATUS OF IMPLEMENTATION – YEMEN

COMMITTEE ON VICTIM ASSISTANCE

(Italy, Chile, Sweden and Thailand)

Intersessional Meetings

30 June – 2 July 2020

Observations of the Committee on the information submitted by Yemen.

1. The Committee welcomes the submission by Yemen of updated information on its victim assistance activities. Based on the information provided, the Committee presents the following preliminary observations.

Mine casualties in 2019

2. The Committee observed that Yemen reported 1,050 casualties, including 902 males and 148 females, recorded by Yemen Mine Action Centre (YEMAC) in an ad hoc manner with support of local authorities and medical institutions. In 2019 Yemen reported a total of 2,359 new casualties including 2,169 males and 188 females registered during the years of 2016, 2017 and 2018 in Aden, Abyan, Taiz, Shabwah, Lahij, Hadramout, Al Jawf, Al Bayda, Al Hudaydah and Marib provinces. Yemen reported that it assumes that additional casualties have gone unreported due to the ongoing conflicts.

Establish or strengthen of a centralised database (Action #35)

3. The Committee observed that Yemen reported the lack of a nationwide surveillance system to collect and record data on victims. The Committee encourages YEMAC to consider gender, age and disability disaggregated information when collecting data on mine casualties.

Integrating victim assistance into broader national policies, plans and legal frameworks and designation of a government entity to oversee the integration (Action #33)

4. The Committee observed that Yemen reported that the Fund for the Care and Rehabilitation of Persons with Disabilities under the Ministry of Social Affairs is the responsible authority in meeting the needs of persons with disabilities including mine survivors. However, Yemen reported that due to the ongoing conflicts, the Ministry has not been active.

Developing and implementing measurable, realistic and time-bound national action plan (Action #33)

5. The Committee observed that Yemen reported that YEMAC's objectives on victim assistance are to collect data on mine victims, ensure victims' access to emergency healthcare and to refer survivors to rehabilitation services. Yemen reported that in 2019 YEMAC was only in a position to make progress in collecting data on new casualties. The Committee would encourage consideration of gender and diversity in the action plan, and prioritisation of mobilising resources its effective and full implementation.

Removing barriers including physical, social, cultural, political, attitudinal and communication barriers to access such services (Action #33)

6. The Committee would welcome information efforts made to remove barriers hindering social and economic inclusion of mine survivors.

Applying multi-sectoral efforts to ensure the needs of mine survivors are effectively addressed in line with the Convention on the Rights of Persons with Disabilities (Action #34)

7. The Committee observed that Yemen reported that it is not possible to carry out national efforts at this point of time and that inter-ministerial coordination would be perceived as a “problematic” effort.

Access to first aid and ongoing emergency medical care (Action #36)

8. The Committee observed that Yemen reported limited efforts made by some international organisations such as the Red Cross and Doctors Without Borders (MSF), but it did not provide information on the status of the availability of first aid services or emergency medical care to ensure new casualties receive the critical assistance they need. The Committee would welcome information in this regard and encourages Yemen to include the availability of first aid in its emergency package/programme.

Developing national referral mechanism (Action #37)

9. The Committee would welcome information on the existence of or plan to develop a national referral mechanism and a directory of services.

Access to rehabilitation services including physiotherapy, assistive devices and occupational therapy (Action #38)

10. The Committee observed that Yemen reported that the Ministry of Health and the Ministry of Social Affairs in conjunction with Yemen Prosthetics Centre and some international NGOs had previously provided rehabilitation supports to mine victims and that Community Based Rehabilitation trainings were provided to field workers to increase service delivery capacities. The report did not specify the status of availability and accessibility of physical rehabilitation support in 2019, and the Committee would welcome information in this regard.

Access to psychological and psychosocial services including peer-to-peer support (Action #38)

11. The Committee would welcome information on availability of psychological support, and peer to peer support services or plans to consider providing these services through the emergency efforts that have been carried out in Yemen.

Access to social and economic inclusion services, including in rural and remote areas (Action #39)

12. The Committee would welcome information on availability of supports meeting the social and economic needs of mine victims and plans to increase social and economic supports.

Taking measure for safety and protection of mine survivors in situations of risks and emergencies (Action #40)

13. The Committee would welcome information including plans Yemen may have to address the issue of safety and protection of mine survivors during the conflicts and other emergency situations, such as COVID-19 pandemic.

Strengthening inclusion and participation of mine victims and their representative organisations in all matters that affect them (Action #41)

14. The Committee would welcome information on inclusion and participation of mine victims and their representative organisations in relevant activities, such as mine action planning and programmes.

Challenges in implementation of Yemen's Victim Assistance Commitments

15. The Committee observed that Yemen reported several challenges facing its victim assistance activities, including the followings:
- a) conflicts;
 - b) lack of sufficient resources for victim assistance;
 - c) difficulty to reach out to and support new increasing casualties in areas under conflicts;
 - d) high rate of fatality among new casualties;
 - e) poverty;
 - f) impact of conflicts on healthcare facilities, such as hospitals; and
 - g) restrictions of movement.
16. The Committee would welcome any proposal Yemen may have on how the Committee on Victim Assistance and the international community can be of assistance to help Yemen in fulfilling its victim assistance commitments.