

### **A Real Difference in the Lives of Survivors**

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In his opening speech Prak Sokhon said victim assistance and making a real difference in the lives of the survivors was the *"the heart of the matter."* Indeed the presence of survivors, their vigorous advocacy for the ban, for clearance and ways to improve the lives of people in mine affected communities and those disabled by weapons of war has challenged and humbled many of us and touched our hearts.

THE QUESTION BEFORE US TODAY IS HOW HAS THE CONVENTION LIVED UP TO ITS PROMISE TO SURVIVORS AND HOW CAN WE IMPROVE THE EFFORTS OF STATES, NGOS AND INTERNATIONAL ORGANISATIONS SO THEY TRANSLATE INTO A REAL DIFFERENCE ON THE GROUND.

Our convention and its evolution through Nairobi and Cartagena promises survivors that their particular situation will be addressed by a focal point , a coordinating mechanism and a national plan which will be integrated into broader policies laws and plans related to development and disability. This of course could remain at the level of theory and never impact the lives of survivors. It could, but we need to ensure it does not!

A plan is meant to ensure that survivors have affordable and accessible services available in medical care, physical rehabilitation, psycho social support and economic inclusion; that appropriate data will continue to be collected about their existence and situation and appropriate laws and policies will be passed.

Over the years since 1997 new conventions which include the rights and needs of survivors wounded by landmines , notably the CRPD and CCM have been made at the global level and reinforce and extend what our Convention initiated.

In our States Parties at the national level many countries have focal points and coordinating mechanisms and national plans. They have buildings and centres where rehabilitation and other services are located. Some of the plans are good on paper and some of the rehabilitation centres and other services are very good in practice. But every time we gather at intersessionals we hear horror stories of survivors whose needs are not met back in the local area. We also hear them when we are at home. Two weeks back we discovered in a not so remote village a man in agony from an old mine related wound incurred 14 years ago. Through a network he was taken to hospital but in spite of all the surgeon's efforts the leg had to be removed. He simply had no money to reach treatment.

There is an old adage "Think globally, act locally". More specifically we can say Plan nationally but make sure the plan includes clear ways to implement for the villages and towns where people live. Each mine affected country has different challenges with regard to poverty, environmental degradation and some still have ongoing conflict so the implementation strategy for each country will be different. However no country is so complex and no country has so many survivors that states cannot meet their obligations to assist the victims. Just complaining about lack of resources or raising problems about all the people with disabilities or all the competing needs in a country accomplishes nothing. With good will, concerted effort, and some cash we can do it.

The link between the government plan stated in the capital and its translation into action at the village level is crucial. For example in Cambodia, which is the country I know best, the action plan was completed in 2009, but any real difference on the ground is slow in coming.

How can we make this happen? Would a village-focused approach yield better results? After a discussion with some survivors who are experienced village wheelchair workers and some people who had 25 years of involvement with survivors in refugee camps and in Cambodia, through war and shelling and displacement, internal and external and in the campaign to ban landmines we decided to try a new project approach. Over the years we have seen some wonderful examples of survivors whose lives have improved, and who contribute to upholding the rights and addressing the needs of others, and we celebrate them. A remaining concern; however is for the other survivors who often still live in dreadful circumstances.

The components of the project are:

### **SURVIVOR LED**

We have built up a team of survivors and staff from the mine action authority, with the cooperation of the provincial representatives of the Social Action ministry plus representatives from some agencies working in the areas, particularly those in the disability sector.

### **STEPS**

1. RESOURCING THE VILLAGE LEADER AND COMMUNITY. Life is lived in the village or town section and action happens there.

HOW: a visit to targeted villages, to describe a simple socio economic profile of the village, to assess how much the village leader knows about the mine and disability issue, and to ask who the people with disability including survivors are in the targeted villages. After this friendly encounter between survivor and village chief, which always attracts other interested villagers, the village leader:

- Has discussed the situation of people with disability in his village
- Has received copies in Khmer of a brochure on mine ban treaty with hints on survivor assistance, (made by survivors and friends), the national disability law, the CRPD and community based rehab guidelines.
- Has made friends with survivors who are very clearly expert in their area. The government Ministry MOSVY is very happy that the survivors and their friends help disseminate this material which it has diligently commissioned.
- Has a copy of all relevant services available in his province, prepared by Cambodian campaign.

In the work to date we have discovered that in at least one province the deputy commune leader is slated to be responsible for disability issues in about 12 villages. This was great news and we now plan to involve him deeply in our work in his set of villages. This then becomes a multiplier effect which could then be repeatable in other provinces and even in other countries.

2. LISTENING TO THE PERSON WITH DISABILITY INCLUDING SURVIVORS. We meet each person with disability in the village and in a very simple questionnaire ask each about their lives. After our visits, our goal is that we know the situation of each survivor in the village so that weekly we can prioritize and plan for any necessary action that cannot be taken by survivors or the village itself.

Two things are evident:

We do not have to do everything. In response to a question “Is your life easier and happier than it was 5 years ago?” one survivor in a remote village said “Life is much better” Why? “Because my kids have grown up and now they help me and I do not have to spend so much money supporting them!” We sometimes forget that survivors go through the same life cycle situations as many people gathered here.

The need to have a rapid response component built to address urgent emergency situations encountered like the one I told you about earlier. I think it is unethical to survey people and leave a person behind with a rotting leg which requires medical emergency treatment. States Parties can also think of rapid response mechanisms on the ground even before structures and mechanisms have been perfected within capitals. We are happy to find that the networks and mechanisms we have been developing work and not too many emergency responses have been needed. It is possible.

### 3. SURVIVORS (AND OTHER PEOPLE WITH DISABILITY) ASSESS THEIR OWN QUALITY OF LIFE.

During our visits, we want to make sure that each survivor has thought about the quality of his or her life and how they might want to improve the quality themselves. The instrument was developed by our Cambodian survivors and team with some expert assistance and is based on the WHO questionnaire. In the process we hear some beautiful dreams and ways people think about improving the quality of their own lives. As many survivors cannot read or write one hazard is the number of villagers who gather around to give advice about the answer.

### 4. FEEDBACK TO VILLAGE LEADER

We note suggestions that improve the village situation for the respondents if the survivor feels unable to do so without some back up. To date they have been about transport to services, access to home difficult in wet weather. These could both be addressed by a small rapid response fund at commune or village level, or some community action.

We also intend to have follow up meetings with groups of village leaders and survivors to see what improvements have occurred in villages since the visit. We will let you know at the 12MSP what impact it has made to date on making a difference on the ground!

### 5. DATA BASE IN COLLABORATION WITH CMAA

#### WHAT CAN BE EXPECTED FROM THE CONVENTION?

The spirit of the convention which matches the heart of the matter promised survivors, especially those who campaigned so hard for the Mine Ban Treaty, that the lives of their peers would be better. The law and its evolution require some national systems and structures with the hope they will have impact in the places where survivors live. States Parties in a position to do so (ALL) are called to offer support. I ask States parties to support the programmes that make an impact at village level as well as support the creation of national plans.

A famous Cambodian monk used to say Step by Step. We can say Village by village, Country by Country.

Together we can do it!