

**PRESENTATION TO THE STANDING COMMITTEE ON VICTIM ASSISTANCE,
SOCIO-ECONOMIC REINTEGRATION, AND MINE AWARENESS
5TH DECEMBER 2000 - GENEVA**

INTRODUCTION

I am Margaret Arach, a Ugandan. I am a single parent to five children. In my endeavor to provide for my children, I landed a job late 1998 that took me away from Kampala to Kitgum in Northern Uganda. A District that has been without peace for the past 14 years.

I worked with an NGO called AVSI*. They among other projects provide psychosocial support to children affected by war and their community. New on the job, I only signed a short contract (Oct.-Dec) to see if I would want to continue further working there. On 22nd December 1998 I set off for Kampala to be with my children. It turned out to be a difficult Christmas for the family. 20 Kms on the way to Gulu, Lord's Resistance Army rebels attacked our bus. We were ambushed by a mine and then shot at. I narrowly escaped death and rape at the hands of the rebels. The explosion severed my right foot.

The army rescued three others and me and took us to the nearest health unit. We were laid on the bare floor. From the conversation going on between the staff, I knew they did not have what they needed to provide necessary first aid to our condition. But they improvised. No vehicle was available to take us to the main hospital about 60 kms away. A trader happened to be collecting food nearby and agreed to take us to the hospital. We were loaded on top of the sacks but the vehicle broke down shortly. Stranded, I knew that if I did not get to the hospital, I would die. I did not want to die, and kept on thinking about my children. I prayed. Another truck came by carrying cattle; the driver took us to hospital in the cattle truck. Thus I finally reached Lacor Hospital at 7.00 p.m. Nine hours after the explosion!

Everything went well from the time I entered the hospital. I got the necessary medical care (surgery, blood transfusion, physiotherapy etc). I was discharged two months later on crutches, to rejoin my family and the world. That's where the problems began.

Out of the hospital, I came face to face with realization that I was not able to do anything for my self and thus became a dependant. I arrived 'home' only to find my family scattered and living in 3 different homes. I lived with my sister and brother-in-law where two of my younger children were, for the next 9 months. I depended entirely on my sister and brother-in-law during my stay in their home. Besides her household chores, my sister gave me the necessary nursing care helping where I could not help myself like in the bathroom.

- We had no home.
- I could not provide school fees for my children.
- With only one leg and crutches catching public transport became difficult.
- Using the bathroom and certain toilet facilities became difficult.
- Most of my friends never visited me so I took to avoiding them.

My social life was broken I had the task of rebuilding it.

Challenges Faced:

- How to bring my family together
- How to support myself and family
- How to regain my social life and reintegrate my self in the community
- How to make others understand that I want them to accept me as I am – be part of the DPO in the country

I still face some of these challenges today and may live with them for the rest of my life.

I knew my situation was bad, but I did not sit back to pity myself. No. I picked up the phone and called my office asking about my position (my 3 month contract had expired when I was in hospital). The representative responded positively. They would give me a job but not immediately. First I had to be fitted with prosthesis and it would take some time. My limb had to heal properly. Meanwhile I worked part-time. The office provided transport each time I had to work. My brother and sister contributed to the children's fees until I was able to work full time. I started full time work in October last year and was able to rent a house where we now live. Now some of the 'friends' have started coming back!

LESSONS LEARNT

a) Personal experience: The sheer will to live. Pick up what has remained and continue with life!

COUNSELING

While speaking about a successful socio-economic reintegration of a landmine survivor, which I can say is the same for people with disabilities, certain issues stand out. To help the survivor come to terms and accept the disability is of paramount importance. The problem is not so much physical as it is psychological. Other problems as a result of the trauma experienced are bound to set in later but if the survivor gets adequate counseling, I believe they can cope well. I have accepted the loss of a part of my body and I have since learnt that it meant losing part of my social life. It is indeed hard to come to terms with but it's possible. Sharing experience with other survivors is very helpful. Having an amputee counsel a fellow amputee is important. It is easy to listen to someone who has a similar problem.

Lesson learnt: Life has more good to offer than bad. It is more important than any material thing.

MOBILITY

If a person can get around from point A – B then half of your problem is solved. Being mobile in whatever form is important to a survivor. I have met a number of amputees who do not use their prosthetic limbs and are more comfortable with crutches! The survivor is the best person to tell what mode of 'transport' is best and this comes with time.

Lesson learnt: Before any intervention, know the person, understand their way of living and learn from them. Assess the needs together in a participatory way.

INDEPENDENCE:

It is not possible for a survivor to regain fully what is lost but how to manage for the rest of a survivor's life. The idea of regaining independence can only come from the survivor. A meaningful economic empowerment will provide opportunity for training, employment, housing etc. Rehabilitation helps the survivor but for a time, it is never complete. Support geared towards achieving independence is best.

Lesson learnt: Disability comes with loss of some functions which when left unattended to may interfere with a persons socio-economic life making them dependant on others. Build capacity of landmine survivors.

HUMAN RIGHTS:

A landmine survivor has to regain his/her human rights and be recognized as a useful person to the society/community. Certain barriers in the environment, economic and social must be broken for the survivors to regain their rights.

The community approach method in handling survivors gives the service providers adequate opportunity to make proper assessment of needs and plan strategies for intervention together with the community right at grass root level while taking into consideration the context of the area.

Lesson learnt: Create awareness of existing support mechanisms and structures for use by survivors..

Conclusion:

Landmine survivors are people with needs just like anyone else. Though disabled in many ways, they still have a chance of leading a respectful and productive life. While addressing the needs of a landmine survivor, it is imperative that a holistic approach be used to take in the family, community and country at large.