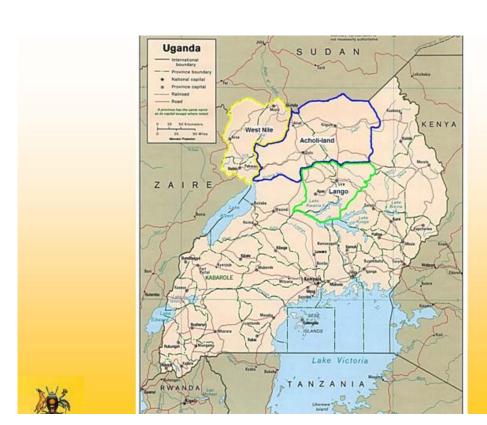




# Landmine Awareness and Victim Support Program in

**Uganda** (with special emphasis on Northern Uganda)



# Insecurity in Northern Uganda



Pabo IDP camp. More then 4000 huts burned (Feb. 2004)

- Increasing congestion in the IDP camps
  - In Acholi-land 70% of the total population (1,200,000 people) are displaced, living in IDP camps
  - ❖ 50% increase in less than 2 years
- Unsafe road network
  - Ambushes
  - Mine incidents
- Continuous abductions
  - More than 20,000 children abducted
  - ❖ Over 8,400 abducted in 2003 alone

Consequently, social, relief, development, and health services have been severely disrupted



# **Brief Background**

For nearly 18 years, armed conflict has been a constant in Uganda's northern Acholi-land. The insecurity that colors the lives of thousands of people in the region is the source of casualties (injuries and deaths) and hazardous living conditions.

Southern Sudan and Acholi-land are the theatres of conflict between the Lord's Resistance Army (LRA) rebel force and the Ugandan People's Defence Force (UPDF).

The number of people, both civilian and military, injured and amputated has increased during this prolonged phase of severe fighting. Small arms, including landmines, have been used throughout the conflict.



The use of anti-personnel landmines (AP) and anti-tank mines (AT) in northern Uganda has escalated since 1992, peaking in 1997 and 2002, when the LRA intensified its activities.

Because mines are used on an *ad-hoc* basis by the LRA, we do not know the number or exact location of mines laid in northern Uganda. We can, however, identify the most heavily affected areas. Gulu, Kitgum, and Pader districts report the greatest number of injuries due to landmines.

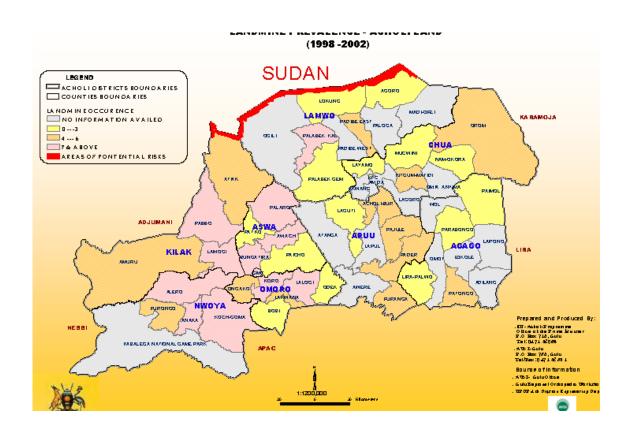
The main target of LRA attacks is the civilian population. As a result, landmines were reported close to villages, near boreholes, granaries, gardens, water sources and footpaths.

#### Landmines in northern Uganda are used primarily for two purposes:

- 1. Kill and maim civilians
- 2. Promote social instability and fear







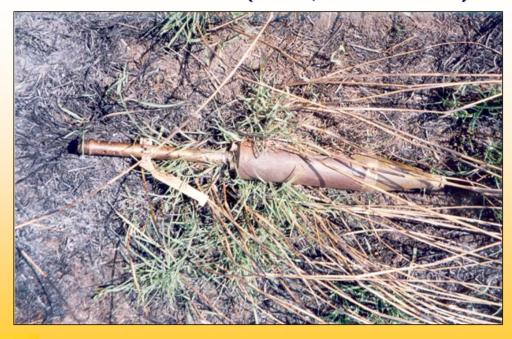
# AT mines and UXOs recovered by UPDF (Gulu Sept. 2003)







raini talini mortali jouluj maron 2000)





# Landmine and UXO Awareness (Mine Risk Education)

- Developed by the Ministry of Health, AVSI, Ministry of Defence in 2000.
- Implemented in collaboration with Local Government, AVSI, Defence





# **Description of Interventions**

#### **Training of Trainers**

- Targets community leaders—political, social, religious, traditional who are well-placed to pass along awareness information.
- Enhances program sustainability by empowering communities to carry out sensitisations.

## **Community Sensitisation Training**

- > Targets the IDP and rural population at large.
- Seeks to reduce injuries and death related to landmines and UXO through direct communication with the population most at risk.





## 3. Radio Programs

- Weekly Awareness Program
  - Includes drama, expert interviews, question and answer, survivor testimony
- Jingles
  - Brief messages played daily in the local language
- Sonas
  - Produced and performed by local artists

#### 4. Production of TOT Module

- > Produced according to international standards and guidelines for mine awareness education.
- Distributed to trainers trained to guide them in facilitating community sensitisations



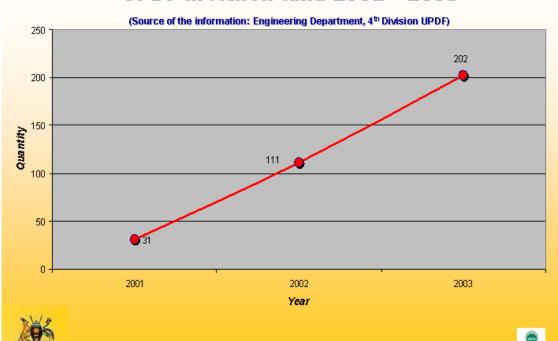


#### 4. Production and Distribution of Sensitisation Materials

- > Posters
- Booklets (2 types)
  - 1. Children's book delivering safety information through a simple story
  - 2. Adult's book with more detailed information
- > Handouts
  - Used during trainings and after as a resource for participants
- > T-Shirts
- Stickers



# UPDF in Acholi-land 2001 – 2003



# Outputs: 2002-2003

## Trainings:

† Over 60 workshops completed

 More than 2000 people sensitised

## Materials Distributed:

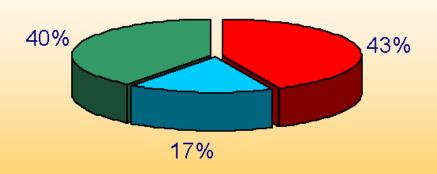
Quality over 17,000 booklets

Quality over 30,000 posters

Target Group	N.
Teachers	1140
Political Leaders (LCs and IDP Camp Leaders)	507
NGO Staff	176
Youth Groups and Students	112
Religious Leaders	77
Other	43
Total	2055

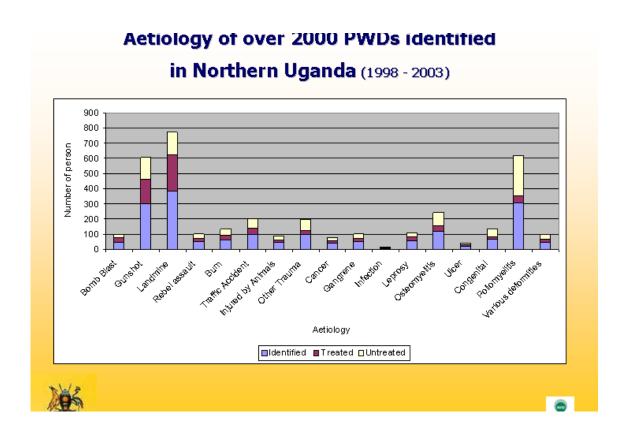


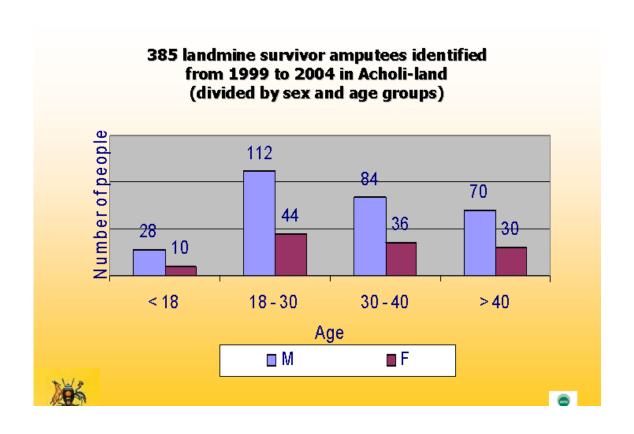
# Aetiology of over 2,000 PWDs recorded by cause of disability in Northern Uganda (1998 – 2003)



■ War related trauma ■ Other trauma ■ Medical condition







# Gulu Regional Orthopaedic Workshop Survivors Support

(MOH Uganda - AVSI)







- Identification of the patients
- Admission
- Prosthesis and orthopaedic appliances
- Physiotherapy and functional training
- Psychosocial counselling
- > Follow-up

# Prosthesis Production (1999-2003) 1999 2000 2001 2002 2003



# Mine Action Program in Uganda

- The Ministry of Health is currently guiding and leading the coordination of MAP activities in the Country
- Coordination mechanism proposed at district level through focal persons and focal implementing partners (international and local NGOs, and other agencies)
- Data and reports should periodically be submitted to the offices in charge at district and national level
- Different sectors should bring in their expertise
- National workshop on LM & UXOs was organized to harmonize the intervention in Uganda. (May 2004)
- Need for a strategic plan to guide interventions and all parties concerned



# Challenges

- Continuous fighting throughout the northern districts of Uganda with the use of landmines and bombs
- Rising numbers of war-related victims
- Increased insecurity (risks related to movement)
- Capacity of the authorities (at local and central levels) to sustain the program
- Funding and skills for coordination, mine clearence, MRE, data management and victim assistance
- Reaching disabled combatats with rehabilitation services



## What's next?

- To strengthen and extend the existing awareness network (MRE) using international standards for planning, implementing, and monitoring MRE, and MAP in general in the country
- Continue mine clearance
- Continue in strengthening the collaboration at local and national levels (governments, NGOs and other agencies) through strengthening the coordination office.
- Pursue the formulation of an act
- Capacity building of government to sustain the existing programs by establishing MAC within the MOH and at regional level
- Support and decentralisation of quality rehabilitative services
- Increased support for war trauma survivors in terms of socioeconomic, psychosocial and rehabilitative services



#### Presentation prepared by:

Dr. Alice Nganwa

Principal Medical Officer – Rehabilitation and Disability Prevention Desk, Ministry of Health, Uganda

#### in collaboration with:

AVSI (International Service Volunteers Association) Uganda

#### Activities sponsored by:

Government of Uganda, European Commission Humanitarian Office (ECHO), UNICEF, Italian Cooperation.

Photo AVSI archive



Let's work together for a mine free Uganda!

Remember when mine factories close and stockpiles destroyed and infected land cleared, the victims will still be with us.