PROGRESS ON VICTIM ASSITANCE IN UGANDA BY 2009

Convention On The Prohibition Of The Use, Stockpiling, Production And Transfer Of Anti-Personnel Mines And On Their Destruction

Co-chairs of the standing committee on Victims assistance and socio-economic reintegration

The main strategy in Uganda is to mainstream landmine (LM) and OXO survivors in development programmes and not to isolate them in a separate programme. Improvement of services to LM & UXO survivors will result in improvement of all war victims and the country at large. LM & UXO issues are coordinated in the Office of the Prime Minister. The focal point for Victim assistance is in Ministry of health for pre and hospital care and rehabilitation. Reintegration and social economic rehabilitation is in the Ministry of Gender, Labour And Social Development where a Minister for Disability and Elderly Affaires has a portfolio.

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PROGRESS ON VICTIM ASSISTANCE IN UGANDA

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Goal 1 Define the scale of the challenge, identify needs, monitor the responses and evaluate the responses

Current situation	Objective	Plans to achieve obj.	Means of implementation
> Exact number of survivors not known. >>900 N.Uganda, > 200 W. Uganda. >No national wide surveillance. Pockets of data collection by NGOs not standardised.	Establish data base of LM & UXOs on health & Social economic status and progress. Develop and strengthen injury surveillance	Establish Data Base. Support collection and analysis of data on LM & UXOs victims. Share and disseminate data regularly.	►UNDP funds ►AVSI, MAT ►GOU

Goal 2: To $\ensuremath{\downarrow}$ deaths and minimize physical impairments in

emergency settings that could result from injury

Current situation	Objective	Plans to achieve obj.	Means of implementation
➤Very few First Aid practitioners. ➤Transport to hospital by Army trucks lorries and pick-ups. ➤ IV fluids not always available. ➤Casuality Depts.weak. 9hrs from injury site to H/U. ➤Safe blood, surgeons,& some equipment available in hospitals. ➤Coordination minimal.	Reduce pre-hospital mortality from LM & UXO by half by 2009. Improve emergency and post emergency hospital care of victims.	Train First Aid providers in affected districts. Provide fluids, equipment, and sundries. Establish casuality units. Annual trauma training to hospital staff. Quality control.	►GOU ►UNDP ►Other partners

Goal 3: To increase accessibility to treatment so as to minimize physical impairment resulting from injury

Current situation	Objective	Plans to achieve obj.	Means of implementation
➤ Rehab. Health eg collective surgery, pre- prosthetic remodeling in Regional Hospitals.	As above	As above	
➤ Assistive devices at district hospitals.			
➤ Survivors not aware of available services.			
➤NGOs providing some services.			

Goal 4: To restore maximum physical functional ability for LM survivors, including provision of assistive devices

Current situation	Objective	Plans to achieve obj.	Means of implementation
➤ The 2 affected regions have Regional Orthopedic workshops that supply prosthetics and orthotics. ➤ Physios and occupational therapists available in one centre, orthopedic technologist in both centres. ➤ Services inaccessible due to transport and up keep hospital. ➤ Follow up of survivors and coordination minimal.	Provide all LM victims with rehab services. Strengthen rehab centre in W. Uganda.	Recruit rehab staffs. Inservice training of staff Procurement of raw materials, equipment and assistive devices. Establish CBR to enhance identification and follow up.	►GOU ►UNPD ►NGOs ►More partners needed.

Goal 5: To assist LM & UXO survivors including children to resume their role in the community by helping them cope through psychosocial support.

Current situation	Objective	Plans to achieve obj.	Means of implementation
➤ Weakest area yet crucial for re-integration. ➤ Provision is patchy & project oriented. ➤ Some social workers available and assist children and adults but no deliberate target to LM survivors.	•Provide psycho-social support to survivors and their families at the centres and the community.	Establish CBR Mobilise and train survivors. Train counsellors at the hospital. Advocate for more resources for survivors report.	►NGOs ►More Partners needed.

Goal 6: To assist LM & UXO survivors return to either their previous occupation or prepare for and find suitable employment. To assist child survivors return to school.

Current situation	Objective	Plans to achieve obj.	Means of implementation
➤ Vocational centres available for tailoring, shoe making, carpentry, leather works in the North. ➤ No arrangement for job placement but labour law in the offing. ➤ Micro finance schemes for poverty eradication for PWDS. ➤ UPE assisting children with disabilities.	Provide 60 survivors with vocational training. Mainstream survivors in micro finance schemes.	Rehabilitate vocational training schools. Provide scholarships to 60 survivors. Strengthen survivor support groups.	UNDP

Goal 7: Establish, implement and enforce laws on rights of LM survivors.

Current situation	objective	Plan to achieve objective	Means for implementation
>PWDs including LM survivors represented at all	•Advocate for passing for equal opportunities Act.	•Leadership trainings with local councils & LM	
political levels. > Uganda constitution guarantees their rights. > Other laws eg traffic Act, local gov't Act, Child rights,	Strengthen representation of PWDs in local councils including LM survivors.	survivors. •Meeting with parliamentarians.	
inclusive education all favour PWDs.			

GOAL 8: Ensure LM survivors access HIV/AIDS services.

Current situation	Objective	Plan to achieve objective	Means of implementation
➤ PWDs prone to HIV infection than able bodied counter parts. ➤ Les aware of prevention strategies.	•Increase awareness on transmission and available services to LM survivors on HIV/AIDS.	Provide information through braille books and training of deaf trainers on HIV/AIDS. Awareness raising to PWDs at all levels.	►Financial and technical support required.