

# COMPREHENSIVE PLAN LANDMINE VICTIM ASSISTANCE



Ministry of Gender, Labour and Social Development in collaboration with Office of the Prime Minister and Ministry of Health







### FOREWORD

Government of Uganda is committed to improving the lives of landmine survivors and other persons with disabilities.

This comprehensive plan on victim's assistance is intended to address the rights and needs of landmine survivors, other persons with disabilities and older persons.

In this era of human rights based approach, emphasis is put on equalization of opportunities, rehabilitation, poverty reduction and social inclusion of persons with disabilities in their communities.

Government has purposely developed this plan as a key milestone. It will raise awareness on Uganda's obligation as a States Party to AP Mine Band Treaty and as a signatory to the UN Convention on the rights of persons with disabilities. It will further allow establishment of a framework of rapid response to support landmine survivors, other PWDs and older persons who are in emergency and conflict situations to enable them participate and re-integrate into the development process. This plan will enable the Ministry of Gender, Labour and Social Development in collaboration with other stakeholders in victims to assess the extent to which objectives of the plan are being met.

The development of this plan on Victim assistance has been a participatory process under the guidance of representatives from Geneva International Center for Humanitarian Demining (GICHD)

To this respect, I appeal to all stakeholders to operationalise this plan within the areas of their mandate.

Sulaiman Kyebakoze Madada (MP) MINISTER OF STATE FOR ELDERLY AND DISABILITY AFFAIRS

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### ACKNOWLEDGEMENT

The development of this comprehensive plan on landmine victim's assistance – 2008/2012 benefited from a variety of stakeholders that participated in the Comprehensive planning workshop from 7th to 9th August 2007 in Speke Resort and Conference Center, Munyonyo. This comprised representatives from Ministry of Gender, Labour and Social development, Health Justice and Constitutional Affairs, Education and Sports, Local Government, office of the Prime Minister, Landmine survivors, Disabled persons Organizations and Development Partners.

First of all, special tribute is extended to Geneva Center for Humanitarian Demining United Nations Development Programme and the Norwegian Association of Disabled for their financial support towards developing this plan.

My sincere gratitude is extended to the chief facilitators of the workshop whose outcomes formed the foundation for this plan. They include, Ms. Sheree Bailey, Victim Assistance Specialist - Geneva International Centre for Humanitarian Demining, Mr. Markus Reiterer, Deputy Permanent Representative of Austria to the Conference on Disarmament, Ms. Jane Brouillette UNDP Mine Action Technical Adviser Victims Assistance and Ms. Bergdis Joelsdottir- International Development Adviser NAD.

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Others were Dr. Bubikire and Apolo Mukasa from Ministry of Health and Vincent Woboya from Office of the Prime Minister.

The concerted effort exhibited at different stages of developing this plan is highly appreciated.

Christine Guwatudde Kintu PERMANENT SECRETARY

### 1.0 INTRODUCTION AND BACKGROUND

### 1.1 THE ANTI - PERSONNEL MINE BAN TREATY AND RESPONSIBILITIES BY STATES PARTIES

The Convention on the Prohibition of the Use, Stockpiling, Production and Transfer of Anti-Personnel Mines and on Their Destruction, or as it is more commonly known, the Ottawa Convention or the Anti-Personnel (AP) Mine Ban Treaty, is unique. Not only is it one of the fastest global multilateral arms control treaties to enter into force, it is also the first in history to make provision for the victims of a particular weapon system.

The suffering of mine victims initiated a movement to ban antipersonnel landmines. This was a combined effort of individuals, humanitarian organisations, and pro-ban governments, the Convention entered into force on 1 March 1999: 155 States have now joined the Convention, including Uganda. Uganda was one of the first countries in the region to become party to the AP Mine Ban Treaty. The timeline of action for Uganda was:

- Signed the AP Mine Ban Treaty on 3rd December 1997
- Ratified the AP Mine Ban Treaty on 25th February 1999.
- AP Mine Ban Treaty entered into force on 1st August 1999.

The main obligations of the AP Mine Ban Treaty can be summarised as: stop all use, production and transfer of antipersonnel landmines; clear all mined areas within 10 years of entry into force of the treaty; destroy all antipersonnel mines in stockpiles within four years of entry into force; provide mine awareness programs; and assist the victims of landmines.

Article 6.3 of the AP Mine Ban Treaty states that "each State Party in a position to do so shall provide assistance for the care and rehabilitation, and social and economic reintegration, of mine victims...." This obligation is relevant for Uganda which has the responsibility to care for all its citizens, including mine victims.

As previously noted, the AP Mine Ban Treaty was the first disarmament treaty that aimed to assist the victims, but it was not clear what needed to be done and who was ultimately responsible.

The First Review Conference of the AP Mine Ban Treaty, the Nairobi Summit on a Mine-Free World, from 29 November to 3 December 2004 reminded the international community that "the very purpose of the Convention is to put an end to the suffering and casualties caused by antipersonnel mines." It provided an opportunity to formally clarify some of these questions, and to identify the key challenges to be addressed to fulfil the promise to mine survivors that the AP Mine Ban Treaty implied.

A set of memoranda were formally agreed to by the States Parties, which included clarity regarding what was meant by a landmine victim. A landmine victim is understood to be "those who either individually or collectively have suffered physical or psychological injury, economic loss or substantial impairment of their fundamental rights through acts or omissions related to mine utilization." A broad approach to what is considered a landmine victim was accepted that includes the individual, their family, and their community, but with a clear understanding that the majority of attention must be focused on providing assistance to those individuals directly impacted by landmines.

States Parties clarified the major areas of work within victim assistance agreeing that victim assistance included work in the following areas: Understanding the extent of the challenges faced (for example

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through appropriate data collection);

Emergency and continuing medical care; Physical rehabilitation, including physiotherapy, prosthetics and assistive devices; Psychological support and social reintegration; Economic reintegration; and, The establishment, enforcement and implementation of relevant laws and public policies.

At the First Review Conference, States Parties also adopted a clear understanding of the principles to guide their efforts in victim assistance. Four principles are particularly important:

"....the call to assist landmine victims should not lead to victim assistance efforts being undertaken in such a manner as to exclude any person injured or disabled in another manner."

Victim assistance "does not require the development of new fields or disciplines but rather calls for ensuring that existing health care and social service systems, rehabilitation programmes and legislative and policy frameworks are adequate to meet the needs of all citizens – including landmine victims."

"assistance to landmine victims should be viewed as a part of a country's overall public health and social services systems and human rights frameworks;" and,

"...providing adequate assistance to landmine survivors must be seen in a broader context of development and underdevelopment..."

States Parties acknowledged that all states have a responsibility to assist landmine survivors as it is a basic responsibility of a state to ensure the well-being of its population. However, twenty four States Parties, including Uganda, have indicated that they have significant numbers of mine survivors. These 24 States Parties have "the greatest responsibility to act, but also the greatest needs and expectations for assistance" in providing adequate services for the care, rehabilitation and reintegration of landmine survivors. These 24 countries have become "a more focused challenge" for the states parties in the period up to the Second Review Conference in 2009.

The First Review Conference also adopted the ambitious five-year Nairobi Action Plan for the period 2005 to 2009. With respect to victim assistance, the Nairobi Action Plan aims to "enhance the care, rehabilitation and reintegration efforts" through eleven "actions".

#### The Plan of Action commits affected States Parties to do their utmost to;

- Establish and enhance healthcare services needed to respond to the immediate ongoing i. medical needs of land mine victims;
- Increase national physical rehabilitation capacities; ii.
- Develop capacities to meet the psychological and social support needs of land mine iii. victims;
- Actively support the socio-economic reintegration of land mine victims; iv.
- Ensure that national legal and policy frameworks effectively address the needs V. and human rights of land mine victims;
- vi. Develop or enhance national land mine victim data collection capacities;
- Ensure that in all victim assistance efforts, emphasis is given to age and gender vii. considerations.

#### Other States Parties committed to provide external support to assist affected states in the care, rehabilitation and reintegration of mine victims. All states parties committed to:

- Monitor and promote progress in achieving the victim assistance goals.
- Ensure the effective participation of mine victims in the work of the Convention and;
- Ensure effective contribution in all relevant deliberations by health, rehabilitation and

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social services, professionals and officials in the work of the convention.

The final report of the First Review Conference, also out lined that special measures should be put in place for States Parties to take full ownership of plans to address the needs of mine victims. It further suggested in paragraph 102 that the care, rehabilitation and reintegration requires attention during the entire lifetime of each individual landmine survivor. The final report further states that victim assistance is more than a medical or rehabilitation issue and that victim assistance is also a human rights issue. Paragraph 81 underscores that victim assistance is ultimately the responsibility of each States Party.

The work of the Standing Committee on Victim Assistance and Socio-Economic Reintegration Standing Committee on Victim Assistance (SCVA) has been instrumental to advancing the understanding of the different components of victim assistance and identifying the needs in relation to land mine victim assistance among the States Parties. In 2007, Austria and Sudan are Co-Chairs of the SCVA.

Since 2005, the primary aim of the SCVA is to ensure the successful implementation of the AP Mine Ban Treaty and to facilitate concrete progress by States Parties in achieving the aims of the Nairobi Action Plan and as a consequence address the rights and needs of landmine victims before the Second Review Conference in 2009. To facilitate this process, a comprehensive questionnaire was sent by the Co-Chairs of the SCVA (Nicaragua and Norway) to the 24 relevant States Parties in early 2005. The questionnaire included goals for the component of victim assistance and called for responses to the four key questions;

- What is the situation in 2005 in each of the six main thematic areas of victim assistance?
- What does the State wish the situation to be in each of the six thematic areas by 2009?
- What are the plans to achieve these objectives in each of the six thematic areas by 2009?
- What means are available or required to implement these plans?

In August 2005, Uganda submitted its response to the questionnaire which had been prepared by the Disability Prevention and Rehabilitation Section of the Ministry of Health in collaboration with other relevant ministries. A revised response was later submitted in November 2005 following a visit by a representative of the SCVA to assist Uganda in making its Victim Assistance objectives more specific, measurable, achievable, relevant, and time-bound (SMART). In December 2005, the Zagreb Progress Report adopted at the Sixth Meeting of the States Parties in Croatia, contained a lengthy annex which summarized the responses made by Uganda and most of the other relevant States Parties.

Uganda's objectives to meet the aims of the Nairobi Action Plan, presented in 2005, were generally among the most comprehensive of any of the 24 relevant States Parties. However, the Zagreb Progress Report acknowledged that the questionnaire was "not an end-product but rather an initial step in a long-term planning and implementation process." Since 2005 considerable work has been done in Uganda on the development of legislation and policies to address the rights of persons with disabilities including landmine survivors, but it is acknowledged that more needs to be done.

Uganda reports on its progress in achieving the aims of the Nairobi Action Plan two times per year; once at the intercessional meeting of the SCVA and then at the annual meeting of the States Parties to the AP mine ban treaty. Specific questions are circulated in advance of the meetings with requests to report on the progress in those areas since the last session. This comprehensive plan will be presented at the 8th meetings of the states parties (8MSP) in November 2008.

### **1.2 BACKGROUND TO MINE ACTION IN UGANDA**

The National Mine Action Programme (NMAP) was launched in July 2005 with overall responsibility under the Office of the Prime Minister (OPM) to address cross-cutting issues and develop an integrated

approach for all thirteen (13) districts known to be affected by landmines and explosive remnants of war (ERW). Incidences of AP mines and ERW have been registered in the northern, eastern and western parts of the country. Assessments are required in Oyam, Bundibugyo, and Pader. Completed needs assessments have identified 57 Suspected Hazardous Areas (SHA) in Kasese (Western Uganda), 9 SHA in Soroti, 13 SHA in Lira, 91 SHA in Gulu, 61 SHA in Amuru and 153 SHA in Kitgum

A National Mine Action Steering Committee was established consisting of eight Ministries and the Uganda Mine Action Centre was operationalised. The National Mine Action Steering Committee is responsible for strategic planning and budgeting, mine action coordination and donor relations. The Uganda Mine Action Centre is responsible for managing, tasking, accreditation, monitoring/evaluation, maintaining the national mine action database, quality assurance/quality control and certification of released land. The mandated ministries are picking up their responsibilities within victim assistance which is in line with the aims of the Nairobi Action Plan.

Mine Action in Uganda has been integrated into national and United Nations humanitarian, reconstruction and development plans. One example is the recently approved three year- National Peace, Recovery and Development Plan for Northern Uganda (PRDP). The framework for victim assistance has been discussed over the past 18 months and the way forward clarified within this Comprehensive Plan.

### **1.3 VICTIM ASSISTANCE STRUCTURE IN UGANDA**



#### **Description:**

The OPM coordinates all mine action related activities. In particular to victims assistance and reintegration of landmine survivors, OPM will coordinate the implementation of activities for landmine survivors and victims assistance within the Ministries of Health and Gender, labour and Social development.



resource mobilisation among others.

The Ministry of Gender, Labour and Social development shall be responsible for Social rehabilitation and reintegration of landmine survivors and victims into the society using the Community Based Rehabilitation Strategy.

The Ministry of Health shall be responsible for medical rehabilitation of landmine victims using the surveillance network. A surveillance network will facilitate both ministries with information vital for planning.

All the Ministries shall report to the National Steering Committee which is responsible for Policy direction and

### **1.3.1 INTERNALLY DISPLACED PERSONS**

Vast numbers of internally displaced persons (IDPs), approximately 1.8 million people (OCHA April 2006), have been affected by the ongoing conflict with the Lord's Resistance Army/Movement. Persons have become internally displaced and have lived in camps in war-affected areas in northern Uganda for over a decade.



Possible peace was initiated with the signing on 26 September 2006 of an Agreement on Cessation of Hostilities between the Government of the Republic of Uganda and Lord's Resistance Army/Movement in Juba South Sudan. Further hope and possible peace is on the horizon with the agreement on accountability and reconciliation between the Government of the Republic of Uganda and the Lord's Resistance Army/ Movement signed in Juba, South Sudan on 29 June 2007. These two documents and the dramatic reduction in Lord's Resistance Army/Movement activities have initiated the return of internally displaced persons (IDPs). The conclusion of peace will further increase the return of IDPs and the need for mine action as 8

a pre-requisite for a safe and protected return for 987,974 IDPs (OCHA May 2007). With this movement of IDPs reducing the threat of landmines is one of the top priorities for a safe and protected return.



Photo complements of Giovanni Defidentti

Landmine survivors, persons with disability and the elderly are highly vulnerable within the vast internally displaced population who are living within the IDP camps or in process of early return. Messages of return are not being accessed by many who have low vision or are blind and the deaf community due to sensory impairments. The mandated ministry is expressing concern as it appears in some areas of return that persons with disability including landmine survivors are being segregated or simply left behind. Action is particularly important at this juncture to address protection of both human rights and land rights expecially with the signing of the Convention on the Rights of Persons with Disabilities. Within return and resettlement there is a specific group of highly vulnerable persons who will require a social safety net and affirmative action in an attempt to keep families and traditional structures together.

### 1.5 VICTIM ASSISTANCE IN UGANDA

Since the start of the Mine Action Programme in Spring 2005, there have been significant parallel and overlapping gains in victim assistance. The structure and integration of victim assistance activities has been identified, resources mobilized and planning matured with the completion of this Comprehensive Plan.

Advocacy and lobbying has been ongoing to build awareness and political will to assist landmine survivors and other persons with disabilities. The work has utilized the core values of the SCVA. Capacity has been built to report on progress at AP Mine Ban Treaty-related meetings with an increased level of feedback to and from the SCVA. The structure and implementation of the four guiding principles has been initiated and international non government organisations (NGOs) and Disabled Peoples' Organisations (DPOs) have come on board or are showing interest in becoming partners. The mapping process of who is responsible for the different components of the work and interface required for access has been looked at in depth. The framework and way forward is clear and each ministries role and responsibility is defined and understood by others. This synergy has assisted in moving victim assistance forward. The Ministry of Gender, Labour and Social Development (MoGLSD) is the mandated ministry for persons with disabilities, including landmine survivors, and is willing to take on that responsibility with development partner support. The MoGLSD has presented information on relevant legislation and policies to a meeting organised by the Co-Chairs of the SCVA in September 2006, which is an area of strength. Specialized agencies are being asked to assist Uganda with a focus on rehabilitation needs. Future donor partners with expertise in working with persons with disability are considering implementation. This work of the first phase within victim assistance is complete with the development of the Comprehensive Workplan, which will serve as a strategic plan in victim assistance over the next five years, 2008-2012.

Through the increased actions within the past two years in the area of victim assistance, Uganda has moved well beyond the identified objectives in its response to the victim assistance questionnaire in 2005. Work on victim assistance has diligently looked at integration and interface with other Strategic Plans so that it is not a standalone activity but rather integrated into the existing priorities outlined within Government Plans. The three Strategic Plans are particularly relevant. These are briefly described below and their strategic objectives are reflected and fully integrated into the Comprehensive Plan.

### **1.6 POVERTY ERADICATION ACTION PLAN**

This comprehensive plan on landmine victim assistance is in line with actions recommended by the SCVA that "providing adequate assistance to landmine survivors must be seen in a broader context of development and underdevelopment." Additionally, the plan will contribute towards the implementation of the Poverty Eradication Action Plan (PEAP) which has been developed in Uganda as an overall national planning framework as a means of ensuring that the process of economic growth benefits vulnerable groups, particularly the poor. The PEAP is being implemented through a number of sector plans, programmes and policies. However, despite the existence of interventions, it has become increasingly clear that social development concerns of inequality, inequity and exclusion are still major challenges to the development of the economy.

### 1.7 THE SOCIAL DEVELOPMENT SECTOR STRATEGIC INVESTMENT PLAN

The Social Development Sector Strategic Investment Plan (SDIP) is a tool developed to articulate interventions and strategies that will make a difference to the poor and vulnerable populations. The purpose of the SDIP is to increase levels of social protection for all by reducing vulnerability, inequality and powerlessness especially among the poor and vulnerable. The SDIP was developed to promote issues of social protection, gender equality, equity, human rights, culture and decent work conditions. It focuses



on the empowerment of different groups such as women, children, the unemployed youth, internally displaced persons, the elderly and persons with disabilities. These groups are often marginalized or excluded from the benefits of development and are particularly vulnerable to exploitation and income shocks.

Can this elderly IDP return home with her broken wheelchair?

The Uganda Comprehensive Plan of Action on Victim Assistance: 2008 - 2012

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The Government of Uganda acknowledged that stable economic growth needed to be matched with corresponding human progress and development anchored in respect for the dignity and value of every person through promotion of human rights and social justice. This acknowledgement represents the need to attain an integrated society to protect the vulnerable as well as to assure equal opportunities to disadvantaged sections of the population for social and economic advancement. The Mission Statement of SDIP is; "The creation of an enabling environment for social protection and social transformation of communities".

# The SDIP identifies the MoGLSD as the lead agency with the mandate to empower communities to harness their potential. SDIP goes further to define strategic sectors. The Sector Strategic Objectives are;

- 1. To empower communities to appreciate, access, participate in, manage and demand accountability in public and community based initiatives;
- 2. To protect vulnerable persons from deprivation and livelihood risks;
- 3. To create an enabling environment for increasing employment opportunities and productivity for improved livelihoods and social security for all, especially the poor and vulnerable;
- 4. To ensure that issues of inequality and exclusion in access to services across all sectors and at all levels are addressed; and
- 5. To improve performance of SD institutions to coordinate and implement the SDIP at various levels.

### Within the SDIP the overall sector targets which function as guiding principles for the development of services are:

- Community Mobilisation and Empowerment Programmes
- Special Protection to Support to People in Difficult Circumstances
- Promotion of Employment and Productivity
- Mainstreaming Social Development Concerns
- Administration and Institutional Development

The interface between the SDIP and the areas of victim support are highly complementary. Therefore, the synergy between the two programmes and the potential for developing an integrated approach utilizing existing frameworks for victim assistance became a real possibility. Therefore, this comprehensive plan for victim assistance is in line with the PEAP with a focus on security and vulnerable populations and the SDIP.

### 1.7.1 THE FUNCTIONS OF THE DEPARTMENT AMONG OTHERS ARE TO:

Empower persons with disability and the elderly to effectively participate in development initiatives Protect PWDs and Elderly from deprivation and livelihood risks.

To create an enabling environment for increasing employment opportunities and productivity for improved livelihoods of PWDs and the Elderly.

To ensure that issues of inequality and exclusion in access to services across all sectors and all levels are addressed.

To assist PWDs living in conflict situations resume their roles in the community through psychosocial adjustment programmes and social re integration.

### **1.8 HEALTH SECTOR STRATEGIC PLAN II**

The Government of Uganda has reaffirmed its commitment to achieving the Millennium Development

Goals which shows overlap with the national PEAP. Successive poverty assessment reports have identified ill-health as a leading cause of poverty. Health continues to be an important element of the Human Development Pillar of the PEAP.

The Health Sector Strategic Plan II 2005/2006 – 2009/2010 (HSSP II) represents a consolidation and extension of the achievement of Plan I which signified the beginning of major health reforms that initiated in the late 1990's. Health services delivery has been decentralized to districts and sub-districts to bring services closer to the people and to increase their involvement and participation The HSSP II provides a common strategic framework for the plan period of 1 July 2005 to 30 June 2010. This framework is to guide all interventions by all parties at all levels of the national health system. Therefore, the interface of the Victim Assistance Comprehensive Plan with the HSSP II is critical.

During HSSP I the disability, prevention and rehabilitation section in the Ministry of Health was established. During HSSP II further consolidation in the area of injuries and disabilities will be made, with a focus on integrating this programme with other sectors and activities. Specific targets in the section 3.4.2 on injuries, disabilities and rehabilitative health include;

- To increase provision of assistive devices to persons with disabilities who need them.
- To reach 80% of the population with messages on disability prevention and rehabilitation.

### Core interventions within the section are relevant to landmine victim assistance and the Comprehensive Plan. Four core interventions are particularly relevant:

- 1. Strengthen orthopaedic workshops for production of assistive devices.
- 2. Disseminate guidelines on the handling of trauma, disabilities and rehabilitation.
- 3. Enhance collaboration with the Social Development Sector with respect to the Community Based Rehabilitation initiative.
- 4. Improve documentation and data availability on indicators regarding persons with disability including landmine survivors.

Uganda has developed a multi-sectoral approach which utilizes existing strategies and frameworks. This integrated model involves multiple ministries and disability agencies with support and capacity being built. It is planned that participation of NGOs and other stakeholders will increase and programmes expanded or established in the next phase of activities to assist mine survivors and other persons with disabilities. With the shift in northern Uganda from emergency to early recovery there is an urgent need to build a national comprehensive plan and initiate affirmative action for landmine survivors, other people with disability and elderly.

Following discussions with the Austrian Co-Chair of the SCVA during the intersessional meetings held in Geneva from 23-27 April 2007, the MoGLSD acknowledged the need to develop a Comprehensive Plan to address the rights and needs of landmine victims and other persons with disability. It is for this reason that Uganda planned the participatory workshop to develop a Comprehensive Plan for victim assistance.

### 2.0 DEVELOPMENT OF A COMPREHENSIVE VICTIM ASSISTANCE PLAN:

On August 7-9 a Comprehensive Planning Workshop was held in Munyonyo Uganda to discuss ways forward and to develop a strategic plan for landmine survivors and other persons with disabilities. The workshop generated more interest and commitment than originally foreseen with 107 participants. Several Parliamentarians came out at every available opportunity when they were not in session. The energy and enthusiasm displayed at the Comprehensive Planning Workshop suggested that it was timely.

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#### **Objectives of the Workshop Overall Objective of the Workshop:**

To enable the Government of Uganda, through line ministries, in collaboration with disabled peoples' organisations and other key stakeholders, to develop a comprehensive plan of action for 2008-2012 to address the rights and needs of landmine survivors, other persons/children with disabilities and elderly. This Comprehensive Plan for Victim Assistance will be presented by Uganda to the Eighth Meeting of the States Parties (8MSP) to the AP Mine Ban Treaty in November 2007.

#### Other Objectives of the Workshop:

- 1) To raise awareness of Uganda's obligations as a State Party to the AP Mine Ban Treaty in relation to victim assistance.
- 2) To raise awareness on obligations within the Convention on the Rights of Persons with Disabilities and responsibilities as a State Party.
- 3) To raise awareness and mainstream rights and needs of landmine survivors and other persons with disabilities into sectoral plans and programmes.
- 4) To plan for active participation and integration of landmine victims and other persons with disabilities in the cultural, political, social and economic processes.
- 5) To establish a framework of rapid response to support landmine survivors and persons with disabilities in emergency and conflict situations.
- 6) To define the role of landmine survivors within the disabled peoples' forum in Uganda and look at strengthening working relationships.
- 7) To identify strategies for effective implementation and sustainability of victim assistance programmes.

### **3.0 GUIDING PRINCIPLES**

The Guiding Principles of the Comprehensive Plan are based upon responsibilities of States Parties to Victim Assistance in the context of the AP Mine Ban Treaty. Initial direction and translation into practical application was provided by the SCVA. However, each State must adjust the international framework to fit into its own structures and respond to Government priorities and development strategies. In addition, the involvement of landmine survivors and the broadening of the work to assist all persons with disability will be encouraged especially with the signing of the Convention on the Rights of Persons with Disabilities and Optional Protocol by the Government of Uganda on 30 March 2007. The cooperation and coordination of multiple ministries, NGOs and DPOs are critical to move into implementation of the comprehensive plan especially with the situation in the north but not overlooking the needs throughout the country.

### 3.1 FAMILY AND COMMUNITY BASED CARE

The family is the basic unit for providing care and support to landmine survivors, other persons with disabilities and the elderly in Uganda. They should benefit from family and community care and protection. It is therefore the responsibility of the family or caregiver to provide food, clothing, shelter,

love, care, education, psycho-social support, health and other basic services aimed at social and economic integration.

### **3.2 PARTICIPATION**

Full participation and representation of landmine survivors and other persons with disabilities in planning, implementation, monitoring and evaluation of their programmes at all levels is essential. Every intervention by stakeholders should bring landmine survivors and their caregivers on board to be able to take informed decisions and influence the environment around them.

### **3.3 HUMAN RIGHTS BASED APPROACH:**

This plan is based on the human rights approach to programming by seeking to minimise stigmatisation and discrimination which act as a barrier to land mine survivors and their families in accessing services. Promotion and protection of the rights of landmine survivors and other PWDs will be upheld at all times.

### **3.4 DECENTRALISED SERVICE DELIVERY:**

The plan will be implemented in the decentralised environment. Decentralised structures at the district and lower levels will be strengthened to ensure quality and sustainable delivery of services to landmine survivors and other PWDs. However, local governments have the primary responsibility for putting in place appropriate interventions.

### **3.5 CAPACITY BUILDING:**

Capacity of land mine survivors, other PWDs, care givers, communities shall be enhanced for effective implementation, monitoring and evaluation of this plan at all levels

### **3.6 MULTISECTORAL COLLABORATION:**

Disability is a crosscutting concern requiring the concerted effort of all stakeholders. Every stakeholder should undertake the responsibility of mainstreaming concerns in their respective plans and programmes. This will involve building and strengthening partnerships and networks with households of landmine survivors and other PWDs, communities, private sector, CSOs and development partners for sustainable service delivery to PWDs at all levels.

### **3.7 VICTIM ASSISTANCE AS A DEVELOPMENT ISSUE:**

Government of Uganda will address its obligation for victim assistance in the context of the AP Mine Ban Treaty within the mandates of the responsible ministries and other structures through Integration of needs and concerns of landmine survivors, other PWDS and the elderly into development plans and programmes at all levels.

# 4.0 THEMATIC AREAS OF THE COMPREHENSIVE PLAN:

### In 2005 the areas within victim assistance were clarified with the States Parties agreeing that victim assistance included work in six thematic areas.

- i. Understanding the extent of the challenge faced
- ii. Emergency and continuing medical care
- iii. Physical rehabilitation
- iv. Psychological support and social integration
- v. Economic reintegration
- vi. Laws and public policies

#### The above six thematic areas are the core of the Comprehensive plan.



Studying together as a team to make a response in the Comprehensive plan

### 5.0 FINANCING THE PLAN

The thematic areas of this plan transcend the realms of one single sector. Each sector will Implement activities for appropriate interventions within its area of mandate. The funding needs of the plan therein have been estimated according to thematic areas as follows:

- 1. Understanding the extent of the \$212,404 challenge faced
- 2. Emergency and continuing medical care \$378,320
- 3. Physical rehabilitation \$787,000
- 4. Psychological support and social integration \$323,000
- 5. Economic reintegration \$686,460
- 6. Laws and public policies \$567,500 Total funding needs \$2,954,684

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### 6.0 LESSONS LEARNED

### 6.1 POLITICAL WILL

This was shown by the level of interest by political leaders such as cabinet ministers and of Members of Parliament. It was highly encouraging to have had their views and contributions during the planning workshop.

### 62 MULTISECTORAL COLLABORATION:

Various stakeholders contributed towards the development of the comprehensive plan. This will ensure ownership of the plan by all stakeholders.

### 5.3 **VOICES OF LANDMINE SURVIVORS:**

There is a need to address the issues raised by landmine survivors themselves. The best way forward is together: the Government, Disabled Persons' Organisations, UN agencies, NGOs, development partners, and landmine survivors, in partnership.





## Part 1:

The Uganda Comprehensive Plan of Action to address the rights and needs of land mine survivors and other persons with disabilities for the period 2008-2012



## **Part 1: Understanding the Extent of the Challenge**

Goal	Status	Objectives	Plans to achieve objectives	Funding needs
To establish a	According to the Uganda Population and Housing	Establish a functional, efficient	UMAC, in collaboration with the MoH	\$ 212,404
reliable qualitative	Census Report (2002), four out of every 25 persons	and comprehensive nation-	and other actors will develop and pre-	in This is a
and quantitative	in Uganda are persons with disabilities. The most	wide surveillance system with	test mine/ERW casualty data collection	
database on	commonly observed disabilities are loss and/or lim-	information on landmine/ERW	tools prior to the establishment of a data	Sec. 25.
disability that	ited use of limbs (35.3%), spinal injuries (22.3%),	casualties, injury type, health	collection mechanism and later widen	AND DON THE
can be used for	hearing difficulties (15.1%), and seeing difficulties	condition, assistance received	the scope of injury surveillance for all	
planning, budgeting,	(6.7%).	and economic status by 2012.	causes of injury, for example domestic	
advocacy, action,			violence, occupational hazards,	19:00 01
implementation,	1.1.5.0. 20 00 000	C L C C C C C C C C C C C C C C C C C C	road accidents, battle field injuries,	1.
monitoring and	There are some efforts by (MoH), (MoES),	Develop a functional and	landmine/ERW injuries and polio.	1. 1. 1.
evaluation	(MGLSD), (UBOS), and (UMAC) to create data	operational HMIS by 2010		22 6 4 1 1
	base on disability, mine casualties and mine survi-	with data analysed and utilised	MoH, in collaboration with local	272221
	vors. However, the current situation is that data is	for planning and decision	authorities and other actors, will	1812.2545
	scattered in various ministries, DPOs, NGOs, and	making at all levels.	continue to implement the Health	
	CBOs.		Sector Strategic Plan II 2005-2010	
	CARLES AND		(HSSP II) to improve data generation,	
	Disability structures are presently up to Sub-County	Establish a database on	collection, analysis, dissemination and	6 1 and 3
	level but are not used for data collection.	landmine survivors and other	utilisation.	
		persons with disabilities to	and the second s	
	Most current data consists of estimates, for example	assess their needs and gaps in	MOH in collaboration with MGLSD	
	by the WHO, and the Health Management Informa-	the provision of services by	and other actors will conduct a needs	100711
	tion System (HMIS).	2008.	assessment of PWDs in post-conflict	Rest 1
			areas and assess capacities of service	
	Data captured by Uganda Bureau of Statistics is so	and the second	providers to meet the health, social and	Same and
	general that it cannot be effectively used.		economic needs on annual basis and	1000
			adjusted to respond to the confidential	
	Data is in different formats and is not disaggregated.		issues within the Convention on the	1
			Rights of Persons with Disabilities	- mark
			in the second se	



### **Part 1: Understanding the Extent of the Challenge**

Goal	Status	Objectives	Plans to achieve objectives	Funding needs
Goal	StatusThere are over 900 survivors in northern Uganda and 200 in western Uganda.The National Surveillance Network is completing the second pilot for a standardized tool to collect data on indicators regarding landmine survivors and persons with disabilities.The Injury Control Centre Uganda (ICCU) has an injury surveillance system in Northern and Western Uganda. The surveillance tool takes into account injuries caused by landmine and Unexploded Ordinances (UXOs) but has not at this point been shared with mine action partners.District planning including local governments and parish Development Committees do not adequately include dis- ability in their planning systems.There is a directory of organisations assisting mine survi- vors and other persons with disabilities which requires a fuller circulation.Indicators are in the second phase of development for the national surveillance network for landmine survivors. Indicator development includes MoH, MGLSD, UMAC, World Vision, UBOS all working together.The focal person who is working on the database at the Ministry of Health is trained in Information Management System for Mine Action (IMSMA).	Create and disseminate a directory of actors engaged in assistance to mine survivors and other persons with dis- abilities in mine/ERW affected areas by 2009. Develop and disseminate guidelines for local govern- ment to integrate disability is- sues in all planning processes by 2011. Monitor accuracy, relevancy and reliability of data on landmine survivors and other persons with disabilities on an ongoing basis. Provide statistics for decision making to relevant Ministries and Accredited Partners and develop mechanism to share information with DPOs by	UMAC in collaboration with other stakeholders will compile details of Actors in mine action in Uganda. MGLSD, in collaboration with the Ministry of Local Government and other actors, will develop and disseminate guidelines to integrate disability issues within the planning and budgeting process in all line ministries including local government. NCD in collaboration with MoH, MGLSD, landmine survivors groups, disabled persons organisations and other actors will establish a mechanism to monitor, evaluate and disseminate available data on landmine survivors and other persons with disabilities to facilitate programme development, planning and effective use of resources. MoH will establish structures and protocols to share and exchange information between MGLSD, other Ministries, NGOs, and DPOs respecting	Funding needs
72	Pilot one of the database actively involved landmine survivors' comments and priorities.	2009.	the right to confidentially.	

Part 2: **The Uganda Compre**hensive Plan of Action to address the rights and needs of mine survivors and other persons with disabilities for the period 2008-2012



# Part 2: Emergency and continuing medical care

Goal	Status	Objectives	Plans to achieve objectives	<b>Funding needs</b>
Reduce deaths by stabilizing medical conditions and minimizing physical impairments in	Health care services in Uganda are provided by the government, the private sector and traditional healers. The health care infrastructure is divided into 4 main levels: national referral hospitals; regional referral hospitals; district health services; and health sub-	Develop and implement a strategy to improve emergency response capacities in Uganda by 2009.	MoH, in collaboration with WHO, will undertake an assessment of emergency response capabilities to identify gaps in service provision.	\$ 378,320
emergency settings that could result from injury	districts. Health sub-districts are further divided into county, sub-county, parish and village levels. Of the 102 hospitals in the country, two are national public referral hospitals, 11 are regional hospitals, 43 are general hospitals, 42 are private not-for-	Disseminate guidelines on the handling of trauma, disabilities and rehabilitation on an ongo- ing basis.	MoH, in collaboration with MGLSD, local authorities and other actors, will develop and disseminate guidelines on Psychosocial Support.	
hos infr for of t fact serv Ava situ to t Tra prei The trau to r	profit hospitals and 4 are private health practitioner hospitals, In many instances, basic emergency infrastructure, supplies, safe blood and equipment for support services are inadequate. The availability of trained health workers is one of the most critical factors limiting the delivery of a minimum package of services.	Establish a functional ambu- lance or emergency evacua- tion system in all mine/ERW affected districts by 2009.	MoH, in collaboration with local authorities and other actors, will continue to implement the HSSP II to establish a functional emergency evacuation capability.	
		Establish functional Accident and Emergency Units in all Re- gional Referral Hospitals and 80 percent of general hospitals by 2010.	MoH, in collaboration with local authorities and other actors, will continue to implement the HSSP II	
	premature death in Uganda. The majority of people who appear to help victims of traumatic injuries lack adequate knowledge and skills to respond to emergencies and have limited knowledge on how to refer victims to the right health centres.	Improve emergency response capacities in all health units in all mine/ERW affected Dis- tricts by 2009.	to establish emergency care facilities, training of service providers and the provision of essential medicines and supplies.	



# Part 2: Emergency and continuing medical care

Goal	Status	Objectives	Plans to achieve objectives	<b>Funding needs</b>
	The majority of the existing health units lack capacity to effectively handle trauma when it occurs. Uganda has few if any first aid practitioners to address immediate and life-threatening situations. Transport to hospitals in the most affected areas such as in the North is by army trucks, traders' lorries and pick-up trucks. The other forms of transport are no better than these and the average time between injury and arrival at a health facility is about 9 hours. Surgeons are available at all regional hospitals; however surgical operations including amputations in district hospitals are performed by non- specialized doctors. Corrective surgery and pre- prosthetic remodelling of stumps is available in	Establish fully equipped Village Health Teams (VHTs), with at least one third of team members being women, trained in emergency first aid in at least 25% of mine/ERW affected villages by 2010. Reach 80% of the population with messages on disability prevention and rehabilitation by 2010. Increase accessibility to adequately staffed and equipped health units through referral structures in 6 mine/ ERW affected districts by 2012.	MoH, in collaboration with local authorities and other agencies, will continue to implement the HSSP II with the aim of enabling all health units to provide basic life saving measures. MoH, in collaboration with ocal authorities and other actors, will continue to implement the HSSP II to establish a network of functional VHTs with the aim of facilitating the process of community mobilization and empowerment for health action. MoH, in collaboration with local authorities and other actors, will continue to implement the HSSP II to disseminate disability related messages to raise awareness in the population	
	regional hospitals. Both mine-affected regions have visiting orthopaedic surgeons although their visits are sometimes irregular. Medical personnel in regional hospitals have received trauma training and equipment for casualty units, however, staff attrition has depleted the levels of trained staff.	Provide appropriate and sustainable health services for vulnerable communities and individuals in post-conflict situations in line with the Uganda National Minimum Health Care Package in all mine affected districts by 2012.	MoH, in collaboration with local authorities and other actors, will continue to implement the HSSP II with the aim of reducing the disparity in access in remote areas through establishing or rehabilitating centres, training of service providers, and the provision of supplies and equipment.	



# Part 2: Emergency and continuing medical care

Goal	Status	Objectives	Plans to achieve objectives	Funding needs
	Post emergency care is weak in government hospitals. Basic assistive devices are not readily available at district hospitals. Survivors are referred to rehabilitation services but sometimes they do not know where rehabilitation centres are located.	Strengthen and/or establish functional referral systems in all mine/ERW affected districts by 2012.	MoH, in collaboration with local authorities and other actors, will continue to implement the HSSP II to reach vulnerable communities and individuals including through equitable resource allocation, infrastructure development, community mobilization, and capacity building with particular emphasis on basic health services, psychological support and physical rehabilitation.	
	Services are available to men, women, boys, girls and older persons equally. Costs reduce accessibility to more organised services that are provided by NGO hospitals.	Strengthen the multi-sectoral approach in managing medical emergencies, on an ongoing basis.	MoH, in collaboration with local authorities and other actors, will continue to implement the HSSP II with the aim of strengthening the referral system through provision of communication facilities and transport.	
	Road Traffic Accidents are a major issue in Uganda and further create a need for emergency services and first responders.	Develop and disseminate an integrated strategy to ad- dress sexual and gender-based violence (SGBV) in the health sector by 2010.	MOH will sensitize the line ministries and key players about management of medical emergencies.	
			MoH, in collaboration with MGLSD, local authorities and other actors, will develop and disseminate a strategy on SGBV.	



### Part 3:

The Uganda Comprehensive Plan of Action to address the rights and needs of mine survivors and other persons with disabilities for the period 2008-2012



# Part 3: Physical Rehabilitation

Goal	Status	Objectives	Plans to achieve objectives	Funding needs
To restore maximum	The Government of Uganda is committed to uplifting	Provide at least 70% of regis-	MGLSD in collaboration with MOH	\$ 787,000
physical functional	the standard of living for persons with disabilities	tered landmine survivors with	will provide CBR and Physical	
ability for persons	by strengthening Community Based Rehabilitation	rehabilitation services by 2012.	Rehabilitation services	
with disabilities	services in line with the decentralization policy.			
including the			MGLSD, in collaboration with other	
provision of	It is estimated that less than 25 percent of persons	Promote awareness on the ef-	relevant actors, will use media and	
appropriate assistive	with disabilities have access to rehabilitation	fects of landmines and provide	other avenues within the Health Care	
devices	services.	information on how to manage	structures to disseminate information	
		disabilities arising from land-	on the effects of landmines and	
	The Ministry of Health has established a Disability	mines by 2012.	management of emergencies and	
	Prevention and Rehabilitation Section whose mission		disabilities.	
	is to address the medical rehabilitation needs of	A BY		
	disabled people. Rehabilitation services are being	Strengthen the referral mecha-	MoH, in collaboration with MGLSD	
	decentralized, health workers oriented to CBR and	nism for persons with dis-	and other relevant actors, will sensitize	
	rehabilitation curricular being integrated into the	ability to improve access to	persons with disabilities about the	
	basic and in-service training for health workers.	rehabilitation and increase the	availability of services and how to	1/38
		capacity at the three orthopae-	access those services, and increase	
	CBR services are being offered to persons with	dic workshops by 2010	capacity through: in-service training of	Call 1
	disabilities in districts through the Ministry		rehabilitation workers; recruitment of	
	of Gender, Labour and Social Development		relevant human resources; improvement	
	in partnership with Local Government and	Increase the provision of assis-	of infrastructure and procurement of	
	communities and in areas where the National Union	tive devices and strengthen the	equipment at rehabilitation centres;	
	of Persons with Disabilities operates. Other NGOs	functional capacity of exist-	provision of necessary consumables;	
	have CBR programmes and there is an established	ing orthopaedic workshops by	and, the provision of accommodation,	
	CBR Steering Committee	2012	food and transport while accessing the	
		and the	services at rehabilitation centres.	
	The three main mine affected regions have	Integrate physiotherapy ser-		
	orthopaedic workshops that provide prosthetics.	vices and develop outreach ser-	MoH, in collaboration with MGLSD and	
	The workshop in the north is supported by an	vices into the three orthopaedic	other actors, will strengthen orthopaedic	
	INGO therefore has the materials and equipment	workshops in the mine affected	workshops for the production of	
	available. The one in the west and north east need	areas by 2009.	assistive devices	
	strengthening and access to materials and equipment.			The seal of the



# Part 3: Physical Rehabilitation

Goal	Status	Objectives	Plans to achieve objectives	Funding needs
	<ul> <li>The three centres have orthopaedic technicians though only one in the north has ISPO recognized qualifications. Currently, in the north, most new survivors are fitted with prosthesis as soon as the stump is ready to receive it. However, in the west and to less extent in the north east, there are a number of survivors who have spent years without a device.</li> <li>Follow-up services for survivors in the west are weak and require strengthening.</li> </ul>		MoH, in collaboration with other relevant actors, will integrate physiotherapy services and develop outreach services through the recruitment of trained rehabilitation workers and in- service training of workers	
	Physiotherapists (one in the west, one in the northeast and three in the north) are available at regional hospitals and train survivors in physiotherapy techniques.			
	Occupational therapists are available at rehabilitation centres in the north to train in activities of daily living.			
	There is a large gap in the number of rehabilitation personnel compared to the burden in both regions. There is a need for a total of 5 orthopaedic technologists, 6 technicians, 5 physiotherapists and 4 occupational therapists.			
	Mobility Appliances and locally appropriate wheelchairs are built by multiple artisans including Katalemwa Cheshire Home, Mulago Orthopedic Workshops, Gulu Youth Development Association, and Disabled Women Entrepreneurs.			
	Landmine survivors and their families play a vital role in the rehabilitation process. An information booklet has been developed to provide information about the disability and rehabilitation of people with disabilities. There is need for more sensitization of the public on disability issues.		J PAX	
	The high cost of transport and up-keep in hospitals reduces accessibility to rehabilitation services.	and a		
	Gender and age discrimination to access services has not been noticed but due to the abandonment of female survivors, this could be a possibility and needs to be studied further.			



Part 4: **The Uganda Compre**hensive Plan of Action to address the rights and needs of mine survivors and other persons with disabilities for the period 2008-2012



# **Part 4: Psychological and Peer Support**

Goal	Status	Objectives	Plans to achieve objectives	Funding needs
To support persons with disabilities, including landmine survivors with adequate psychological services to help them adjust and cope with the psychological effects of their challenges to regain and maintain a healthy and positive outlook on life	<ul> <li>Psychological support is a weak area in service provision yet crucial for inclusion throughout the country. There is a lack of operational structures to coordinate, regulate and streamline psychological services.</li> <li>Additional psychosocial support is required in the conflict areas due to recent trauma and fear to return. The Gulu Regional Hospital has a psychiatric unit.</li> <li>Additional support is required through service providers such as health care, social workers, NGOs and Peer to Peer support groups at all levels.</li> <li>Counselling is not readily available at the community level.</li> <li>Counselling centres are far away and the community does not have a mechanism to refer.</li> </ul>	<ul> <li>Provide regular cost-effective community based psychosocial support and peer to peer support networks to at least 25 percent of registered landmine survivors in mine-affected areas by 2009.</li> <li>Establish mental health units in all regional referral hospitals by 2012.</li> <li>Increase community access to mental health services by 50% by 2012.</li> <li>Undertake research on mental health and trauma and the</li> </ul>	MGLSD, in collaboration with other relevant actors, will integrate psychological services into existing community based rehabilitation services, including training of persons with disabilities as trainers to offer peer group training as well as peer to peer support services. MoH, in collaboration with local authorities and other actors, will establish mental health units to enhance the capacity of individuals for social adoption and a positive state of mental well-being and to address effects of trauma and violence in conflict situations. MoH, in collaboration with local authorities and other actors, will	\$ 323,000
	Training Programmes for psychological services require strengthening and expansion. There is a lack of national surveys, research and needs assessments to understand the magnitude of the problem and level of individual need.	different manifestations identifying and sharing best practices and lessons learnt, on an ongoing basis. Raise awareness on the psychological challenges and concerns facing persons with disabilities, including landmine survivors, on an ongoing basis.	increase access to mental health services. MOH in collaboration with MGLSD and other key actors will undertake research on issues relating to persons with disabilities, and advocate for the incorporation of psychological questions/issues into national surveys conducted by government.	



# **Part 4: Psychological and Peer Support**

Goal	Status	Objectives	Plans to achieve objectives	Funding needs
	Culturally sensitive methods and tools need to be developed to respond to mental health in the country. There is a need to develop, test and provide appropriate learning materials and play tools that adapt for access by children and persons with disabilities, including landmine survivors.		MGLSD, in collaboration with other relevant actors, will implement an awareness raising campaign including through the use of workshops, radio programmes and spot messages, community sensitisation, the use of Information, Education, Communication (IEC), and printed information and documentation.	
	Psychological services are often not accessed by persons with disabilities. Programmes in development need to be sensitive to access issues, privacy issues, security needs and psychological well-being of persons with disabilities, including landmine			
	survivors.			



Part 5: **The Uganda Comprehen**sive Plan of Action to address the rights and needs of mine survivors and other persons with disabilities for the period 2008-2012



Goal	Status	Objectives	Plans to achieve objectives	Funding needs
To promote	Disability increases with age: 2% among children	Expand (CBR) to 50 sub-	MGLSD, in collaboration with other	\$ 686,460
social inclusion	less than 18 years and increasing to 18% among	counties in landmine/ERW	actors will implement the National	
and economic	older persons above 60 years.	affected areas by 2012.	Community Based Rehabilitation	
empowerment		E E E FISIE	Strategic Plan (NCBRSP) with the	
for people with	The prevalence rate increased to 1.1 % in the	Provide regular social	overall objective of improving the	
disabilities,	2002 Census when compared to the figure	support to at least 50% of	psychosocial, physical, political and	
landmine survivors	obtained in the 1991 Census. This equates to 4	persons with disabilities	socio-economic status and enhancing	
and their families	out of every 25 persons in Uganda are persons	including landmine	equal opportunities for persons with	
for sustainable	with disabilities.	survivors and their families,	disabilities.	
livelihood		and promote their active		A STATE OF THE OWNER
	Traditionally, extended families and community	participation in community	MGLSD, in collaboration with other	
	based systems provide support services. However	development activities	actors, will continue to provide	
	rural/urban migration, economic hardships,	through awareness raising	social support within the framework	
	conflicts and disasters have greatly weakened the	and capacity building in	of NCBRSP. Activities will include	
	extended family and community based systems	CBR areas by 2012.	establishment of cost effective social	
	and the vulnerable populations are often left to	Pando and the	support networks, community	
	fend for themselves.	<b>Develop four community</b>	sensitisation meetings, training	
	and the second	awareness packages on the	of community educators, training	
	During the current return in some districts, it	rights, needs and potentials	in management of disabilities,	
	appears that persons with disability and older	of persons with disabilities	development of theatrical activities,	
	persons are being left behind in the Internally	including landmine survivors	games and sports	
	Displaced Camps creating a potential for a	by 2012.		
	segregated society in the future. This is not in line		MGLSD, in collaboration with other	1000
	with the Government laws and policies.	Establish at least five	relevant actors, will implement	
		landmine survivor groups in	awareness raising campaign through	124 194 194
	And the second	affected areas and identify	workshops, radio programmes and spot	2. VALUE
		their role as a specialized	messages, community sensitisation,	1 - S - S - S - S - S - S - S - S - S -
	States and the states of the second	group with linkages with	the use of Information, Education,	at said an
		other associations of persons	Communication, and printed	1 1 1 1 1 1
	and the second	with disabilities by 2012.	information and documentation.	Mar State Me



foal	Status	11 15 1 2 1	Plans to achieve objectives	Funding needs
1 / 32	The Government has adopted the Community	Establish a mechanism	MGLSD, with other actors in the	14.81 31.4
	Based Rehabilitation Strategy to strengthen the	to monitor social status	disability sector, will support the	(1*1012-C)
	family and community response for effective social	and inclusion of landmine	establishment and capacity building	A. 1993
	integration and to build positive attitudes towards	survivors and other PWDs	of landmine survivor' groups and link	
	persons with disabilities including landmine	in community development	these groups at regional and local level	Control States
	survivors and older persons. The Community	programmes, by 2012.	to work in partnership with the relevant	
	Based Rehabilitation Strategy has proved to be		ministries and NGOs.	
	successful and has expanded into 27 Districts. The			
	strategy is implemented in partnership between the	Build and/or strengthen	National Council for Disability (NCD)	
	Government at national and local level, NGOs, and	the capacity of Social	will develop a mechanism to monitor	In successful and so
	the community.	Development institutions,	the social status and inclusion of	
		other sectors and communities	landmine survivors and other PWDS in	William and all
	Despite these efforts, negative societal attitudes	to mainstream concerns and	community development programmes.	
	arising from fear, ignorance, superstitions, neglect	needs of landmine survivors		
	and lack of awareness still exist. This negative	and other PWDs.	MGLSD in collaboration with UMAC,	
	attitude creates stigma which affects the social	2 Participation of the	local authorities and other agencies,	
	integration of persons with disabilities including	and the second second	will implement the SDIP to mainstream	
	landmine survivors.	Develop and operationalise	concerns and needs of landmine	
		an institutional mechanism	survivors and other PWDs.	
	Associations for landmine survivors are only in a	for planning, coordination,		
	few districts of northern Uganda affected by war.	networking, promotion,	MGLSD, in collaboration with OPM,	
	The main two organisations are in Gulu and Lira. A	awareness raising, monitoring	MoH, local authorities and other	NEW MICH
	very young Association is in Kitgum. Neighbouring	and evaluation of an effective	agencies, will continue to implement	
	districts like Pader, Soroti, Amuria, Oyam are	Social Development System,	the SDIP to develop a resourced	A LOL - No State
	without Associations. The only Association in	by 2009	and efficient secretariat to assist in	1.4 1.4 1.4 1.4
	western Uganda is in Kasese. Currently, there is no		sectoral coordination and regulation	Ser Alera
	umbrella association of landmine survivors at the		mechanisms, including policies,	
	district or national level.		standards and guidelines, for all	5-FI 3-60 61
			interventions and raise awareness	1 - 1 - 1 - P / P
			regarding the disability sector at national	
			and local levels.	Part and



oal	Status	Objectives	Plans to achieve objectives	<b>Funding needs</b>
	<ul> <li>The relationship between landmine survivors and the National Union of Disabled Persons of Uganda (NUDIPU) is not clear.</li> <li>Landmine survivor' organisations are concerned with mobilising and sensitising the survivors for peer to peer support and income generation activities. They are also involved in Mine Risk Education (MRE).</li> <li>The National Union of Disabled Persons in Uganda (NUDIPU) is the umbrella organization for all persons with disabilities. In addition, the National Union of Women with Disabilities of</li> </ul>	Advocate for accessibility to the physical environment and public transport through media, awareness raising and policy review/ formulation within the relevant government and private sector agencies by 2008. Advocate for and introduce technology for information to be available in disability friendly formats, on an ongoing basis.	MGLSD, in collaboration with other actors, will conduct an awareness raising campaign to sensitise stakeholders on existing guidelines on accessibility and their practical application, the needs of persons with various types of disability, and encourage the construction of adaptive structures/infrastructure to cater for the needs of disabled persons (ramps, special toilets etc).	T unturing inceas
	<ul> <li>Uganda (NUWODU) has developed strategies for empowerment of women with disabilities.</li> <li>The Uganda Foundation for the Blind (UFB) and the Uganda National Association of the Blind (UNAB) provide training for persons with disabilities in Uganda.</li> <li>Uganda National Association of the Deaf (UNAD), which has sub-branches all over the country, provides training for hearing impaired persons in Uganda.</li> <li>Uganda National Action on Physical Disability (UNAPD) focuses on issues related to persons with physical disabilities</li> </ul>	Develop sports and coaching pilot programmes for persons with disabilities including mine survivors in 50 sub counties in landmine/ERW affected areas by 2009. Lobby and advocate for the rights of landmine survivors in 50% of the landmine/ERW districts by 2012	MGLSD, in collaboration with relevant ministries and actors, will transcribe and translate information and materials into accessible formats. MoES, in collaboration with NGOs and other agencies, will continue to implement the Education Sector Strategic Plan 2004-2015 (ESSP) through equipping facilities for sports for disabled, training of coaches, and support for local and international competitions.	



Goal	Status	Objectives	Plans to achieve objectives	Funding needs
	<ul> <li>Education and Training: The national literacy rate for persons with disabilities is 48.8%, out of which 62% are males and 32% are females.</li> <li>Education completion rates for Primary 4-Primary 6 is 41.3% for boy children with disabilities and 37.78% for girl children with disabilities. These figures suggest that the Millennium Development Target that all children have the right to primary education to grade five by 2015 may not be reached.</li> <li>MoES and Kyambogo University Faculty of Education is in charge of disability issues in collaboration with Uganda Institute of Special Education (UNISE) and is responsible for providing a disability friendly environment as well as service provision for children with special needs under going schooling or any kind of training at its various institutions.</li> </ul>	Advocate for traditional formal and non formal family and community systems to care for landmine survivors, other PWDs and the elderly. Increase literacy levels among landmine survivors and other PWDs from 62% to 70% for males with disabilities and from 32% to 40% for females with disabilities aged 10 years and above by 2012. Increase participation of children with disabilities including landmine survivors in primary and post-primary education in mine/ERW affected communities by at least 40% by 2012. Increase the number of trained teachers, tutors and Centre Coordinating Tutors for the inclusion of children with disability into the education system by 2012.	MGLSD, in collaboration with other key actors, will organize a fora for landmine survivor groups and other DPOs to meet and identify their differences and similarities. Provide technical guidance for establishment of an umbrella organisation for landmine survivor groups. Identify a voice for landmine survivors within other DPOs, Mobilise resources for capacity building and collaboration mechanisms to monitor and evaluate programmes. MGLSD will raise awareness among policy makers, service providers and the community on the benefits of traditional structures. MGLSD will encourage functional adult literacy as a major input into community empowerment and build capacity at all levels, through training of survivor group members in functional literacy skills and advocacy for the provision of and access to adult literacy by PWDs including landmine survivors.	



Goal	Status	Objectives	Plans to achieve objectives	Funding needs
	Positive measures have been introduced, pro- viding for awareness-raising about disability issues among primary school children. Chil- dren with disabilities have been given first priority to enroll and the MoES ensures that teachers of children with special needs receive adequate training. An Educational Assessment and Resource Service (EARS) centre has been set up in 39 districts to ensure provision of adequate skills to teachers to identify and cater to children with special learning needs. Some child mine survivors are also supported by NGOs to return to school. The MoES has a guideline for construction of school structures to promote physical acces- sibility to school facilities for children with disabilities. New structures and some old ones over time should therefore become accessible though addressing and improving sanitation facilities. This should include primary, sec- ondary, tertiary schools and universities.	Increase the number of youth landmine survivors and other persons with disability's access to employable skills training, vocational training and higher education by 2012. Affirmative action established to reduce the gender disparity shown between men with disabilities and women with disabilities in secondary schools, vocational training and higher education by 2012. Establish a mechanism to identify the economic and development needs of landmine survivors and other persons with disabilities and incorporate them into development plans at all levels, by 2008.	<ul> <li>MoES, in collaboration with NGOs and other agencies, will provide flexible basic education system through expansion of facilities, the rehabilitation of education facilities, teacher training and monitoring the inclusion of girls with disability at secondary level through the National Surveillance Database</li> <li>MoES, in collaboration with NGOs and other agencies, will integrate special needs education in the training curriculum.</li> <li>MoES, in collaboration with the Uganda Vocational Qualifications Authority, NGOs and other service providers, will expand and improve the Business, Technical and Vocational Education and Training Centres (BTVET) through the rehabilitation and equipping of existing facilities, development of modular courses, and support to non formal providers of BTVET.</li> </ul>	



Goal	Status	Objectives	Plans to achieve objectives	Funding needs
	Construction of four of the planned 22 technical training institutions is ongoing. Fourteen sites have also been established for the first phase of Community Polytechnics (CP). The Government CP target is one-per sub-country totalling 932. A total of 15 existing technical schools and institutes are being rejuvenated and expanded. In addition, the Government has extended financial support to 26 private providers of technical and vocational education. The Community Polytechnics are available to all including all persons with disability. Vocational rehabilitation centres are available on a regional basis and provide training in traditional courses like tailoring, shoe making, carpentry and leather works. Training is supported by government although intake is limited due to financial constraints. Persons with disabilities access these services. It is not known to what extent landmine survivors utilise these services. There is a need to look at the current market in relation to the training options in the vocational rehabilitation centres are available or so the service of the secret and the services. There is a need to look at the current market in relation to the training options in the vocational rehabilitation centers are service of the secret and	At least 30 percent of persons with disabilities including landmine survivors, and their families, in highly landmine affected areas are accessing open and self employment, income generating opportunities, access to micro- finance and small enterprise projects by 2012. At least 60% of PWDs including landmine survivors in affected landmine areas of return access affirmative action in areas of resettlement by 2009. Establish cash grants for 60% of severely affected landmine survivors and other persons with disabilities, by 2012	MGLSD, in collaboration with other relevant ministries and actors will establish a mechanism to promote equal opportunities to encourage landmine survivors and other persons with disability to access vocational training and higher education through University scholarships established through philanthropy specifically ear marked for a person with disability. MGLSD, in collaboration with other relevant ministries and key actors, will establish a mechanism to monitor and report on the inclusion of persons with disabilities including landmine survivors in economic development activities, access to services, provision of materials for resettlement and advocate for affirmative action through local government initiatives within IDP Policy.	


Goal	Status	Objectives	Plans to achieve objectives	Funding needs
	<ul> <li>tres. Wider vocational training opportunities are limited by lack of ability to pay tuition and lack of scholarships/sponsorship.</li> <li>Some NGOs, such as Uganda Society of Disabled Children, are supporting disability friendly environments at schools and are training school staff; in specific areas such as sign language, and providing sensitisation workshops and study tours.</li> <li>Government through Functional adult literacy programmes targets persons with disabilities aged 15 years and above who missed or dropped out of formal schooling. Accessibility to FAL services by PWDs including landmine survivors is limited due to inadequate trained personnel in sign language, tactile and Braille literacy.</li> </ul>		MGLSD, MoFPED and MoES, in collaboration with other actors, will increase opportunities for vocational training, management skills training, and access to seed capital for persons with disabilities including landmine survivors through: banks, micro-finance Institutions, savings and credit co-operative organisations (SACCOs) and other revolving loans to improve their livelihoods.	
	Economic Inclusion and Empowerment In the Northern regions 65.8% of the popula- tion live below the poverty line and account for over one third of the country's poor.			



Goal	Status	Objectives	Plans to achieve objectives	Funding needs
	<ul> <li>Persons with disabilities in Uganda have remained the poorest among the poor. Forty six percent (46%) of persons with disabilities fall below the poverty line.</li> <li>Poverty is largely manifested in rural areas where 39.1% are poor compared to 10.3% in urban areas. The landless, the near landless and those without non-labour productive assets are more likely to be poor.</li> <li>The National Union of Women with Disabilities of Uganda focuses on economic development projects. The Disabled Women Network and Resource Organization advocates for the economic empowerment of women with disabilities and their inclusion in micro-credit programmes. The Uganda Disabled Women's Association operates a revolving loan scheme with the goal of initiating small businesses.</li> </ul>		MGLSD, in collaboration with other actors will empower communities and protect landmine survivors, other PWDs and elderly through provision of basic needs, production tools and farm imple- ments, right to land ownership and encourage PWDS including landmine survivors to participate in development activities. MGLSD, in collaboration with other ac- tors, will establish a framework for cash transfers, training of stakeholders in the management of grants, and a system to identify the most vulnerable.	



Goal	Status ///	Objectives	Plans to achieve objectives	<b>Funding needs</b>
	<ul> <li>Micro finance schemes for poverty eradication do reach persons with disabilities in the north, however, the participation of landmine survivors as a group is not known. In the west, survivors have formed a corporate group that grows and sells vegetables and manufactures banana fibre ropes.</li> <li>There are government programmes for poverty eradication, for example PMA, NAADS, etc but the extent to which persons with disabilities are benefiting is not known. There is a need to establish retraining centres for landmine survivors and other persons with disabilities to impart livelihood skills for earning a living in their various communities.</li> </ul>			
	The Social Development Sector promotes issues of social protection, gender equal- ity, human rights, culture, decent work conditions and empowerment for dif- ferent groups such as women, children, unemployed youth, IDPs, the elderly and persons with disabilities including land-			



Goal	Status	Objectives	Plans to achieve objectives	Funding needs
	The MGLSD as the lead agency of the SDIP is mandated to empower commutes to harness their potentialand provulnerable persons from deprivation a livelihood risks. Within the SDIP particularly vulnerable include persons we disabilities, elderly and certain types of households.	uni- otect und Vith of		
	poverty eradication strategy deliberate selected and dedicated to bringing the sons with disabilities including landm survivors and their families into the m stream development agenda. It is aime enabling mainstreaming disability into the sectors and levels of development ning and service delivery.	per- ine nain- ed at o all		

Part 6: **The Uganda Compre**hensive Plan of Action to address the rights and needs of mine survivors and other persons with disabilities for the period 2008-2012



# Part 6: Laws and Public Policies

Goal	Status	Objectives	Plans to achieve objectives	Funding needs
To review, establish, implement and enforce laws and policies that guarantee the	International Legal Framework Uganda is signatory to a number of interna- tional conventions which after ratification have demanded for domestication into the national	Monitor and evaluate the implementation of Uganda's Comprehensive Plan of Action for Victim Assistance 2008- 2012 on an ongoing basis.	MGLSD to develop terms of refer- ence for the position of technical advisor.	\$567,500
rights of landmine survivors and other persons with disabilities	laws. Some of the most important and relevant conventions include the following: The Alma Ata Declaration of 1978, which		Recruit Disability technical advisor seconded to the MGLSD.	
	emphasises inclusion of the rehabilitation approach into the primary health care system;	Formulate regulations and guidelines on existing Ugandan laws, policies and acts	MGLSD, in collaboration with other relevant actors, will build the capac- ity and understanding of local coun-	
	The International Labour Organisation Con- vention No. 159 (1983) and Recommendation		cillors through: awareness-raising activities to establish and implement	
	168 on vocational rehabilitation and employ- ment of PWDs;		ordnances and by-laws on disability issues; sensitisation of communities, line ministries, media, service pro-	
	The World Programme of Action 1983, which advocates for full participation of PWDs in the development process;		viders, traditional healers, religious leaders on laws pertaining to dis- ability; and, through comprehensive	
	The Jomtien Declaration on Education for All, 1990	Strengthen existing	training and budget allocations. MGLSD, in collaboration with other	
	The Vienna World Conference on Human Rights 1993	institutional frameworks for the full implementation and enforcement of existing legislations including the	relevant ministries, will review existing frameworks and status of	
	Resolutions, which stipulate promotion of rights of PWDs;	Convention to protect the rights of persons with disabilities and develop new structures if required.	implementation to develop regula- tions and guidelines on implementa- tion of the laws and policies, and identify priorities.	



# Part 6: Laws and Public Policies

Goal	Status	Objectives	Plans to achieve objectives	Funding needs
	<ul> <li>The UN Standard Rules for Equalisation of Opportunities 1993, which guides policy making;</li> <li>The UNESCO Salamanca Framework of Action on Special Needs Education 1994, which emphasises promotion of education and education, and inclusion of all CWDs.</li> <li>The African Decade of Persons with Disabilities 1999-2009 which aims at igniting commitment of African leaders to promoting the rights of PWDs in all the countries of Africa through increased awareness and reflection on the causes of exclusion and marginalisation of PWDs and above all promoting the mainstreaming of disability issues and the participation of PWDs in social and economic development programmes including national poverty reduction strategies.</li> <li>The Convention on the Rights of Persons with Disabilities, 2006 which is aimed at promoting, protecting and ensuring the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities.</li> </ul>	Strengthen the capacity of local councillors represent- ing persons with disabili- ties in the mine affected regions by 2010.	A coordination committee is formed with representatives from MGLSD, MoH, MoES, MoFPED, MoJCA, Office of the Prime Min- ister, NCD, NUDIPU, mine/ERW survivors, and DPOs, will meet on a regular basis to monitor and update the objectives and activi- ties of the Comprehensive Plan for Victim Assistance. MGLSD, in collaboration with other relevant ministers and actors in the disability sector, will seek the assistance of a qualified con- sultant to coordinate the drafting of an interim report on progress. MGLSD, in collaboration with other relevant actors including NUDIPU, DPOs and NGOs, will lobby the government to ratify the Convention, and raise aware-	



# Part 6: Laws and Public Policies

Goal	Status	Objectives	Plans to achieve objectives	Funding needs
	National Legal Framework The Uganda Constitution (1995) recognises the rights of PWDs and provides the basis for the enactment of laws and development of policies that address their concerns. The Constitution provides for fair representation of PWDs and recognition of their rights to respect and human dignity, and promotion of the development of a sign language for the deaf. Furthermore, it enjoins the country to take affirmative action to redress the imbalances that exist against PWDs. Uganda is one of the few countries in the world to recognize sign language as an official lan- guage in its Constitution. Other laws include: The Uganda Foundation for the Blind Act, 1954 (Cap 58) which provides for the establishment of a trust to promote the welfare, education, training and employment of the blind. The Parliamentary Elections Statute of 1996 provides for 5 representatives of PWDs in Parliament, at least one of whom should be a woman and the use of a sign language where applicable;	<ul> <li>Monitor and evaluate the implementation of Uganda Comprehensive Plan of Action for Victim Assistance 2008-2012 on an ongoing basis.</li> <li>Assess progress in the implementation of the Plan of Action for African Decade of the Disabled 2000-2009 by end of 2008.</li> <li>Ratify the Convention on the Rights of Persons with Disabilities by 2008</li> <li>Educate persons with disabilities, including landmine survivors, and the community at large on the existing legislation and the Convention regarding the rights of persons with disabilities, on an ongoing basis.</li> </ul>	ness in the general public through a campaign using radio, television, print media, and workshops, and prepare a Cabinet Memorandum on the Convention and take steps for ratification. MGLSD, in collaboration with other relevant actors, will develop a document which simplifies and translates the laws into local languages and accessible formats including Sign language, tactile and Braille materials. Total Funding Needs	2,954,684

## **APPENDIX B**

#### Programme for Comprehensive Planning Workshop for Landmine Victim Assistance In Uganda

Date: 7-9 August 2007 Venue: Speke Resort Hotel, Munyonyo

#### Day 1: 7 August 2007

Time	Activity	Speaker/Facilitator
08:30-09:00	Registration	
09:00-10:00	<ul> <li>Climate Setting</li> <li>Welcome and Introductory Remarks</li> <li>Introduction to the Comprehensive Planning Process</li> <li>Introduction of selves and the Agenda</li> <li>Objectives</li> </ul>	Mr. Herbert Baryayebwa Commissioner Disability and Elderly Ministry Gender, Labour and Social Development
	<ul> <li>Over view of mine action</li> <li>Overview of the key elements of victim assistance.</li> </ul>	Mr. Carlos Twesigomwe Commissioner Disaster Preparedness, Relief and Refugees Office of the Prime Minister
10:30-11:30	<ul> <li>Official Opening</li> <li>Remarks by Resident Representative UNDP</li> <li>Remarks by the Permanent Secretary Ministry of Gender, Labour and Social Development</li> <li>Keynote: Introduction to the Mine Ban Treaty and Victim Assistance</li> <li>Remarks by Hon Minister of Gender, Labour and Social Development</li> <li>Speech by H.E. The Vice-President of Uganda</li> </ul>	Sheree Bailey Implementation Support Unit, Geneva International Centre for Humanitarian Demining

The Uganda Comprehensive Plan of Action on Victim Assistance: 2008 - 2012

11:30-11:45	Coffee/Tea Break	
11:45-12:30	International context	
	<ul> <li>Work of the Co-Chairs of the Standing Committee on Victim Assistance and Socio-Economic Reintegration and their objectives</li> </ul>	Markus Reiterer, Deputy Permanent Representative of Austria to the Conference on Disarmament, Co-Chair of the AP Mine Ban Convention's Standing Committee on Victim Assistance and Socio-Economic Reintegration
	<ul> <li>Presentation on the Convention on the Rights of Persons with Disabilities</li> </ul>	Mr. Herbert Baryayebwa Commissioner for Disability and Elderly
	– Discussion	
12:30-13:30	National context	
	<ul> <li>Legislation and policy</li> </ul>	Mr. Jack Mirembe Ministry of Gender, Labour and Social Development
	<ul> <li>Early return and resettlement internally displaced persons</li> </ul>	Mr. Apollo Kazungu Deputy Commissioner Disaster Preparedness, Relief and Refugees
	<ul> <li>Early return and resettlement concerns of persons with disability including landmine survivors, war disabled and elderly</li> </ul>	Ms. Beatrice Kaggya Ministry of Gender, Labour and Social Development
13:30-14:30	Lunch Break	
14:30-16:00	<ul> <li>Each organizations working within victim assistance has prepared presentation of under two pages and ten minutes to summarize</li> <li>Current activities</li> <li>How coordinate with ministries</li> <li>How fits into multi sectoral approach</li> </ul>	Facilitator: Mr. Vicent Woboya National Coordinator Uganda Mine Action Centre Each organisation who hands in a paper will be given the floor to present maximum of ten minutes. Accrediated partners: CPAR, UNDP, AVSI, World Vision

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16:00-17:00	Workshop process	Working Groups
	<ul> <li>Review of Zagreb Report for Uganda</li> <li>Introduction to working groups</li> <li>Discussion</li> </ul>	Facilitator Sheree Bailey Identify Breakout Areas for Groups
	<ul> <li>Divide into Working Groups</li> <li>1. Emergency, Continuing Medical Care and Physical Rehabilitation</li> <li>2. Psychological and peer support</li> <li>3. Social Support including CBR and Economic Support</li> <li>4. Data collection, Legislation and Policy and Convention, Ratification and Human Rights</li> <li>5. Victim Assistance as a Development Issue and Integration into National Priority Strategic Plans</li> </ul>	Nomination by working group of chair and reporteur in each group
	Homework sessions	

#### Day 2: 8 August 2007

ay 2. 0 August 2007				
Time	Activity	Speaker/Facilitator		
09:00 - 11:00	Working Group Activities	Nominated Chair and Reporteur each group		
11:00 - 11:15	Coffee/Tea Break			
11:15 - 13:00	Working Group Activities	Nominated Chair and Reporteur each group		
13:00 - 14:00	Lunch Break			
14:00-17:00 or until task complete	Working Group Activities	Nominated Chair and Reporteur each group		
E v e n i n g sessions	Workshop Reporteurs work with group leaders and team to put activities into format for presentation and put onto computers Landmine survivors organize Testimonies and Experiences for closing	Mr. Alphonse Ejoru Mt. Mukasa Apollo Chair and Reporteur each working group		

#### Day 3: 9 August 2007

Time	Activity	Speaker/Facilitator
08:30 - 09:00	Working Group complete	Working Groups
	work with Reporteurs so all	
	discussion points on computers	Reporteurs
	for presentation	
09:00 - 09:30	Emergency + Continuing	Group Chair
	Medical Care + Physical	
	Rehabilitation – Working	Facilitator Dr. Bubikire Stanley
	Group presentation	Ministry of Health
	Discussion	

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	09:30-10:00	Psychological and Peer	Group Chair	
		Support Working Group		
		presentation	Facilitator Margaret Arach	
			Ambassador International Campaign to	
		Discussion	Ban Landmines	
	10:00-10:30	Social Support ,CBR and	Group Chair	
		Economic Support Working	_	
		Group presentation	Facilitator Jack Mirembe	
		Discussion		
	10:30-11:00	Data Collection + Legislation	Group Chair	
		and policy + Convention		
		on Rights of Persons with	Facilitator Ms. Christine Matovu	
		Disabilities – Working Group	Action on Disability and Development	
		presentation		
		Discussion		
	11:00-11:30	Coffee/Tea Break		
	11:30-12:00	Victim Assistance as a	Group Chair	
		Development Issue and		
		Integration into National	Facilitator Mr. Vicent Woboya	
		Priority Strategic Plans	Uganda Mine Action Centre	
		Working Group		
		Victim Assistance as a Cross		
		Cutting Issue		
		Discussion		
	12:00-13:30	Next steps – Finalization of	Facilitator Sheree Bailey	
		Uganda Plan of Action		
		Discussion		
	13:30-14:30	Lunch		
	14:30-15:30	Preparing for Closing		
		<ul> <li>Testimonies and</li> </ul>	Two presentors elected by landmine	
		facilitation of landmine	survivors	
		survivors		

15:30-17:00	Closing Ceremony	
	Testimonies and Experiences	by Landmine Survivors
	Summary of Draft Comprehensive Plan and Ways Forward	Group Leader Elected by Workshop
	Remarks by Co-Chair of Standing Committee on Victim Assistance	Markus Reiterer
	Remarks by Hon Minister of State for Elderly and Disability Affairs	
	Remarks by Hon Minister of Health	
	Speech by Guest of Honour Rt Hon Prime Minister	
17:15-19:00	Cocktail	

Day 4: 10 August 2007 Time	Activity	Speaker/Facilitator
08:30-11:00	Check Out and Shuttle to Bus Stations	Schedule developed

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## **APPENDIX C**



Remarks by;

Mr. Athman Kakiva United Nations Development Programme Resident Representative a.i.

At the Comprehensive Planning Workshop On Landmine Victim assistance

> 7 August 2007 Munyonyo, Uganda

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Mr. Athman Kakiva United Nations Development Programme Resident Representative a.i.

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Your Excellency, the Vice-President of Uganda, Ministers in the Government of Uganda, Members of Parliament, Permanent Secretaries, The Deputy Permanent Representative of Austria on Disarmament and Co-chair of the Mine Ban Treaty Committee on Victim Assistance Victim Assistance Focal Point of the Implementation Support Unit at the Geneva International Centre for Humanitarian Demining, Heads of Institutions and Departments, Representatives of Disabled Peoples Organisations, Invited Guests, Ladies and Gentlemen:

It is an honor for me to join you here today in this important activity for victim assistance.

Landmines are victim triggered weapons that injure or kill on contact. They are indiscriminate by nature, making no distinction between combatants, farmers at work, or children at play. Nor do they cease to be a threat when a conflict has ended. Because landmines pose an immediate threat to life and limb, they are and serious obstacles to sustainable development, remaining in the ground for years – often decades – after conflicts cease.

Landmines and explosive remnants of war presently affect 80 countries, directly killing and maiming 15,000 to 20,000 people annually, more than 80% of whom are noncombatants. They render land unusable and affect a broad variety of development sectors, including agriculture, health, education, water supplies, infrastructure, industrial and commercial areas and domestic and foreign investment. Thus, mine action is both humanitarian and developmental in nature. The mine action community seeks to re-create an environment in which people can live safely, free to advance their economic and social well-being and in which landmine survivors are reintegrated into society as full, productive members.

One of the issues that has clearly emerged over time is that the landmine problem is complex in nature and requires a multi-dimensional and comprehensive response. Therefore, five distinct pillars have been developed and these areas are:

- 1. Demining,
- 2. Mine risk education,
- 3. Victim assistance,
- 4. Stockpile destruction and
- 5. Advocacy.

UNDP currently provides mine action advisory support to 27 mine-affected states through its country offices and the Mine Action Team of UNDP's Bureau for Crisis Prevention and Recovery. UNDP supports the efforts of mine-affected countries guided by six key 'development drivers', which are in line with the organisation's corporate work plan. The development drivers are:

- 6. Developing national capacities,
- 7. Enhancing national ownership,
- 8. Advocating for and fostering an enabling policy environment,

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- 9. Seeking south to south solutions,
- 10. Promoting gender equality and
- 11. Forging partnerships for results

UNDP believes that national ownership is paramount. As in so many other areas, mine action achieves the most enduring results when it is country-led and supported with domestic resources. To this end the UNDP Country Office in 2005 initiated a project to build capacity within the Government of Uganda. Since then, the Government has initiated gains to move mine action ahead.

The year 2006 was important for mine action as the National Mine Action Steering Committee was formed and demining was initiated. Needs assessments were also started to define where suspected hazardous areas are located. An important action was the establishment of the Uganda Mine Action Centre. This is a partnership between the Office of the Prime Minister and UNDP. During 2006 UNDP and the Geneva International Centre for Humanitarian Demining trained multiple persons on the Information Management System for Mine Action. This system (IMSMA) was piloted and fully installed, providing Uganda with a state of the art tool.

In 2006, mine action was integrated into other development sectors such as the return of internally displaced persons, and the phrase *Mine Action for a Safe and Protected Return* became much more of a reality. Two multi purpose teams initiated work in areas of return. Two additional multi-purpose teams started work in 2007.

UNDP further sought ways of supporting and developing a national structure for victim assistance. The arrival of the technical advisor initiated a process to identify the national framework on which victim assistance could build. This task has successfully built up to this important workshop to develop a strategic plan in victim assistance.

Ladies and gentlemen, the United Nations has also led a process to develop an International Convention for the Rights of Persons with Disabilities. As Uganda has become a signatory to this convention, it is envisaged that there will be a broadening of victim assistance in the future. The UNDP Country Office encourages this shift and will work closely with headquarters and the Government of Uganda to make it a reality.

UNDP also encourages the integration of victim assistance into development programmes. The will of the Government of Uganda and the commitment to the Anti Personnel Mine Ban Convention is a secure sign that victim assistance in the country has gained equal attention to the other pillars of mine action. This alone is a major achievement and a possible way forward for other mine affected countries in Africa.

As I end my brief remarks, I would like to urge each participant to work hard in this strategic planning process. It is through such cooperation and participation that national ownership is forged, and I wish you every success. We look forward to witnessing the results of the Comprehensive Plan.

Thank you for your kind attention.

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## **APPENDIX D**



**GOVERNMENT OF UGANDA** 

Remarks by;

Ms. Christine Guwatudde Kintu Permanent Secretary Ministry of Gender Labour and Social Development

> On the Occasion of the Opening of the Comprehensive Planning Workshop On Landmine Victim assistance

> > 7 August 2007 Speke Resort and Conference Center, Munyonyo - Kampala Uganda

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- Your Excellency, The Vice-President of Uganda,
- Honorable Ministers,
- Members of Parliament,
- Permanent Secretaries,
- The Deputy Permanent Representative of Austria on Disarmament/Co-chair of the Mine Ban Treaty Committee on Victim Assistance
- Victim Assistance Focal Point of the Implementation Support Unit at the Geneva International Centre for Humanitarian Demining,
- Heads of Institutions and Departments
- Representatives of Disabled Peoples Organizations,
- Invited Guests
- Ladies and Gentlemen

First of all, let me take this opportunity to welcome you to this very important planning workshop on landmine victim assistance. You will agree that, this is the first of its kind to be organized in Uganda.

I wish to extend my gratitude and appreciation to Ms. Sheree Bailey, Victim Assistance Focal Point of the Implementation Support Unit at the Geneva International Centre for Humanitarian Demining, and Mr. Markus Reiterer, The Deputy Permanent Representative of Austria on Disarmament/Co-chair of the Mine Ban Treaty Committee on Victim Assistance for identifying Uganda as the venue and for particularly coming physically to facilitate during this planning workshop.

As you are aware, this is a virgin area and therefore, I urge the participants to utilize their expertise and rich experiences to develop a realistic plan for the benefit of landmine survivors and other persons with disabilities.

There is no doubt that this comprehensive plan on landmine victim assistance will contribute a lot towards the implementation of the Social Development Sector Strategic Investment Plan (SDIP). The SDIP was developed to promote issues of social protection, gender equality, equity, human rights, culture and decent work condition. It focuses on the empowerment of different groups such as women, children, the unemployed youth, internally displaced persons, the elderly and persons with disabilities. These groups are often marginalized or excluded from the benefits of development and are particularly vulnerable to exploitation and income shocks.

Overall Objective of the workshop:

The overall objective of the workshop is to enable the Government of Uganda, through line ministries, in collaboration with disabled peoples' organizations and other key stakeholders, to develop a comprehensive plan of action for 2008-2012 to address the concerns and needs of landmine survivors, other persons with disabilities and the elderly. The plan of action will be presented to the eighth Meeting of the States Parties (8MSP) to the Anti- Personnel Mine Ban Treaty in November 2007.

Specific Objectives and Outcomes of the Workshop:

To raise awareness on Uganda's obligations as a State Party to the Anti-Personnel Mine Ban Treaty in relation to victim assistance.

The Uganda Comprehensive Plan of Action on Victim Assistance: 2008 - 2012

To raise awareness on obligations within the Convention on the Rights of Persons with Disabilities and responsibilities as a States Party.

To raise awareness and mainstream concerns and needs of landmine survivors and other persons with disabilities into sectoral plans and programmes.

The Department of Disability and Elderly promotes and supports interventions that foster opportunities for poverty full enjoyment of economic, cultural, civic and social rights with particular emphasis on persons with disabilities and older persons. Therefore, the outcomes of this workshop will strengthen the mandate of the Department.

These will enable Uganda become a society that understands its obligations towards the rights, concerns and needs of the Landmine Survivors including other Persons with Disabilities.

To plan for active participation and integration of landmine victims and other persons with disabilities in the cultural, political, social and economic processes. This will enable Uganda realize a society that involves Landmine Victims, other persons with disabilities and the Elderly into cultural, political and economic processes.

To establish a framework of rapid response to support landmine survivors and persons with disabilities in emergency and conflict situations.

To define the role of landmine survivors within the disabled peoples' forum in Uganda and look at strengthening working relationships together.

To identify strategies for effective implementation and sustainability of victim assistance programmes.

These will help in ensuring that existing health care and social service systems, rehabilitation programmes and legislative and policy frameworks are adequate to meet the needs of all citizens – including landmine victims and people with disabilities.

Expected output:

A comprehensive plan of action on Landmine Victims Assistance in Uganda.

With these few remarks, I wish you fruitful deliberations during the workshop.

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## **APPENDIX E**



Remarks by;

## Hon Minister of Ministry of Gender Labour and Social Development

On the Occasion of the Opening of the Comprehensive Planning Workshop On Landmine Victim assistance

> 7 August 2007 Speke Resort and Conference Center, Munyonyo - Kampala Uganda

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- Your Excellency, The Vice-President of Uganda,
- The Deputy Permanent Representative of Austria on Disarmament/Co-chair of the Mine Ban Treaty Committee on Victim Assistance
- Victim Assistance Focal Point of the Implementation Support Unit at the Geneva
- International Centre for Humanitarian Demining,
- Cabinet Ministers,
- Representatives of UN Agencies,
- *Members of Parliament,*
- Permanent Secretaries
- Distinguished Participants
- Ladies and Gentlemen

It gives me much pleasure to be present to this first ever occasion on the African continent. Our task is to develop a Comprehensive Planning Framework on Victim Assistance over the next few days. On behalf of the Ministry and on my own behalf, I warmly welcome your Excellency the Vice President, the various dignitaries, all the participants and wish you successful deliberations.

First and fore most I wish to thank the Government of Austria, UNDP, the Norwegian Association of the Disabled for funding this workshop. We also thank the organizers for selecting Uganda to be the first country to draw this plan in Africa.

The importance of this workshop can not be underrated as it is going to;

- raise awareness on the situation, needs and concerns of landmine survivors and other persons with disabilities,
- link with the existing International and National Laws currently in place,
- identify tasks ahead and
- lay strategies for achieving them.

I believe that what will be generated at the end of this workshop will help all stakeholders to return home with a package that will assist in mobilizing resources for service delivery to persons with disabilities including landmine survivors.

The mandate for victim assistance falls securely within the roles and responsibilities of the Ministry of Gender, Labour and Social Development. We appeal to each agency present that in the future you coordinate and build a partnership with my Ministry. This technical coordination role in victim assistance will be an area of increasing priority for my Ministry in collaboration with the Office of the Prime Minister and the Ministry of Health. The Mine Ban Treaty obligations are a responsibility of the Government of Uganda as the States Party. In victim assistance most mandates fall onto the Ministry of Gender, Labour and Social Development. Your willingness to work and coordinate together are paramount.

I have noted with appreciation the programme and the broad thematic areas that concern livelihoods, reintegration and rights of landmine survivors. I also note that there is a broadening occurring so that the programmes look at the most vulnerable including the war disabled, persons with disability and the elderly.

I would like to emphasize three underlying principles for consideration while you draw this plan. The principles to build upon are; ensuring participation of landmine survivors, empowerment strategies and utilizing a human rights based approach. I sincerely hope this workshop has sought to have the active involvement of landmine survivors and persons with disability. The development of an Association of Landmine Survivors, war disabled and elderly should be encouraged and persons fully trained to empower them to demand for services that improve their livelihoods. The link with these organizations into the broader persons with disability movement should also be encouraged. The development of this comprehensive plan and its implementation should add

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value to the lives of landmine survivors. The plan should be human rights based in line with the International Convention and portray the outcomes of activities implemented.

Ladies and gentlemen, to me this is yet another profound achievement of the Government of Uganda to reiterate its commitment to the peace process. The Ministry would like to highlight concern for this vulnerable group to ensure that Internally Displace landmine survivors, persons with disabilities and elderly can enjoy their right to voluntary return to their homes as specified in the IDP Policy.

These actions do not stand alone but are obligations of the Anti-Personnel Mine Ban Treaty which Uganda signed on 3<sup>rd</sup> December 1997, ratified on 25<sup>th</sup> February 1999 and became an Official States Party on 1<sup>st</sup> August 1999. In addition, Uganda has recently signed the Convention on the Rights of Persons with Disabilities and Optional Protocol which will add breadth and depth to the responsibilities within victim assistance.

The legal framework in Uganda has multiple policies and laws that complement the international obligations. A number of laws and policies exist with high relevance, of particular I note: the National Policy for Internally Displaced Persons which has particular sections on vulnerable populations. A Mine Action Policy has been approved and is currently under review to respond to the five pillars with victim assistance included. Victim Assistance also cross cuts into multiple other legal instruments in place including;

- The Policy on Disability which is consistent with the United Nations Standard Rules for Equalization and Opportunities for Persons with Disability,
- The National Planning Framework such as the Poverty Eradication Action Plan, the Social Development Strategic Investment Plan which addresses major challenges of inequality, unequality, exclusion, unemployment, low productivity among persons with disability and other vulnerable groups.
- The Persons with Disability Act was accented to in June 2006 by his Excellency the President. This Act is against all forms of discrimination against persons with disability and with set penalties.

As you are aware, disability transcends all sectors. This calls for all stakeholders such as Government Ministries, Local Government, Civil Society Organisations, Persons with Disabilities themselves, their families, communities and the private sector to make concerted efforts to improve the wellbeing of the landmine survivors, war disabled and elderly. This is a most vulnerable group who requires affirmative action in the early return and resettlement process and also reintegration in their communities. This work should be based on level of need.

I am convinced that this joint planning workshop will activate the various concerns of landmine survivors which should be undertaken in various mandates of all stakeholders present. My ministry encourages that the needs of landmine survivors move to the next level of understanding and integrate into your development plans.

The Government fully supports this process therefore, I appeal to our development partners to take a step further and assist in the mobilization of resources so that the plan becomes operational. This should not be left to Government alone.

I once again thank our development partners who have contributed to this workshop, the facilitators who have traveled from far to enable it to take place and Jane Brouillette, the UNDP technical advisor on victim assistance, who has been steering this process. Last but not least I thank each one of you for giving your time and prioritizing this important process. The final message to you is "a good environment for persons with disability is a better environment for all".

#### FOR GOD AND MY COUNTRY

The Uganda Comprehensive Plan of Action on Victim Assistance: 2008 - 2012

### **APPENDIX F**



Remarks by;

## H.E. The Vice-President of Uganda

On the Occasion of the Opening of the Comprehensive Planning Workshop On Landmine Victim assistance

> 7 August 2007 Speke Resort and Conference Center, Munyonyo - Kampala Uganda

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- Honourable Ministers,
- Members of Parliament,
- Permanent Secretaries,
- The Deputy Permanent Representative of Austria on Disarmament/Co-chair of the Mine Ban Treaty Committee on Victim Assistance
- Victim Assistance Focal Point of the Implementation Support Unit at the Geneva International Centre for Humanitarian Demining,
- > Heads of Institutions and Departments
- > Representatives of Disabled Peoples Organisations,
- > Invited Guests
- Ladies and Gentlemen

It gives me much pleasure to preside over the opening ceremony of this very important planning workshop on landmine victim assistance.

As a State Party to the Anti Personnel Mine Ban Treaty "*Convention on the Prohibition of the Use, Stockpiling, Production and Transfer of Anti Personnel Mines and Their Destruction*" Uganda has legal mandate to put in place structures and give direction to all activities in mine action, including victim assistance.

Uganda was one of the first countries in the region to become part of the Mine Ban Treaty. The timeline of action for Uganda was:

- Signing the Treaty on 3<sup>rd</sup> December 1997
- Entry into force of obligations as a States Party on 1<sup>st</sup> August 1999

Consequent upon this, the National Mine Action Programme Uganda was established at the Office of the Prime Minister in July 2005 with the overall responsibility to collect data and address the humanitarian and social economic problems caused by landmines and explosive remnants of war. One of the primary functions of the mine action programme is to coordinate the key line ministries and other stakeholders to integrate five pillars of mine action into other development programmes through a National Mine Action Steering Committee.

The five pillars of mine action include:

- demining,
- mine risk education,
- victim assistance,
- stockpile destruction and
- Advocacy.

Uganda is one of the twenty four States Parties that have reported responsibility for significant numbers of landmine survivors. The affected States Parties report actions to the Standing Committee on Victim Assistance as an obligation to the Mine Ban Treaty. The Government is committed to put in place a Comprehensive Plan of Action for Landmine Victims and hopes it will receive international support.

Ladies and Gentlemen for a long time large communities in Uganda have at one time or the other been forced or obliged to flee their homes or places of habitual residence. From 1979 up to today over 1/3 of Uganda's population has been affected by civil conflict and cattle rustling.

As you all know the dictatorial rule of Idi Amin 1971-1979, the 1981-1985 war in Luwero Triangle, the insurgency in the districts of Soroti and Kumi district of 1987 left a substantial number of people

internally displaced. As we gather here today in the districts of Gulu, Kitgum, Lira and Pader hundreds of thousands of people have been internally displaced for many years as a result of the "Holy Spirit Movement" rebel groups then later the Lords Resistance Army (LRA) of Joseph Kony. The LRA incursions into Teso and the Lango sub-regions caused massive displacement raising figures of internally displaced to almost two million.

Although the Government has always addressed the needs of internally displaced persons, through provisions of humanitarian assistance and overseeing their return, resettlement and reintegration, there has not been a programme focused on the plight of persons with disabilities including landmine survivors, particularly the children and elderly.

To address this, the NRM Government mandated Ministry of Gender, Labour and Social Development to coordinate issues of persons with disabilities including landmine survivors and elderly persons. One of the Ministry's functions is to advocate for the promotion and protection of the rights of the poor and vulnerable groups, including landmine survivors.

The Government has solved the issue of emergency in northern Uganda with two prolonged solutions. We have strategically changed from gunpowder to peace based solutions. I want to assure you that we shall continue talking peace until the solution for Northern Uganda is finalized, in order to achieve permanent solutions of early return, resettlement and social integration.

When looking at solutions by the Government, this workshop is of utmost importance for some of our most vulnerable citizens. Therefore, I appeal to each participant to take this role seriously and draw up a comprehensive plan for this most vulnerable group.

I would like to assure you that steps are underway to ratify the Convention on the Rights of Persons with disabilities as soon as possible. I want to encourage you all to take seriously the opportunity presented by this workshop to move forward the process of developing benchmarks and a clear plan of action to address the needs of people with disabilities in Uganda that is in line with the above Convention. Once this is achieved the objectives and plans for each concerned stakeholder will be set and they will take up responsibility of their outcomes.

In my view I would like to suggest that the Comprehensive Plan for Landmine Victim Assistance should include:

- understanding the extent of the challenge faced;
- emergency and continuing medical care;
- physical rehabilitation;
- psychological support and social reintegration;
- economic reintegration;
- laws and public policies.

I am pleased to inform you that all areas of victim assistance conform to the Government's commitment of making sure that all persons with disabilities, including landmine survivors, are empowered in order to participate in all matters concerning them in order to fulfill the National Planning Framework of Poverty Eradication Programme. In order to reassure all State Parties of our determined concern to victim assistance, the Government of Uganda was one of the first countries to sign the UN Convention on the Rights of Persons with Disabilities and Optional Protocol on 30<sup>th</sup> March 2007. The Government has already put in place The Persons with disabilities Act to operationalise the promotion, protection and ensure full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, including landmine survivors, and to promote respect for their inherent dignity. To this end therefore, I am very pleased to note that the primary aim of this Comprehensive Planning Workshop is to enable the Government, in collaboration with relevant ministries and other key stakeholders with particular focus on the disabled peoples' movement, to develop a plan of action for 2008-2012 to address the needs to landmine survivors and others persons with disabilities including children and the elderly.

Similarly, I want to assure you that Government's political and administrative support will be extended to service providers in all areas of Mine Action including victim assistance who coordinate and work with us as a States Party.

The Government of Uganda will continue to build on existing international humanitarian laws and human rights instruments and relevant laws to make sure that the victim assistance programmes become a reality. As you all know, we can not stop the occurrence of natural hazards and some of the human-induced crisis. However, with collective efforts, collaboration and proper planning, we can reduce their chances of turning into disasters and minimize their impact on the affected population including some of the most vulnerable, persons with disabilities including landmine survivors, children and elderly.

In conclusion, the Government is very grateful to the Anti-Personnel Mine Ban Treaty Standing Committee on Victim Assistance and the Convention Implementation Support Unit for selecting Uganda. Noteworthy to mention is the Government of Austria, the Geneva International Centre for Humanitarian Demining, the United Nations Development Programme and the Norwegian Association of the Disabled who have assisted in the financing of this event.

I personally thank Ms. Sheree Bailey and Mr. Markus Reiterer in taking time to come to be with us on this occasion and all those who have assisted in organizing this workshop.

Finally, I would like to extend my gratitude to the Ministry of Gender, Labour and Social Development and the office of the Prime Minister for organizing this workshop that has brought together different stakeholders.

I would also like to extend my appreciation to the development partners for sponsoring this important workshop.

It is through such concerted effort that the concerns and needs of landmine survivors and other persons with disabilities will be effectively tackled.

I now take the honour to declare this workshop open.

#### FOR GOD AND MY COUNTRY.

### **APPENDIX F**



Remarks by;

H.E. The Vice-President of Uganda

On the Occasion of the Opening of the Comprehensive Planning Workshop On Landmine Victim assistance

> 7 August 2007 Speke Resort and Conference Center, Munyonyo - Kampala Uganda

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Your Rt. Hon, The Prime Minister of Uganda, The Deputy Permanent Representative of Austria on Disarmament/Co-chair of the Mine Ban Treaty Committee on Victim Assistance Victim Assistance Focal Point of the Implementation Support Unit at the Geneva International Centre for Humanitarian Demining, Cabinet Ministers, Representatives of UN Agencies, Our Donor Partners Members of Parliament, Permanent Secretaries Distinguished Participants Ladies and Gentlemen

It gives me much pleasure to have been given the opportunity to develop and realize a Comprehensive Plan. This workshop will bear great fruits in the future as the last three days have shown a commitment and a partnership that embraces "all" persons including those who have been injured by landmine or unexploded remnants of war. Within large groups of vulnerable persons we are required through our mandate at the Ministry of Gender, Labour and Social Development to address the most vulnerable. Responding to this call has been the guiding principle in realizing this workshop.

This workshop has been an effort of 60 agencies, departments and organizations coming together to build a strategy in victim assistance that is in line with international obligations of the Anti-Personnel Mine Ban Treaty and the Nairobi Action Plan. In addition, all areas will be reviewed in relation to the International Convention on Persons with Disabilities and laws and policies in Uganda. We thank each of the representatives over the past three days for their commitment and contribution towards the successful outcome. I hope the ideas generated from this workshop will help you to improve your performance in the struggle to address the concerns and needs of the landmine survivors and other vulnerable groups in our communities.

We are pleased to state that this is the first ever Comprehensive Planning Framework on the African Continent. My Ministry thanks the Anti Personnel Mine Ban Treaty's Standing Committee on Victim Support for this opportunity. On behalf of the Ministry and on my own behalf, I deeply thank both Markus Reiterer and Sheree Bailey for your commitments to finding solutions and supporting these actions world wide.

I take this opportunity to welcome the Chief Guest to this closing and welcome our current and potential partners. I thank the Government of Austria, UNDP, and the Norwegian Association of Disabled for funding this workshop.

The importance of this workshop can not be underrated as it has raised awareness on the situation, needs and concerns of landmine survivors and other persons with disabilities, amidst the existing International and National Laws in place, identifed tasks ahead and laid strategies for achieving them. This is timely with the advancement of the peace negotiations with the LRA.

Victim assistance is one of the the five pillars of mine action. Uganda ,as a States Party, to the Anti-Personnel Mine Ban Treaty has an obligation to victim assistance. Uganda is one of the twenty four States Parties that have reported responsibility for significant numbers of landmine survivors. My Ministry reports to the Standing on Victim Assistance two times per year. The Government is committed to put in place a Comprehensive Plan of Action for Landmine Victims and hopes it will receive international support to fulfill the obligation to the Mine Ban Treaty.

here have been ongoing efforts to monitor internally displaced landmine survivors, persons with disabilities and the elderly in the early return and resettlement process. Victim assistance is an area which can lubricate the process of early return and resettlement of internally displaced landmine survivors, persons with disabilities and the elderly in the IDP camps to access their right to return.

Government has the conviction that, with a comprehensive plan of action on victim assistance in place concerns and needs of the Land mine survivors and other persons with disability shall be effective mainstreamed into the development plans of all sectors. Victims assistance particularly focuses on the on the plight of persons with disabilities including landmine survivors, children and elderly.

I have been briefed on the activities and objectives of victim assistance that you have managed to incorporate in the comprehensive plan of action during your stay here and I strongly believe that when implemented, the lives of these vulnerable populations shall improve. They will share equal opportunities and become more productive for their self, community and national development.

Am proud to mention that victim assistance Programme conforms to the Government's commitment of making sure that all persons with disabilities, including landmine survivors, are empowered in order to participate in all matters concerning them in order to fulfill the National Planning Framework of Poverty Eradication Programme.

This Programme is also in line with the National Disabled Person's Act and the policy to operationalise the promotion, protection and ensure full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, including landmine survivors, and to promote respect for their inherent dignity.

There is no doubt that this comprehensive plan on landmine victim assistance will contribute a lot towards the implementation of the Social Development Sector Strategic Investment Plan (SDIP). The SDIP was developed to promote issues of social protection, gender equality, equity, human rights, culture, decent work condition and empowerment for different groups such as women, children, the unemployed youth, internally displaced persons, the elderly and persons with disabilities including Land mine survivors. These groups are often marginalized or excluded from the benefits of development and are particularly vulnerable to exploitation and income shocks.

Government expresses concerns on reports of potential segregation in areas of IDP return. I would therefore mention that, this comprehensive planning workshop came at opportune time to enable Government to sit with key stakeholders and lay strategies to harmonize the concerns of all those who have been affected the civil strive.

Am calling upon all our stakeholders, the development partners, the civil Society organizations to always support government efforts by way of advocacy and resource mobilization.

I wish to pledge Government support in building on the existing international humanitarian laws and human rights instruments and other relevant laws to make sure that the victim assistance programmes become a reality. As you all know, we can not stop the occurrence of natural hazards and some of the human-induced crisis. However, with collective efforts, collaboration and proper planning, we can reduce their chances of turning into disasters and minimize their impact on the affected population including some of the most vulnerable, persons with disabilities including landmine survivors, children and elderly.

The Government of the Republic of Uganda is very grateful to the Anti-Personnel Mine Ban Treaty

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Standing Committee on Victim Assistance and the Convention Implementation Support Unit for recognizing the problem of Antipersonnel mines and the Explosive remnants of War that the people of Uganda is experiencing. We are grateful to the Government of Austria, the Geneva International Centre for Humanitarian Deming, the United Nations Development Programme and the Norwegian Association of the Disabled who have assisted in the financing of this event.

I wish to pass my great appreciation towards Ms. Sheree Bailey, Mr. Markus Reiterer, Ms Jane Brouillette and Ms Joelsdottir for sacrificing their valuable time to come and provide us with technical support during this comprehensive planning workshop.

To the rest of the participants, I wish to thank you for the endless effort you have put in developing this comprehensive plan of action on land mine victim assistance Programme in Uganda. I wish all of you a safe journey back home.

I have the honour to declare this workshop closed.

#### FOR GOD AND MY COUNTRY

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## **APPENDIX H**

**GOVERNMENT OF UGANDA** 

Speech by;

Hon. Richard Nduhura Minister of State for Primary Health Care Ministry of Health

On the Occasion of the Closing of the Comprehensive Planning Workshop On Landmine Victim assistance

> 9 August 2007 Munyonyo Uganda

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#### MINISTER OF HEALTH'S SPEECH DURING THE CLOSING OF THE WORKSHOP ON VICTIM ASSISTANCE ON 9<sup>TH</sup> AUGUST, 2007 AT MUNYONYO RESORT HOTEL

**UN** Country Representative

UNDP Country representative

Hon. Members of Parliament here present

UNDP Technical Advisors for Mine Action/Victim Assistance

All participants.

I welcome and salute all of you in your respective capacities. I would like to thank you very much for having participated in this Comprehensive planning workshop for landmine victim assistance. Victim assistance is a key commitment of the government of Uganda to uplift the quality of life of the landmine survivors and persons with disabilities in general.

The role of the Ministry of Health is to ensure that all landmine survivors/PWDs have access to Rehabilitative Health Care Services.

In relation to the Landmine Action, the Ministry of Health is planning to:

- Establish the National Surveillance Network to identify landmine survivors and monitor their rehabilitative, social, economic and reintegration process back into their society.
- Ensure access to rehabilitative services by upgrading the orthopaedic facilities and therapies within the existing Ministry of Health structure.
- To strengthen the referral structure to ensure that the landmine survivors/PWDs can easily get access to rehabilitative services.

Landmines and their after effects are a worldwide problem which needs combined effort by government, collaborating organisations and development partners in order to reduce impact in the country. Landmines cause death, psychological torture, and disability in the affected communities. Therefore victims assistance in form of rehabilitation is necessary so as to restore their hope and physical capacity to engage in productive activities.

In order for the country to contribute positively to the achievement of the millennium development goals there must be deliberate effort to improve the livelihood of the landmine survivors/PWDs. This group of people constitutes a big proportion of the people living below the poverty line. Therefore it is important to streamline strategies to improve their independence and social-economic status.

Ministry of Health has already made significant achievements towards victim assistance and rehabilitation of PWDs although a lot more is still required

- In the area of Information Management System for Mine Action (IMSMA) one officer of the MOH was trained in Geneva on landmine data collection.
- Needs Assessment Survey was conducted in four districts of the country. The indictors to act as benchmarks for data collection were developed and have been pre tested.
- Five regional orthopaedic workshops to produce assistive devices have set up.

 Mental health care services have been established in the lower health centres in the country to carter for the mentally sick and pyscologically traumatised people

#### CHALLENGES

Although the Ministry of Health intends establish a National Surveillance System for Mine Action, those database is to be used to monitor the rehabilitative and social-economic reintegration of landmine survivors there is a challenge to mobilise resources to make it run.

The demand for rehabilitative health care services in the country is too high. The existing orthopaedic workshops are not in position to offer all the relevant services due to lack of the required machines, raw materials, personnel, and other facilities to meet the demand.

The referral system is still a challenge; many landmine survivors find it costly to travel to orthopaedic workshops and health centres to acquire the relevant rehabilitative services. Therefore this calls for community based rehabilitation approach to draw the services nearer to the PWDs.

#### RECOMMENDATIONS

- Increased resource allocation for land mine survivors database which will ease the planning process and service provision this needed.
- Networking and collaborative efforts by the different players needs to be strengthened
- Increase the capacity of orthopaedic workshops to meet the required demand for rehabilitative services.

I would like to thank the Ministry of Gender Labour and Social Development, Austrian Government and UNDP for organising this workshop. I also thank all of you participants for your constructive contributions

#### FOR GOD AND MY COUNTRY

#### Appendix G

#### Closing Speech by Marcus Reiterer: Standing Co-Chair Victim Assistance

Honourable Minister for Health, Honourable Minister of State, Honourable Members of Parliament, dear Landmine Survivors, Permanent Secretaries, Heads of Institutions and Organisations, Invited Guests, Friends and Colleagues,

Three days of intensive work are coming to their close. Three days in which we analysed, discussed, consented, dissented, evaluated and communicated.

Finally, we were able to come up with a good result. I am sure that now we have established a solid basis for a comprehensive plan for victim assistance. This will be the guiding instrument for support to landmine survivors here in Uganda.

I said, three days of intensive work are coming to their close, but in reality – we all know – the work will need to be continued. And, as we have seen quite some work remains. But now, you have identified your needs, your objectives and you have determined a framework to meet these objectives, these needs.

Ladies and Gentlemen,

Let me be very clear: Our work must not stop here. It is absolutely essential that now the findings of this workshop will be implemented on the ground. A plan must not remain just a plan. It needs to become reality!

I think this workshop has made the obvious even more visible: supporting survivors is a **team effort**, which requires **collaboration**, **consultation and coordination** by all relevant actors! And it requires continued determination and engagement of all these actors, including government institutions, NGOs, UNDP and other international agencies.

I was also impressed by the active role that was played by landmine survivors and other persons with disabilities during this workshop. Your participation and involvement is crucial for any progress. Who knows better than you yourself, what needs to be done to improve the quality of your lives? You are in fact ambassadors for all landmine survivors, which could not join us here.

Ladies and Gentlemen,

I would not want to leave your beautiful country without appropriately expressing my thanks and my gratitude. I wish to thank the government of Uganda for the warm hospitality I received here. But more importantly, I wish to commend the government – and you all – for the determination to improve the quality of life of landmine survivors and other persons with disabilities. And let me pay tribute to the political interest

that has been shown through the presence and active involvement of a number of parliamentarians.

I would like to express my appreciation for the hard work that has been carried out over the last days, most notably by

- the master of ceremony,
- the chairs of our plenary sessions,
- the chairs of the working groups and the rapporteurs,
- the sign and other interpreters, who enabled us to communicate with each other,
- the staff of the ministry of gender labour and social development, the office of the prime minister and the ministry of health.

My thanks also go to UNDP, and in particular to Jane Brouillette, who played a crucial role in the preparation and implementation of this workshop. Jane, I do hope that Ugandan landmine survivors will be able to count on your services also in the future.

Thanks also to the Norwegian Association of Disabled for supporting this workshop, particularly so that we can relax together this evening after some hard work.

Last but not least, I warmly thank Sheree Bailey of the Convention's Implementation Support Unit, who is working so hard for improving the life of landmine survivors all over the world.

Ladies and Gentlemen,

The Mine Ban Treaty has given a promise to survivors for a better life. In essence, the Treaty is a sign of hope for the world, for the victims of this odious weapon, the men, women and children wounded and maimed.

We are committed to do our share in keeping up this sign of hope and to do what we can, to assist the survivors is a desire that we all share: to live a good, productive and happy life.

I thank you very much and I wish you all the best.

#### **APPENDIX J** Comprehensive Victim Assistance Planning Workshop Munyonyo, Uganda 7-9 August 2007

#### INTRODUCTION TO THE ANTI-PERSONNEL MINE BAN CONVENTION AND VICTIM ASSISTANCE

**Presentation by** 



#### Sheree Bailey Victim Assistance Specialist AP Mine Ban Convention Implementation Support Unit Geneva International Centre for Humanitarian Demining

The Convention on the Prohibition of the Use, Stockpiling, Production and Transfer of Anti-Personnel Mines and on Their Destruction, or as it is more commonly known, the Ottawa Convention or the Anti-Personnel Mine Ban Convention, is unique. Not only is it one of the fastest global multilateral arms control treaties to enter into force, it is also the first in history to make provision for the victims of a particular weapon system.

The suffering of mine victims provided an impetus for efforts to ban antipersonnel landmines, and together with the combined efforts of individuals, humanitarian organisations, and pro-ban governments, the Convention entered into force on 1 March 1999: 153 States have now joined the Convention, including Uganda on 25 February 1999. The main obligations of the Convention can be summarised as: stop all use, production and transfer of antipersonnel landmines; clear all mined areas within 10 years of entry into force of the treaty; destroy all antipersonnel mines in stockpiles within four years of entry into force; provide mine awareness programs; and assist the victims.

Today I will focus on the last obligation: assisting the victims. Article 6.3 of the Convention obliges that "each State Party in a position to do so shall provide assistance for the care and rehabilitation, and social and economic reintegration, of mine victims...." This obligation is as relevant for Uganda which has the responsibility to care for all its citizens, including mine victims, as it is for a State Party in a position to provide financial resources to assist Uganda in meeting its obligations.

As previously noted, the Mine Ban Convention was the first disarmament treaty that aimed to assist the victims. But it was not clear what needed to be done? How should this be done? And who was ultimately responsible?

The First Review Conference, the Nairobi Summit on a Mine-Free World, from 29 November to 3 December 2004 reminded the international community that "[t]he very purpose of the Convention is to put an end to the suffering and casualties caused by antipersonnel mines." It provided an opportunity to formally clarify some of these questions, and to identify the key challenges to be addressed to fulfil the promise to mine survivors that the Convention implied.

A set of understandings were formally agreed to by the States Parties. These understandings included clarity regarding what was meant by a landmine victim, with landmine victims understood to be "those who either individually or collectively have suffered physical or psychological injury, economic loss or substantial impairment of their fundamental rights through acts or omissions related to mine utilization." That is, a broad approach to what is considered a landmine victim was accepted that includes the individual, their family, and their community, but with a clear understanding that the majority of attention must be focused on providing assistance to those individuals directly impacted by mines.

This matter called victim assistance was also clarified, with the States Parties agreeing that it included work in the following areas:

Understanding the extent of the challenges faced (for example through appropriate data collection);

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- Emergency and continuing medical care;
- Physical rehabilitation, including physiotherapy, prosthetics and assistive devices;
- Psychological support and social reintegration;
- Economic reintegration; and,
- The establishment, enforcement and implementation of relevant laws and public policies.

States Parties also adopted a clear understanding of principles to guide their efforts. Four principles are particularly important:

- Firstly, "....the call to assist landmine victims should not lead to victim assistance efforts being undertaken in such a manner as to exclude any person injured or disabled in another manner."
- Secondly, victim assistance "does not require the development of new fields or disciplines but rather calls for ensuring that existing health care and social service systems, rehabilitation programmes and legislative and policy frameworks are adequate to meet the needs of all citizens – including landmine victims."
- Thirdly, "assistance to landmine victims should be viewed as a part of a country's overall public health and social services systems and human rights frameworks;" and,
- Finally, "....providing adequate assistance to landmine survivors must be seen in a broader context of development and underdevelopment...."

States Parties acknowledged that all States have a responsibility to assist mine survivors, as it is a basic responsibility of a State to ensure the well-being of its population. However, 24 States Parties, including Uganda, have indicated that they have significant numbers of mine survivors and the "the greatest responsibility to act, but also the greatest needs and expectations for assistance" in providing adequate services for their care, rehabilitation and reintegration. These countries have become "a more focused challenge" for States Parties in the period up to the Second Review Conference in 2009.

The First Review Conference also adopted the ambitious five-year *Nairobi Action Plan* for the period 2005 to 2009. With respect to victim assistance, the *Nairobi Action Plan* aims to "enhance the care, rehabilitation and reintegration efforts" through eleven "actions". The Plan of Action commits affected States Parties to do their utmost to establish and enhance healthcare services needed to respond to the immediate and ongoing medical needs of mine victims; to increase national physical rehabilitation capacities; to develop capacities to meet the psychological and social support needs of mine victims; to actively support the socio-economic reintegration of mine victims; to ensure that national legal and policy frameworks effectively address the needs and fundamental human rights of mine victims; to develop or enhance national mine victim data collection capacities; and to ensure that in all victim assistance efforts, emphasis is given to age and gender considerations. Other States Parties committed to provide external support to assist affected States in the care, rehabilitation and reintegration of mine victims. All States Parties committed to monitoring and promoting progress in achieving the victim assistance goals and ensuring the effective participation of mine victims in the work of the Convention.

The work of the Standing Committee on Victim Assistance and Socio-Economic Reintegration has been integral to advancing understanding and identifying the needs in relation to mine victim assistance among the States Parties, as articulated in the Final Report of the First Review Conference, and beyond. This year Austria and Sudan are Co-Chairs of the Standing Committee. I will leave it to Markus Reiterer to talk more about the work of the Standing Committee but I will just briefly mention one aspect of this work.

One of the most ambitious undertakings by the Standing Committee started in 2005, under the leadership of Nicaragua and Norway, and has continued under subsequent Co-Chairs in 2006 and 2007. The primary aim of the Co-Chairs is to ensure the successful implementation of the Convention and to facilitate concrete progress in achieving the aims of the *Nairobi Action Plan* and as a consequence address the needs of landmine victims before the Second Review Conference in 2009 through the development and implementation of a plan of action for victim assistance. To facilitate this process, in early 2005 a comprehensive questionnaire was sent to the 24 most affected States Parties. The questionnaire included goals for each component of victim assistance

and called for responses to four key questions: what is the situation in 2005 in each of the six main thematic areas of victim assistance?; what does the state wish the situation to be in each of the six thematic areas by 2009?; what are the plans to achieve these objectives in each of the six thematic areas by 2009?; and what means are available or required to implement these plans?

In August 2005, Uganda submitted its response to the questionnaire which had been prepared by Dr. Bubikire from the Disability Prevention and Rehabilitation Section of the Ministry of Health in collaboration with other relevant ministries. A revised response was later submitted in November 2005 following a visit by Susan Walker on behalf of the Co-Chairs to assist Uganda in making its Victim Assistance objectives more specific, measurable, achievable, relevant, and time-based – or SMART. In December 2005, the *Zagreb Progress Report* adopted at the Sixth Meeting of the States Parties in Croatia, contained a lengthy annex which summarized the responses made by Uganda and most of the other relevant States Parties.

Uganda's objectives to meet the aims of the *Nairobi Action Plan*, as presented in 2005, were generally among the most comprehensive of any of the 24 relevant States Parties. However, the *Zagreb Progress Report* acknowledged that the questionnaire was "not an end-product but rather an initial step in a long-term planning and implementation process." Since 2005 considerable work has been done in Uganda on the development of legislation and policies to address the rights of persons with disabilities, but it is acknowledged that more needs to be done.

Ultimately, the responsibility for meeting the needs of the population lies with the State through coordination and collaboration between all relevant ministries. However, the work that is done in this workshop has the potential to assist Uganda achieve its goals, particularly to assist vulnerable groups in the mine-affected areas. Not only does this workshop provide a great opportunity for government ministries, international agencies, non governmental organisations, and survivors themselves to work together, it also provides an opportunity to assist Uganda to meet its obligations under international humanitarian law through the AP Mine Ban Convention and more importantly its responsibility to meet the needs of all its citizens, including mine survivors and other persons with disabilities.

My hope is that this workshop will be successful in taking the next steps by reviewing objectives and priorities over the coming years and developing a comprehensive plan of action that will be fully implemented and as a result, improve the quality of life of people with disabilities in Uganda; in particular those in the mine-affected areas.

Thank you.

#### APPENDIX K

#### **Remarks from the Attending Landmine Survivors**

Closing of the The Comprehensive Planning Workshop on Landmine Victim Assistance 7-9 August 2007 Munyonyo Uganda

Your Excellency, the Minister of Health and Your Honorable Minister of State for Elderly and Disability Affairs Members of Parliament, Permanent Secretaries, The Deputy Permanent Representative of Austria on Disarmament and Co-chair of the Mine Ban Treaty Committee on Victim Assistance Victim Assistance Focal Point of the Implementation Support Unit at the Geneva International Centre for Humanitarian Demining, Heads of Institutions and Departments, Representatives of Disabled Peoples Organisations, Invited Guests, Ladies and Gentlemen:

It has been an honor for each of us to have been invited to attend and fully participate in the Comprehensive Planning Workshop.

We are representatives for landmine survivors and have unanimously agreed that a way forward is through constant and ongoing dialogue and consultative meetings with us. Visits are highly encouraged to the landmine survivors to all parts of Uganda.

The general welfare of we the landmine survivors can be catered for and we request attention to two specific areas of focus. One is the need for transport and mobility appliances for freedom of movement so that we can be out with others, return and integrate with our communities. The second area which we require is ongoing medical treatment to remove any remaining shrapnel/ bomb splinters. We use our artificial limbs and over time they require repair and replacement. We humbly request that provision be made for this and that a referral be established to protect us in travel and at the workshop.

The future of children who are landmine survivors or children whose parents are survivors is an area we humbly request that you address. There is a need to establish provision for landmine survivors to open equal opportunities for access to vocational courses and skills training courses. It is encouraged that a scholarship fund and affirmative action be considered for higher education courses including secondary schools and Universities.

We the landmine survivors request that attention be given and actions established to address the standard of living. Most landmine survivors face additional issues of poverty. Shelter is a big issue for many of the landmine survivors we represent today. We request that development partners, the Government, INGO and NGO look into the quality of our shelters and consider permanent structures be constructed for better sustainability.

We the landmine survivors humbly suggest that if rebels are getting compensation then why are landmine survivors are being left out, when much more has been lost. Therefore, we request that compensation be made/given to landmine survivors and that a dialogue is opened which involves us.

We as landmine survivors do not want to see any more accidents by landmines and explosive remnants of war. There is a high need to strengthen and consolidate the demining activities and to ensure that demining work in the future clears dangerous areas in Kitgum and Pader Districts.

We finally request that the NGO's operating in the Northern part of Uganda should involve the survivors in their programmes, expecially those working for survivors.

Thank you

## APPENDIX M PARTICIPANT LIST

#### Comprehensive Planning Workshop on Victim Assistance in Uganda at Speke Resort & Conference Center, Munyonyo 7th to 9th August, 2007

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