

**Meeting of the States Parties to the Convention
on the Prohibition of the Use, Stockpiling,
Production and Transfer of Anti-Personnel
Mines and on Their Destruction**

12 October 2017

English only

Sixteenth Meeting**Vienna, 18-21 December 2017**

Item 11(a) of the provisional agenda

**Consideration of the general status and operation
of the Convention****Assisting the victims: Conclusions and recommendations
related to the mandate of the Committee on Victim Assistance**

**Conclusions and recommendations
Committee on Victim Assistance
(Belgium, Colombia, Croatia, Ecuador)**

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Afghanistan

1. The Committee welcomes the submission by Afghanistan of its Article 7 report for the calendar year 2016 containing updated information on its victim assistance activities. Based on the information provided, the Committee presents the following conclusions:

2. The Committee concluded that since 2001 the number of casualties fell significantly from a monthly average of 175 to 36. Since 2013 however, the number of casualties has risen to reach a monthly average of 142 in 2016. The Committee concluded that 60 percent of those casualties were caused by improvised anti-personnel mine (Pressure Plate IED) incidents with 1,023 civilian casualties reported from April 2016 to March 2017. The Committee noted that further information on the sex and age disaggregation of data related to victims would be welcome.

3. The Committee concluded that Afghanistan is acting upon its commitment under Action 14 of the Maputo Action Plan by reporting on the following enhancements that have been made or will be made to disability, health, social welfare, education, employment, development and poverty reduction plans, policies and legal frameworks needed to meet the needs of victims, and on budgets allocated for their implementation:

(a) A five year (2017-2022) Victim Assistance Plan was developed and shared with stakeholders. Afghanistan further reported that the Ministry of Public Health (MoPH) has developed a National Strategy for Disability and Rehabilitation 2016-2020. Furthermore, Afghanistan reports that the Ministry of Education has developed a National Strategic Plan (1396-1400) with a section on inclusive education. Afghanistan also reported that it has drafted a technical note for psychosocial counselling and peer support for its National Standards;

(b) A disability and community based rehabilitation task force has been in place for almost eight years and provides strong technical guidance to the MoPH. In 2016, six meetings of the disability taskforce were held and the highlight achievement was the reviewing and updating of the new disability and physical rehabilitation strategy (2016-2022) for the health sector;

(c) In 2016, the MoPH decided to change the strategy to national strategic plan in disability and physical rehabilitation which is not yet finalized. Afghanistan further reported that in 2016 non-technical and technical standards for physiotherapy and prosthetic and orthotic with the standards having been translated and reviews and are currently being approved by the MoPH;

(d) Victim assistance, along with other sectors of action of former UNMACA (UN Mine Action Centre for Afghanistan), has been transferred to DMAC (Directorate of Mine Action Coordination) during 2016 and the Ministry of Labour, Social Affairs, Martyrs and Disabled is the focal point for victim assistance issues.

4. The Committee welcomed the information provided by Afghanistan on this Action 14. In particular, the Committee noted that Afghanistan developed a new disability and physical rehabilitation strategy for the period 2016-2020. The Committee would welcome receiving a copy of this new strategy.

5. The Committee concluded that Afghanistan was acting upon its commitment under Action 15 of the Maputo Action Plan by reporting on a number of activities to increase availability of and accessibility to appropriate comprehensive rehabilitation services, economic inclusion opportunities and social protection measures for all victims, regardless of their gender and age including:

(a) Information on the Afghan Civilian Assistance Programme III (ACAP III) to support Victim Assistance / Disability activities of the UNMAS/DMAC with 2'734 teachers and 1'849 Community Health Workers (CHW) of the Ministry of Public Health trained on Victim Assistance/Disability in 19 Provinces;

(b) Coordination of Community Based Rehabilitation (CBR) by MoPH with the Ministry of Labour, Social Affairs, Martyrs and Disabled with is a well-established strategy

for inclusion, provision of equal opportunities and empowerment of persons with disabilities in 20 of 34 Provinces;

(c) Training in 2016 by the Disability and Rehabilitation Department (DRD) of 1,857 CHWs in 14 provinces in disability awareness, physical rehabilitation and UNCRPD issues to improve access of war victims and persons with disabilities to health and rehabilitation services in the country;

(d) Training through DRD with the financial support of donors including the European Commission of 20 orthopaedic technicians from Kunar, Khost, Bamyán and Kabul with 20 students graduating in November 2016; training of 230 physiotherapists and 40 orthopaedic technicians from the above provinces where there are no physiotherapists and where the need for physiotherapists exists with the training starting in August 2016 in 7 training centres with 230 students under a 3 year diploma training Programme and in 2 additional training centres with 40 technicians.

6. The Committee concluded that Afghanistan had communicated challenges it faced in the implementation of its victim assistance activities including lack of funding to carry out planned projects.

7. The Committee concluded that it would welcome information on efforts to implement Actions 12, 13 and 16 of the Maputo Action Plan.

8. The Committee concluded that it would welcome information from Afghanistan on measurable improvements made in the well-being and the guarantee of rights of mine victims, challenges that remain and priorities for assistance.

Albania

9. The Committee welcomes the submission by Albania of its Article 7 report for the calendar year 2016 containing updated information on its victim assistance activities. Based on the information provided, the Committee presents the following conclusions:

10. The Committee concluded that Albania was acting upon its commitment to assess the needs of mine victims, the availability and gaps in services and support, and existing or new requirements for disability, health, education, employment, development and poverty reduction activities needed to meet the needs of mine victims, and to refer victims to existing services where possible in accordance with Action 12 by reporting the following:

(a) Albania noted that there are at least 998 UXO casualties (151 killed and 847 injured) in Albania and that desegregated data by age and gender is available for every prefecture/region of Albania;

(b) Recently, a “Needs Assessment of Socio-Economic and Medical needs of marginalised Explosive Remnants of War (ERW) victims in Albania” was conducted all over Albania with the financial support of the Austrian Government, and the US Government through International Trust Fund Enhancing Human Security. The assessment focused in reviewing the status of the survivors, identifying their specific needs and drafting due recommendations for the Government to provide them with relevant assistance;

(c) Albania reported on the “major needs identified from the above projects”;

(d) Almost all survivors want to participate in recreational activities and psychosocial support to overcome the trauma, including in the peer support programmes. A national workshop with participation of all stakeholders including donors was held in 2016, presenting all the findings from the needs assessment projects;

(e) Based on the above needs assessments, the US Department of State through ITF Enhancing Human Security will fund two projects in victim assistance in Albania during 2017.

11. The Committee concluded that Albania is acting upon its commitment under Action 14 of the Maputo Action Plan by reporting on the following enhancements that have

been made or will be made to disability, health, social welfare, education, employment, development and poverty reduction plans, policies and legal frameworks needed to meet the needs of victims, and on budgets allocated for their implementation:

(a) There is a National Plan aiming to support the mine/UXO victims throughout Albania. The plan complies with several International treaties ratified by Albania, such as the Anti-Personnel Mine Ban Convention, the Convention on Certain Conventional Weapons, the Convention on Cluster Munitions and the Convention on the Rights of Persons with Disabilities.

(b) The implementation of the National Plan contributes to the emergency, medical care, physical rehabilitation, psychosocial support, socio-economic reintegration, data collection, as well as to the implementation of relevant laws and policies for all mine/UXO victims throughout Albania.

12. The Committee welcomed the information provided by Albania on this Action 14. In particular, the Committee noted that Albania had a National Plan in place to support victims. The Committee concluded that it would welcome a copy of this National Plan and further information on how the Plan addresses matters concerning the objectives of the Maputo Action Plan.

13. The Committee concluded that Albania was acting upon its commitment under Action 15 of the Maputo Action Plan by reporting on the following activities to increase availability of and accessibility to appropriate comprehensive rehabilitation services, economic inclusion opportunities and social protection measures for all victims, regardless of their gender and age:

The Prosthetic Workshop in the Regional Hospital of Kukes was upgraded with equipment, raw materials and relevant elements to repair and produce prostheses and orthoses. During 2016, the Prosthetic Workshop at Kukes Regional Hospital was able to support about 42 amputees with new prostheses and 40 others with major repairs.

14. The Committee concluded that it would welcome information on efforts to implement Action 13 and 16 of the Maputo Action Plan.

15. The Committee concluded that it would welcome information from Albania on measurable improvements made in the well-being and the guarantee of rights of mine victims, challenges that remain and priorities for assistance.

Bosnia and Herzegovina

16. The Committee welcomes the submission by Bosnia and Herzegovina of its Article 7 report for the calendar year 2016 containing updated information on its victim assistance activities. Based on the information provided, the Committee presents the following conclusions:

17. The Committee noted that Bosnia and Herzegovina's Mine Action Centre database has been updated with 17 victims including the location, victims' identity and assistance provided. The Committee noted that there are 8'382 victims in Bosnia/Herzegovina with a total of 12 victims in 2016 and 3 victims in 2017 (to March). The Committee concluded that Bosnia and Herzegovina's database contains information disaggregated by number of victims, seasonal variations, age group, fatal/nonfatal injuries, and origin of the casualties, gender, types of mine/device and residence place.

18. The Committee concluded that Bosnia and Herzegovina was acting upon its commitment under Action 15 of the Maputo Action Plan by reporting on the following activities to increase availability of and accessibility to appropriate comprehensive rehabilitation services, economic inclusion opportunities and social protection measures for all victims, regardless of their gender and age:

(a) Bosnia and Herzegovina reported that the Demining Commission in Bosnia and Herzegovina has adopted a decision on forming a coordination group for victim assistance, and the process of formalisation of documents commenced through ministerial

bodies. During this reporting period, a preliminary coordination meeting of this working group was held in order to improve coordination.

(b) Bosnia and Herzegovina reported that in 2016, four mine victim assistance projects were carried out for the victims of mines/ERW/cluster munitions on credit financing, assistance in employment, economic empowerment of amputees and lump-sum mine victim assistance with 44 beneficiaries.

19. The Committee concluded that it would welcome updates on the results of these efforts.

20. The Committee concluded that it would welcome information on efforts to implement Actions 12, 13, 14 and 16 of the Maputo Action Plan.

21. The Committee concluded that it would welcome information from Bosnia and Herzegovina on measurable improvements made in the well-being and the guarantee of rights of victims, challenges that remain and priorities for assistance.

Cambodia

22. The Committee welcomes the submission by Cambodia of its Article 7 report for the calendar year 2016 containing updated information on its victim assistance activities. Based on the information provided, the Committee presents the following conclusions:

23. The Committee concluded that Cambodia was acting upon its commitment to assess the needs of mine victims, the availability and gaps in services and support, and existing or new requirements for disability, health, education, employment, development and poverty reduction activities needed to meet the needs of mine victims, and to refer victims to existing services where possible in accordance with Action 12 by reporting the following:

The Quality of Life Survey (QLS) for mine survivors and other persons with disabilities reached 850 villages, 163 Communes, 54 Districts in 25 provinces and directly interviewed 7,860 persons with disabilities (2,362 women) including 1,815 landmine/ERW survivors (133 Women). The survey found that most of the survivors met received assistance and few of them lacked access to services.

24. The Committee noted that in 2016, Cambodia reported 26 people were killed or injured by anti-personnel mines. The Committee concluded that this represents a significant reduction since 2016 (111). The Committee concluded that the information on casualties provided by Cambodia was disaggregated by gender and age.

25. The Committee concluded that Cambodia has delegated the responsibility for landmine/ERW victim assistance to the Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY), where it is most appropriately addressed with the Disability Action Council (DAC) Secretariat supporting the MoSVY in the area of general disabilities.

26. The Committee noted that the Department of Victim Assistance of CMAAS is working with the MoSVY, People with Disability Foundations and DAC to obtain information on services provided to landmine/ERW victim and to conduct the QLS by CMAA volunteer survivor networks across the country. The Committee further noted that in July 2014 the National Disability Strategic Plan 2014-2018 was in place and disseminated to relevant ministries and disability stakeholders. The Committee concluded that it would welcome receiving a copy of the Disability Strategic Plan.

27. The Committee concluded that Cambodia was acting upon its commitment under Action 15 of the Maputo Action Plan by reporting on the following activities to increase availability of and accessibility to appropriate comprehensive rehabilitation services, economic inclusion opportunities and social protection measures for all mine victims, regardless of their gender and age:

(a) In 2016, 28'061 persons with disabilities, including mine /ERW survivors received physical rehabilitation from Physical Rehabilitation Centres (PRCs) such as prosthetic, orthotic, wheelchairs, tricycles and walking aids including crutches, canes, and walking frames and repairs. A total of 13'828 People with disabilities, including

mine/ERW survivors received support in areas such as physiotherapy and surgery. Additionally, 54 people with disabilities, including mine / ERW survivors were trained at vocational training centres;

(b) Community based rehabilitation services, available in 25 provinces, had provided education, health care, disability empowerment, prostheses, orthotics, wheelchairs/tricycles distributed and repaired interviews for referral to other service providers, client attended the gender training, job placement and self-help group setting up to 1'985 groups;

(c) Cambodia organised a disability and mine survivor forum at a sub-national level in order to discuss the needs of those disabled by landmines with a total of 120 landmine/ERW survivors (23 women) and people with disabilities participating.

(d) The Maputo Action Plan 2014-2019 adopted at the Third Review Conference was translated into local language and ready to disseminate to the relevant stakeholders.

28. The Committee concluded that it would welcome information on efforts to implement Actions 13, 14 and 16 of the Maputo Action Plan.

29. The Committee concluded that it would welcome information from Cambodia on measurable improvements made in the well-being and the guarantee of rights of mine victims, challenges that remain and priorities for assistance.

Croatia

30. The Committee welcomes the submission by Croatia of its Article 7 report for the calendar year 2016 containing updated information on its victim assistance activities. Based on the information provided, the Committee presents the following conclusions:

31. Croatia reported that, in 2016, there were 5 mine accidents involving 7 deminers, three of which were killed and four with light injuries. Croatia reported that the annual rate of victims increased by four in relation to 2015. The Committee concluded that information on victims disaggregated by gender and age would be welcome.

32. The Committee concluded that Croatia was acting upon its commitment to assess the needs of victims, the availability and gaps in services and support, and existing or new requirements for disability, health, education, employment, development and poverty reduction activities needed to meet the needs of victims, and to refer victims to existing services where possible in accordance with Action 12 by reporting the following:

Efforts to provide advisory support to victims and their families and to collect data on their needs is carried out during non-technical survey in continuation of a 2014 project conducted by Government Office for Mine Action and the Croatian Mine Action Centre (CROMAC) to establish a Mine Victim Database.

33. The Committee concluded that it would welcome additional information on these efforts. In particular, the Committee concluded that it would welcome information on the results of data collection efforts and efforts to establish the Mine Victim Database.

34. The Committee concluded that Croatia is acting upon its commitment under Action 14 of the Maputo Action Plan by reporting on the following enhancements that have been made or will be made to disability, health, social welfare, education, employment, development and poverty reduction plans, policies and legal frameworks needed to meet the needs of victims:

(a) In accordance with the Law on Mine Action, victim assistance is coordinated by the Office for Mine Action in co-operation with CROMAC, relevant ministries and NGOs to improve the quality of life of people injured by mines and UXOs and their families;

(b) Public health care structures have been established (clinical centres, specialised polyclinics, hospitals and rehabilitation centres) with people injured by mines and UXOs entitled to health protection and acquisition of orthopaedic aids as covered by

the Croatian Health Insurance Institute. These rights are regulated by a number of laws, rules and regulations. Other support is provided by the non-governmental sector, with funding from international and domestic entities.

35. The Committee concluded that it would welcome information on the budgets allocated for the implementation of victim assistance efforts.

36. The Committee concluded that Croatia was acting upon its commitment under Action 15 of the Maputo Action Plan by reporting on the following activities, among others, to increase availability of and accessibility to appropriate comprehensive rehabilitation services, economic inclusion opportunities and social protection measures for all victims, regardless of their gender and age:

(a) In 2016, "MineAid" continued with implementation of the "Knowledge-Opportunity-Sinergy" project in Sisak-Moslavina County, the second most mine-contaminated county in Croatia, which involved unemployed women aged 30-65 and youth aged 15-29, including beneficiaries on social welfare living in socially deprived areas, ethnic minorities, victims of domestic violence etc. The project was finalised in May 2016 and resulted in 299 counselling sessions and support to the development of 10 business plans;

(b) A workshop was held in the Town of Petrinja by the Association of Persons with Disabilities for the purpose of consulting and engaging with employers in the local community. The beneficiaries were familiarised with the work and employment opportunities in the Association, the steps to establish an association and achieve employment through the project;

(c) A workshop titled "How to establish a family farm and what are the basic techniques of integrated practical sustainability" was organised in the City of Sisak to provide information on establishing a farm including the documentation required and characteristics of family farms as well as practical techniques of integrated sustainability and permaculture and how to apply them in family farm scheme.

37. The Committee concluded that it would welcome information on efforts to implement Actions 13 and 16 of the Maputo Action Plan.

38. The Committee concluded that it would welcome information from Croatia on measurable improvements made in the well-being and the guarantee of rights of victims, challenges that remain and priorities for assistance.

Serbia

39. The Committee welcomes the submission by Serbia of its Article 7 report for the calendar year 2016 containing updated information on its victim assistance activities. Based on the information provided, the Committee presents the following conclusions:

40. The Committee concluded that Serbia is acting upon its commitment under Action 14 of the Maputo Action Plan by reporting on the following enhancements that have been made or will be made to disability, health, social welfare, education, employment, development and poverty reduction plans, policies and legal frameworks needed to meet the needs of mine victims, and on budgets allocated for their implementation:

(a) In 2015 the government adopted the decision on establishment of the Intersectional working group on the application of the Anti-Personnel Mine Ban Convention which includes representatives of the Ministry of Defence, Ministry of Health, Ministry of Education, Ministry of Foreign Affairs and the Mine Action Centre of the Republic of Serbia and is to monitor the progress made in providing assistance to victims within national plans and legal frameworks including the following:

- i. Promote measures to enhance the socio-economic situation of landmine survivors;
- ii. Promote measures to enhance the legislative frameworks for the protection of victims;

- iii. Monitor alignment with the applicable legislation regulating the protection of victims with international legislation and national law;
- iv. Propose special programmes and measures to promote and strengthen the capacity of victims for public life;
- v. Cooperation with the associations of mine victims and civil society organisations involved in enhancement of the socio-economic situation of victims;
- vi. Cooperation with relevant institutions from abroad, international organisations and national working groups of the equivalent or similar profile with view to sharing experiences and good practices;
- vii. Monitor progress regarding the provision of assistance to victims within wider national plans and legal framework;
- viii. Mapping all existing services.

(b) The Strategy for promoting the status of persons with disabilities 2007-2015 is in force which recognises their equal rights with those of other persons with disabilities (the rights of disabled war veterans, peacetime disabled veterans, as well as civilian disabled veterans);

(c) Serbia is also implementing the Convention on the Rights of Persons with Disabilities and that under the law professional rehabilitation and employment of persons with disabilities is carried out on the principles governing the protection of human rights and dignity of persons with disabilities, inclusion of all persons with disabilities, on an equal footing, in all spheres of social life, in accordance with their professional skills;

(d) The law on professional rehabilitation and employment of persons with disabilities was adopted and entered into force on May 23, 2009 and that the provisions of the laws required employees that employ fifty employees to engage one person with disabilities entered into force on 24 May 2010.

41. The Committee concluded that Serbia was acting upon its commitment under Action 15 of the Maputo Action Plan by reporting on the following activities to increase availability of and accessibility to appropriate comprehensive rehabilitation services, economic inclusion opportunities and social protection measures for all mine victims, regardless of their gender and age:

(a) All municipalities have services for the protection of veterans and the disabled for specific types of assistance;

(b) Social protection services designed to extend quality assistance in the field of social welfare are available in rural areas.

42. The Committee concluded that more information on these efforts and services would be welcome.

43. The Committee concluded that it would welcome information on efforts to implement Actions 12, 13 and 16 of the Maputo Action Plan.

44. The Committee concluded that it would welcome information from Serbia on measurable improvements made in the well-being and the guarantee of rights of mine victims, challenges that remain and priorities for assistance.

Thailand

45. The Committee welcomes the submission by Thailand of its Article 7 report for the calendar year 2016 containing updated information on its victim assistance activities. The Committee further welcomes the additional information submitted by Thailand to the Committee regarding its efforts. Based on the information provided, the Committee presents the following conclusions:

46. The Committee concluded that Thailand was acting upon its commitment to assess the needs of mine victims, the availability and gaps in services and support, and existing or new requirements for disability, health, education, employment, development and poverty reduction activities needed to meet the needs of mine victims, and to refer victims to existing services where possible in accordance with Action 12 by reporting the following:

(a) The Ministry of Social Development and Human Security (MoSDHS) makes use of volunteer networks to assist persons with disabilities, such as identifying persons with disabilities in community and their needs, registration for disability identification cards, communications with persons with disability/families/ local administrative officers and other related agencies;

(b) In accordance with the law, Thailand has established two types of Disability Service Centres: Provincial Persons with Disability Service Centres, operated by the central government and General persons with Disabilities Service Centres operated by any governmental and non-governmental agencies related to the empowerment of persons with disabilities including local administration organisations. The Government has allocated to date 650'000 USD to the Disability Service Centres.

47. The Committee noted that Thailand reported 9 mine casualties (8 injured and 1 killed) and that the significant decrease in the number of landmine victims is the result of better marking of suspected hazardous, improved MRE activities (especially in schools) and the reduction of mine-contaminated areas near urban zones.

48. The Committee concluded that Thailand was acting upon its commitment under Action 13 by reporting on the following time-bound and measurable objectives it seeks to achieve through the implementation of national policies, plans and legal frameworks that will tangibly contribute, to the full, equal and effective participation of mine victims in society:

(a) Promote collaboration between the National Institute for Emergency Medicine (NIEM) and the Thailand Mine Action Centre (TMAC);

(b) Promote the provision of physical rehabilitation services for persons with disabilities with participation of local communities;

(c) Provide psychological support and advice;

(d) Protect the rights of persons with disabilities;

(e) Support persons with disabilities with the increasing costs of living;

(f) Coordinate and refer persons with disabilities to access further services;

(g) Involve persons with disabilities in decision making level to design policies, plans, projects on disability issues.

49. The Committee concluded that Thailand is acting upon its commitment under Action 14 of the Maputo Action Plan by reporting on the following enhancements that have been made or will be made to disability, health, social welfare, education, employment, development and poverty reduction plans, policies and legal frameworks needed to meet the needs of mine victims, and on budgets allocated for their implementation:

(a) NIEM and the TMAC have begun to collaborate with the NIEM local emergency medical service unit being on standby during mine clearance operations to prepare for possible mine accidents. The two agencies have also conducted joint emergency medical trainings which will also support deminers to become well-prepared for on-site emergency medical treatment for victim of mines and other accidents;

(b) Development of the Strategic Plan for the Health Care System Development for Persons with Disabilities, B.E. 2560-2564 (2017-2021) is being put in place to ensure that caregivers and volunteers in the community are given primary health care training;

(c) Enhancements have been made to legislations, policies and plans concerning economic inclusions including a cabinet resolution dated February 16, 2016 provides that persons with disabilities who are registered for disability identification cards are eligible to

immediately received disability allowance by requesting the Ministry of Interior to revise the rules of disability allowance payment for persons with disabilities.

50. The Committee concluded that Thailand was acting upon its commitment under Action 15 of the Maputo Action Plan by reporting on the following activities to increase availability of and accessibility to appropriate comprehensive rehabilitation services, economic inclusion opportunities and social protection measures for all mine victims, regardless of their gender and age:

(a) The Department of Medical Services, Ministry of Public Health organised and promoted CBR and has developed knowledge management projects on different topics including “The role of local administration in promoting health and quality of life of persons with disability” and “approached health care organisations in the community for persons with disabilities”;

(b) The DMA also supported the CBR programs in 15 hospitals in four regions of Thailand;

(c) 152 Community Learning Centres (CLC) in 76 provinces of Thailand including 10 centres in Bangkok and 27 centres in mine affected areas provide teams of professionals for the local community consisting of social workers, psychologists, local offices and teachers;

(d) The MoSDHS implements the CBR model for psychological support services and each year each CLC provide services for at least 500 persons with disabilities;

(e) Persons with disability can apply to receive interest-free loans at an amount not exceeding 1’333 USD for 5 years. The Department of Local Administration has allocated a budget for disability allowance and the Government aims to increase the monthly disability allowance from a rate of 500 baht (14 USD) to the rate of 800 baht (27 USD);

(f) The Ministry of Labour and the MoSDHS continuously work to raise awareness of the regulations among government agencies and private companies in order to increase the rate of employment of persons with disabilities;

(g) The Fund of Empowerment of Persons with Disabilities has allocated 97 million USD to be loaned for self-employment of persons with disabilities and their caregivers;

(h) To promote independent living and participation of persons with disabilities in their communities the MoSDHS has made available 550 personal assistants, 555 sign language interpreters, 2,498 house modifications, and 3,053 volunteers, and 152 CLC to support persons with disabilities, including mine survivors. Thailand reported that the Government allocated a budget for personal assistance (approximately 1.2 million USD since 2011 to present as well as a budget for housing modifications (approximately 3.6 million USD since 2011 to present);

(i) Thailand supports the establishment of affiliated government agencies to better meet the needs of persons with disabilities in areas such as capacity building. Thailand’s support in this area equals USD 17,333,841. Thailand is also aiming at integrating technology to enhance the level of service to persons with disabilities which would improve communications between service providers and persons with disability while easing access to welfare.

51. The Committee concluded that it would welcome information on efforts to implement Action 16 of the Maputo Action Plan.

52. The Committee concluded that it would welcome information from Thailand on measurable improvements made in the well-being and the guarantee of rights of mine victims, challenges that remain and priorities for assistance.

Zimbabwe

53. The Committee welcomes the submission by Zimbabwe of its Article 7 report for the calendar year 2016 containing updated information on its victim assistance activities. Based on the information provided, the Committee presents the following conclusions:

54. Zimbabwe reported that in 2016, 3 victims were identified including 2 boys and 1 man. The Committee concluded that the information on casualties provided by Zimbabwe was disaggregated by gender and age.

55. The Committee concluded that Zimbabwe was acting upon its commitment to assess the needs of mine victims, the availability and gaps in services and support, and existing or new requirements for disability, health, education, employment, development and poverty reduction activities needed to meet the needs of mine victims, and to refer victims to existing services where possible in accordance with Action 12 by reporting the following:

(a) Zimbabwe is in the process of collecting data and statistics on mine victims and ZIMAC is coordinating efforts to set up a mine victim database through coordination with other Ministries;

(b) Currently, the Ministry of Public Service, Labour and Social Welfare is responsible for persons with disabilities (including mine victims) which provides services (medical care, physical rehabilitation, social welfare, economic and social inclusion) to beneficiaries regardless of the cause of disability.

56. The Committee noted that the HALO Trust in Zimbabwe assists mine victims with referrals to acquire prosthetic limbs. The Committee concluded that it would welcome additional information on this coordination effort.

57. The Committee concluded that it would welcome additional information on efforts carried out by Zimbabwe to put a system in place to conduct assessments as well as referral of victims to existing services.

58. The Committee noted that Zimbabwe reported the following challenges in the implementation of its victim assistance commitments:

(a) The Ministry of Public Service, Labour and Social Welfare is responsible for the social welfare of all people living with disabilities, mine victims inclusive. However, limitations in funding inhibit the full implementation of rehabilitating efforts for mine victims;

(b) There are no rehabilitation centres, specialist doctors, prosthetics and physical therapists in some areas of Zimbabwe and that many individuals who come from rural areas, including landmine victims either cannot afford to travel to access these special services or cannot spend long periods away from their families or means of income. Poverty is widespread in rural areas, which the Government is trying to reduce by various developmental programmes like Indigenisation and Zimbabwe Agenda for Sustainable Socio-Economic Transformation (ZIMASSET);

(c) Zimbabwe reported that inter-agency coordination of mine action-related activities remains a challenge, which the National Mine Action Authority of Zimbabwe and the Zimbabwe Mine Action Centre are looking to bridge by conducting a joint meeting with all line ministries, thus increasing coordination and support to all areas of mine action.

59. The Committee concluded that it would welcome information on efforts to implement Actions 12, 13, 14, 15 and 16 of the Maputo Action Plan.

60. The Committee concluded that it would welcome information from Zimbabwe on measurable improvements made in the well-being and the guarantee of rights of mine victims, challenges that remain and priorities for assistance.

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Addendum

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Chad

1. The Committee welcomes the submission by Chad of its Article 7 report for the calendar year 2016 containing updated information on its victim assistance activities. Based on the information provided, the Committee presents the following conclusions:
2. The Committee noted that Chad reported that in 2016 there were a total of 27 victims in the regions of Ouaddaj and Borkou, 24 men and 3 women. The Committee concluded that the information on casualties provided by Chad was gender and age disaggregated.
3. While welcoming the information submitted by Chad, the Committee encourages Chad to provide a follow-up to the wealth of information submitted in the previous year on its victim assistance activities aiming at the implementation of actions 12-16 of the Maputo Action Plan, as well as on the number of challenges and priorities for assistance brought to the attention of the States Parties.
4. The Committee recalled that in 2016 Chad reported that three preparation missions for the implementation of a pilot project were conducted in Ouaddai and Borkou and that these missions provided an opportunity to assess the challenges and potential of each of the sub-prefectures of the two regions in the implementation of the PADEMIN project. The Committee concluded that it would welcome further information from Chad concerning the scope of the pilot projects and progress achieved in their implementation.
5. The Committee recalled that in 2016 Chad reported that the National Mine Action Centre, with the participation of various ministries, revised the 2010 National Plan for Victim Assistance and that in April 2016 the revised plan was awaiting finalisation and adoption. The Committee concluded that it would welcome a copy of this National Plan.
6. The Committee also recalled that in 2016 Chad reported the following challenges in providing services and support to victims:
 - (a) Lack of technical expertise in rehabilitation, education and economic integration;
 - (b) Lack of facilities and equipment for medical care, rehabilitation, education, and economic integration;
 - (c) Lack of coordination of victim assistance and social and cultural barriers which impede the participation and interaction of persons with disability in society.
7. The Committee concluded that it would welcome information on efforts to implement Actions 12, 13, 14, 15 and 16 of the Maputo Action Plan including information on systems in place and efforts to carry out assessments as well as referral of victims to existing services, time-bound and measurable objectives Chad seeks to achieve through implementation of plans and legal frameworks that will tangibly contribute, to the full, equal and effective participation of mine victim in society, enhancements that have been made or will be made to policies and legal frameworks needed to meet the needs of victims, and on budgets allocated for their implementation, efforts to strengthen local capacities, enhance coordination with subnational entities and increase availability of and accessibility to services and opportunities and efforts to enhance capacity to ensure the inclusion and active participation of victims and their representative organisations in national action plans, legal frameworks, policies, implementation mechanisms and monitoring and evaluation.
8. The Committee concluded that it would welcome information from Chad on measurable improvements made in the well-being and the guarantee of rights of victims, challenges that remain and priorities for assistance.

Senegal

9. The Committee welcomes the submission by Senegal of its Article 7 report for the calendar year 2016 containing updated information on its victim assistance activities. Based on the information provided, the Committee presents the following conclusions:

10. The Committee concluded that Senegal was acting upon its commitment to assess the needs of mine victims, the availability and gaps in services and support, and existing or new requirements for disability, health, education, employment, development and poverty reduction activities needed to meet the needs of mine victims, and to refer victims to existing services where possible in accordance with Action 12 by reporting the following:

(a) Data collection for mine accidents is carried out by CNAMS in the field and through local associations, NGOs and the army. The latter, is the most involved in the procedure also intervening in emergency relief whenever requested;

(b) The collection of data on mine victims and their needs, as well as new accidents, is ongoing;

(c) No mechanism for monitoring accidents in our country but that there is a national civil protection services to Senegal reported that it has recorded 826 victims of mines, civil and military, surviving and deceased.

11. The Committee concluded that Senegal reported that there is no mechanism for monitoring accidents in Senegal. The Committee would welcome information concerning any efforts to put such a system in place. The Committee concluded that it would further welcome information on the systems in place to carry out assessments as well as referral of victims to existing services would be welcome.

12. The Committee concluded that Senegal is acting upon its commitment under Action 14 of the Maputo Action Plan by reporting on the following enhancements that have been made or will be made to disability, health, social welfare, education, employment, development and poverty reduction plans, policies and legal frameworks needed to meet the needs of mine victims, and on budgets allocated for their implementation:

(a) A health care system for people with disabilities has been established by the Ministry of Health and Social Welfare;

(b) A national social welfare service is established with social workers appointed to hospitals;

(c) Equal opportunities cards for people with disabilities for free access to various services including health with this card already available and distributed in the regions.

13. The Committee concluded that Senegal was acting upon its commitment under Action 15 of the Maputo Action Plan by reporting on the following activities to increase availability of and accessibility to appropriate comprehensive rehabilitation services, economic inclusion opportunities and social protection measures for all mine victims, regardless of their gender and age:

(a) Free health care for mine victims in three regional hospitals (Zigunichor, Kolda and Sedhiou) with the capacity to provide emergency relief and medical care;

(b) Four departmental health centres covering which provide continuous and free care to mine victims regulated by Conventions signed between the Mine Action Centre of Senegal (CNAMS) and the health structures;

(c) Prescribed medicines are also provided free of charge at licensed pharmacies, following a medical consultation with the victim;

(d) Facilities and orthopaedic services housed in the health facilities, five have seen their capacity strengthened (equipment, training, financing);

(e) Since 2010, access to prosthetic renewal or repair is free of charge and is done at the request of the victim;

(f) CNAMS in partnership with the ICRC and the Senegalese Association of Mine Victims started in December 2015 a programme for the fitting of victims in the Centre of motor rehabilitation of Guinea Bissau which has provided 62 mine victims with quality prostheses. This project is ongoing and an additional 33 mine victim is scheduled to be supported in 2017;

(g) In Ziguichor a regional psychiatric centre provides free assistance to mine victims who develop psychological disorders.

14. The Committee noted that Senegal reported challenges in the implementation of its victim assistance commitments. In particular Senegal reported that it has benefited from the support of several bilateral and multilateral partners but that since 2014 support has been suspended, with the exception of the US Department of State. Senegal also reported that in order to ensure the continuation of its mine action programme, Senegal has agreed to contribute to the annual national budget, pending the return of its traditional partners.

15. The Committee concluded that it would welcome information on efforts to implement Actions 12, 13, 14 and 16 of the Maputo Action Plan.

16. The Committee concluded that it would welcome information from Senegal on measurable improvements made in the well-being and the guarantee of rights of mine victims, challenges that remain and priorities for assistance.

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12 October 2017

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**Consideration of the general status and operation
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**Conclusions and recommendations
Committee on Victim Assistance
(Belgium, Colombia, Croatia, Ecuador)**

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Colombia

1. The Committee welcomes the submission by Colombia of its Article 7 report for the calendar year 2016 containing updated information on its victim assistance activities. Based on the information provided, the Committee presents the following conclusions:

2. Colombia reported that in 2016 a total of 84 people were injured or killed by anti-personnel mines (1 girl, 2 women, 6 boys and 75 men). The Committee concluded that the information provided by Colombia was gender and age disaggregated.

3. The Committee concluded that Colombia was acting upon its commitment to assess the needs of mine victims, the availability and gaps in services and support, and existing or new requirements for disability, health, education, employment, development and poverty reduction activities needed to meet the needs of mine victims, and to refer victims to existing services where possible in accordance with Action 12 by reporting the following:

(a) A thorough data collection system is in place disaggregating victim-related information across several parameters such as age, gender, occupation, location of incident, activity at the moment of incident, and family surrounding;

(b) Colombia reported 846 mine casualties in 2016 and provided data disaggregated by age, gender, role and social situation. 85% of the reported victims were men and 30% were in the age group 26-35.

(c) Colombia reported that one of its main aims is to continue with the identification of needs of mine victims for the formulation of clear and precise guidelines for care and repair, for the review and verification of cases of inclusion and non-inclusion in the established Single Registry of Victims.

4. The Committee concluded that Colombia is acting upon its commitment under Action 14 of the Maputo Action Plan by reporting on the following enhancements that have been made or will be made to disability, health, social welfare, education, employment, development and poverty reduction plans, policies and legal frameworks needed to meet the needs of mine victims, and on budgets allocated for their implementation:

Colombia has developed a large policy and institutional framework which provides comprehensive support to victims ranging from pre-hospital time to effective socioeconomic inclusion. This framework was developed with the aim of materialising five types of reparative measures: i) restitution; ii) Compensation; iii) Rehabilitation; iv) Satisfaction; and v) guarantees of non-repetition. The government of Colombia also coordinates with other government institutions through its "Directorate for the integral action against antipersonnel mines" (DAICMA) in providing access to measures of attention, assistance and integral reparation to victims.

5. The Committee concluded that Colombia is acting upon its commitment under Action 15 of the Maputo Action Plan by reporting on the following activities to increase availability of and accessibility to appropriate comprehensive rehabilitation services, economic inclusion opportunities and social protection measures for all mine victims, regardless of their gender and age:

(a) Colombia reported that its legislation foresees equal access to services for persons with disability in various sectors, such as labour, health, and education. With regard to mine/munition/IED victims specifically, the Ministry of Defence is developing and articulating actions that implement legislative and other measures to guarantee that survivors and their families have access to services on equal terms;

(b) Colombia reported efforts to generate inter-sectoral linkages between victim organisations, social organisations and municipal, district and departmental administrations for the construction and implementation of strategies, programs and/or actions that allow the social integration of mine/munition/IED victims, and people with disabilities.

6. The Committee concluded that Colombia is acting upon its commitment under Action 16 of the Maputo Action Plan by reporting the following effort to enhance the capacity to ensure the inclusion and active participation of mine victims and their

representative organisations in national action plans, legal frameworks, policies, implementation mechanisms and monitoring and evaluation:

Colombia adopted a “Protocol for the Effective Participation of Victims of Armed Conflict” which allows effective participation of victims of antipersonnel mines, unexploded munitions and IEDs through the establishment and guarantee of two places for the municipalities, two places for the Departments and places quotas for the National Bureau. The Committee concluded that it would welcome additional information on these matters.

7. The Committee concluded that Colombia reported the following challenges in the implementation of its victim assistance commitments:

- (a) identification of effective routes for inclusion;
- (b) articulation of the “National System for Assistance, Care and Integral Reparation for Victims” (SNARIV) in the identification of the regions with the greatest number of disabled victims
- (c) lack of knowledge of the community and public officials
- (d) lack of awareness among victims on the services available.
- (e) concentration of services in the major cities and in the capital
- (f) a prevailing culture in certain communities that persons with vulnerabilities cannot learn and do not need education and skill development.

8. The Committee concluded that it would welcome information on efforts to implement Action 13 of the Maputo Action Plan.

9. The Committee concluded that it would welcome information from Colombia on measurable improvements made in the well-being and the guarantee of rights of mine victims, challenges that remain and priorities for assistance.

El Salvador

10. The Committee welcomes the submission by El Salvador of information on its victim assistance activities. Based on the information provided, the Committee presents the following conclusions:

11. The Committee concluded that El Salvador was acting upon its commitment to assess the needs of mine victims, the availability and gaps in services and support, and existing or new requirements for disability, health, education, employment, development and poverty reduction activities needed to meet the needs of mine victims, and to refer victims to existing services where possible in accordance with Action 12 by reporting the following:

- (a) In 2017, the National Policy for Integral Assistance to Persons with Disabilities was launched, through which government institutions update their census information concerning victims of landmines, cluster munitions and explosive remnants of war;
- (b) The National Council for Integral Assistance to Persons with Disabilities (CONAIPD) maintains a national census of persons with disabilities;
- (c) The CONAIPD, FOPROLYD and UCADFA, are in charge of general assistance and are responsible for materialising the objectives related to assistance to victims.

12. The Committee concluded that El Salvador is acting upon its commitment under Action 14 of the Maputo Action Plan by reporting on the following enhancements that have been made or will be made to disability, health, social welfare, education, employment, development and poverty reduction plans, policies and legal frameworks needed to meet the needs of mine victims, and on budgets allocated for their implementation:

(a) In order to contribute in a tangible way to the full, equal and effective participation of victims in society, El Salvador, through its corresponding bodies, has signed international conventions, in addition to adopting laws and policies aimed at objectives. The principles instruments that are implemented are:

- i. Convention on the rights of persons with disabilities.
- ii. Inter-American Convention for the Elimination of All Forms of Discrimination against Persons with Disabilities.
- iii. Law on benefits for the protection of the disabled and disabled as a result of the armed conflict
- iv. Opportunity equalisation law.
- v. National Policy of attention to people with disabilities
- vi. El Salvadoran technical standard for accessibility to the physical environment of people with disabilities

(b) Comprehensive care is provided, based on the National Policy of Integral Assistance to Persons with Disabilities;

(c) Actions to improve health, social welfare, education, employment, development and poverty reduction, are carried out through UCADFA, FOPROLYD, CONAIPD, among other governmental and non-governmental bodies, the following activities are carried out:

- i. Medical campaigns at the national level, with which medical services are approached for people with disabilities;
- ii. Campaigns on physical rehabilitation, support in orthosis and prosthesis for victims of the conflict;
- iii. Granting of productive credits for economic development support;
- iv. Through FOPROLYD and the Survivors Network Foundation, productive modules and agricultural tools are granted, such as: Breeding of chickens, shops, mills, bakery equipment, pupuserias establishment and techniques and instruments for beekeeping;
- v. Coordination for the granting of scholarships for persons with disabilities and members of their family to enable them to obtain employment that generates income for subsistence and family development.

13. The Committee concluded that El Salvador was acting upon its commitment under Action 15 of the Maputo Action Plan by reporting on the following activities to increase availability of and accessibility to appropriate comprehensive rehabilitation services, economic inclusion opportunities and social protection measures for all mine victims, regardless of their gender and age:

(a) Subnational coordination is carried by UCADFA, FOPROLYD, CONAIPD, ISRI, Survivors Network and people with disabilities, among others, as well as international efforts to develop plans or programs that promote the care of people with disabilities and eliminate barriers of all kinds;

(b) In order to raise awareness of the need of victims of mines and persons with disabilities, awareness-raising workshops are held at the national level.

14. The Committee concluded that El Salvador reported the following challenges in the implementation of its victim assistance commitments:

- (a) Incorporation and setting of physical spaces;
- (b) Increasing work opportunities and the physical environment of spaces;
- (c) Reaching all sectors of society, private enterprise, government, non-governmental organizations, among others;
- (d) Challenges in sensitisation.

15. The Committee concluded that it would welcome information on efforts to implement Action 16 of the Maputo Action Plan.

16. The Committee concluded that it would welcome information from El Salvador on measurable improvements made in the well-being and the guarantee of rights of mine victims, challenges that remain and priorities for assistance.

Nicaragua

17. The Committee welcomes the submission by Nicaragua of its Article 7 report for the calendar year 2016 containing updated information on its victim assistance activities. Based on the information provided, the Committee presents the following conclusions:

18. The Committee noted that Nicaragua reported that since 2010 it has declared being a “Mine Free Country” but recognises its responsibility to mine victims and for this reason includes mine victims in a national programme known as “Todos con Voz” which reinstates their right to have a voice and express themselves for the respect and fulfilment of their rights. The Committee concluded that it would welcome information on how these efforts address the actions of the Maputo Action Plan.

19. The Committee concluded that it would welcome information on efforts to implement Actions 12, 13, 14, 15 and 16 of the Maputo Action Plan.

20. The Committee concluded that it would welcome information from Nicaragua on measurable improvements made in the well-being and the guarantee of rights of mine victims, challenges that remain and priorities for assistance.

Peru

21. The Committee welcomes the submission by Peru of its Article 7 report for the calendar year 2016 containing updated information on its victim assistance activities. Based on the information provided, the Committee presents the following conclusions:

22. The Committee concluded that Peru is acting upon its commitment under Action 14 of the Maputo Action Plan by reporting on the following enhancements that have been made or will be made to disability, health, social welfare, education, employment, development and poverty reduction plans, policies and legal frameworks needed to meet the needs of victims, and on budgets allocated for their implementation:

(a) Victims registered in the database of the Mine Action Centre (CONTRAMINAS) do not belong to the armed forces and do not have health insurance. These victims are associated with the Comprehensive Health Insurance (SISI), which offers free assistance in the health centres of the Ministry of Health;

(b) Victims receive preferential rates in services from the national rehabilitation institute;

(c) Article 27 of Law 29973, “General Law on Persons with Disabilities” indicated that the Ministry of Health guarantees and promotes the registry of persons with disabilities within a universal insurance system that guarantees health and rehabilitation benefits and quality support;

(d) Article 45 of Law number 29973 establishes that public entities are obliged to hire persons with disabilities in a proportion not less than 5% of the totality of their personnel, and private employers with more than 50 workers in a proportion not less than 3%;

(e) Article 61 of Law number 29973 establishes that persons with disabilities are beneficiaries of adequate social programs, health, food, clothing and housing and access to public services provided by the State, without the requirement of a limit of age;

(f) A Pension Programme is available with the objective of improving the quality of life of people with severe disabilities.

23. The Committee concluded that Peru was acting upon its commitment under Action 15 of the Maputo Action Plan by reporting on the following activities to increase availability of and accessibility to appropriate comprehensive rehabilitation services, economic inclusion opportunities and social protection measures for all victims, regardless of their gender and age:

The severe disability programme is being progressively implemented in the regions of Cajamarca, Ayacucho, Amazonas, Huancavelica, Tumbes, Apurimac, Loreto and Pasco.

24. The Committee welcomed the information provided by Peru on Action 15. The Committee concluded that it would welcome additional information of the disability programme and information on how the strategy addresses matters concerning the objectives of the Maputo Action Plan.

25. The Committee concluded that it would welcome information on efforts to implement Action 12, 13 and 16 of the Maputo Action Plan.

26. The Committee concluded that it would welcome information from Peru on measurable improvements made in the well-being and the guarantee of rights of victims, challenges that remain and priorities for assistance.

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Iraq

1. The Committee welcomes the submission by Iraq of its Article 7 report for the calendar year 2016 containing updated information on its victim assistance activities. Based on the information provided, the Committee presents the following conclusions:

2. The Committee noted that a total of 27 mine victims including, 19 men, 2 women and 6 children. Iraq also provided information on the geographical location of the victims.

3. The Committee concluded that Iraq was acting upon its commitment under Action 15 of the Maputo Action Plan by reporting on the following activities to increase availability of and accessibility to appropriate comprehensive rehabilitation services, economic inclusion opportunities and social protection measures for all mine victims, regardless of their gender and age:

(a) The delivery of service to mine victims has been improved through the opening of rehabilitation centres;

(b) Workshops to teach the manufacturing of artificial limbs, which also created job opportunities for victims, have been held.

4. The Committee noted that Iraq had reported the following challenges in the implementation of its victim assistance commitments:

(a) Since the Kurdistan Region Government's reduction of support via the Ministry of Health, local artificial limb centres have been battling to provide the required services to mine victims. It is deemed that the artificial limb centres can provide remarkable assistance to mine victims across the whole of Iraq if they received the required financial resources;

(b) The centres for producing artificial limbs across Iraq are now in poor condition, especially after the decreasing of budget allocation and inadequate support from international agencies.

5. The Committee concluded that it would welcome information on efforts to implement Actions 13, 14 and 16 of the Maputo Action Plan.

6. The Committee concluded that it would welcome information from Iraq on measurable improvements made in the well-being and the guarantee of rights of mine victims, challenges that remain and priorities for assistance.

Jordan

7. The Committee welcomes the submission by Jordan of its Article 7 report for the calendar year 2016 containing updated information on its victim assistance activities. Based on the information provided, the Committee presents the following conclusions:

8. The Committee concluded that Jordan is acting upon its commitment under Action 14 of the Maputo Action Plan by reporting on the following enhancements that have been made or will be made to disability, health, social welfare, education, employment, development and poverty reduction plans, policies and legal frameworks needed to meet the needs of victims, and on budgets allocated for their implementation:

(a) Victim assistance is part of the National Strategy for Persons with Disabilities which is formulated and implemented by the Supreme Council for Human Rights of Persons with Disabilities, and the Law on the Rights of Persons with Disabilities in order to guarantee the rights of the injured to receive treatment, rehabilitation, employment, health care and education;

(b) The Ministry of health provides treatment and rehabilitation services to the injured and the National Demining and Rehabilitation Authority provides assistance and support. Jordan reported that the National Strategy is developed every five years and is periodically amended to ensure that the highest rights of the injured in terms of work, education and health.

9. The Committee welcomed the information provided by Jordan on Action 14. In particular, the Committee noted that Jordan's National Strategy is developed every five years and is periodically amended to ensure the rights of the injured in terms of work, education and health. The Committee concluded that it would welcome a copy of this new strategy and information on how the strategy addresses matters concerning the objectives of the Maputo Action Plan.

10. The Committee concluded that it would welcome information on efforts to implement Actions 12, 13, 15 and 16 of the Maputo Action Plan.

11. The Committee concluded that it would welcome information from Jordan on measurable improvements made in the well-being and the guarantee of rights of victims, challenges that remain and priorities for assistance.

South Sudan

12. The Committee welcomes the submission by South Sudan of its Article 7 report for the calendar year 2016 containing updated information on its victim assistance activities. Based on the information provided, the Committee presents the following conclusions:

13. The Committee noted that South Sudan reported 16 mine incidents in 2016 which resulted in 45 victims (32 injured and 13 killed), a decrease in comparison to 2015. The Committee also noted that South Sudan reported that despite the ongoing conflict in the country, more than 385 people received mine risk education in 2016 conducted by national and international actor and that these efforts have contributed to the reduction in the number of mine victims.

14. The Committee concluded that South Sudan was acting upon its commitment under Action 15 of the Maputo Action Plan by reporting on the following activities to increase availability of and accessibility to appropriate comprehensive rehabilitation services, economic inclusion opportunities and social protection measures for all mine victims, regardless of their gender and age:

(a) The National Mine Action Authority, Ministry of Gender, Ministry of health, civil society organizations, the ICRC, UNMAS, Handicap international and the victim Assistance Disability Organisation work together to deliver medical support, physical rehabilitation, psychological support and socio economic services to mine victims and other persons with disabilities;

(b) The coordination forum is chaired by the Director General for victim assistance Ministry of Gender and social welfare and co-chaired by the Director of Victim Assistance of the National Mine Action Authority.

15. The Committee concluded that it would welcome additional information on the work of the coordination forum.

16. The Committee noted that South Sudan reported the following challenges in the implementation of its victim assistance commitments:

(a) There is no nationwide needs assessment being conducted for the victims in South Sudan;

(b) The main challenge is funding to support projects targeting, specifically landmine /ERW victims and people with disabilities which is not the priority of donors;

(c) The burden of victim assistance is left in the hands of the government and it does not have funding to support the victims of landmines/ERW;

(d) The passing of the draft national disability policy to protect all persons with disability was delayed by the national parliament of South Sudan until 2016; it has hindered implementation of the Maputo Action Plan.

17. The Committee concluded that it would welcome information on efforts to implement Actions 12, 13, 14 and 16 of the Maputo Action Plan.

18. The Committee concluded that it would welcome information from South Sudan on measurable improvements made in the well-being and the guarantee of rights of mine victims, challenges that remain and priorities for assistance.

Sudan

19. The Committee welcomes the submission by Sudan of its Article 7 report for the calendar year 2016 containing updated information on its victim assistance activities. The Committee further welcomes the Victim Assistance report submitted by Sudan to the Committee. Based on the information provided, the Committee presents the following conclusions:

20. The Committee concluded that Sudan was acting upon its commitment to assess the needs of mine victims, the availability and gaps in services and support, and existing or new requirements for disability, health, education, employment, development and poverty reduction activities needed to meet the needs of mine victims, and to refer victims to existing services where possible in accordance with Action 12 by reporting the following:

(a) Data collection of victims is done through the National Mine Action Centre (NMAC), Ministry of Health (MoH), unions of persons with disabilities, and mine action organisations;

(b) A mechanism exists for general monitoring by Red Cross Society, National authority for prosthetics and orthotics, and NMAC sub offices in the affected states;

(c) Data is collected, revised accurately and recorded in the IMSMA of the NMAC.

21. The Committee concluded that it would welcome additional information on the results of these efforts.

22. The Committee noted that Sudan reported a total of 2,059 casualties (1,470 injured and 588 killed) and provided data disaggregated by age, gender and locations. The Committee further noted that Sudan reported that 635 mine/ERW victims have received support through various victim assistance projects.

23. The Committee concluded that Sudan was acting upon its commitment under Action 13 by reporting on the following time-bound and measurable objectives it seeks to achieve through the implementation of national policies, plans and legal frameworks that will tangibly contribute, to the full, equal and effective participation of mine victims in society:

Sudan reported that its victim assistance strategy developed in mid-2016 to 2017 and runs until 2019 has the following objectives:

- i. Develop a system for data collection and capturing of victim's data;
- ii. Enhance coverage of affected areas by medical services, effective and sustainable medical care services;
- iii. Promote effective and sustainable psychological rehabilitation;
- iv. Establishment of psychological support system to ensure their reintegration into society;
- v. Develop and implement economic integration programmes;
- vi. Promote effective coordination, advocacy, legislation and policies.

24. The Committee welcomes this information provided by Sudan. The Committee concluded that it would welcome receiving a copy of this new strategy.

25. The Committee concluded that Sudan is acting upon its commitment under Action 14 of the Maputo Action Plan by reporting on the following enhancements that have been made or will be made to disability, health, social welfare, education, employment,

development and poverty reduction plans, policies and legal frameworks needed to meet the needs of mine victims, and on budgets allocated for their implementation:

(a) The victim assistance strategy was developed and improved in mid-2016 to 2017 (time frame until 2019);

(b) The Ministry of Welfare and Social Security (MWSS) is responsible for the development of welfare and social protection policies, for the vulnerable segments in the society with more than 80% of the people with disabilities falling within the social security target groups;

(c) Efforts for victim assistance must be coordinated with MWSS to accommodate disability requirements within their program;

(d) The disability strategies include relevant ministries and strategies on Education for Children with Disabilities, Health for Persons with Disabilities, Labour and Economic Empowerment, Higher Education for Persons with Disabilities and Strategy on Social Security;

(e) A five-year plan was drawn up by the National Council for Persons with Disabilities (NCPD) which included all main focus areas in the CRPD including legislations and policies, legal assistance, prevention and health, education, family empowerment and social protection and participation in political and public life;

(f) The labour law in Sudan allocates 5% of the governmental jobs to persons with disabilities and some institutions provide services to disabled persons, especially in major cities;

(g) Steps have been taken to assist victims including a series of trainings and workshops to build their capacities and expand their job opportunities in various fields and to provide small income-generating projects;

(h) A total of 4 million pounds from the public budget was allotted to mine action activities, of which 5% was allocated to victim assistance.

26. The Committee welcomes this information provided by Sudan. The Committee concluded that Sudan reported on a labour law in place which allocates 5% of the governmental jobs to persons with disabilities. The Committee would welcome additional information on the number of persons covered by this measure.

27. The Committee concluded that Sudan was acting upon its commitment under Action 15 of the Maputo Action Plan by reporting on the following activities to increase availability of and accessibility to appropriate comprehensive rehabilitation services, economic inclusion opportunities and social protection measures for all mine victims, regardless of their gender and age:

(a) Activities and services are provided by government institutions such as the MWSS, the NCPD, National authority for prosthetics and orthotics, the Red Cross, UN agencies, and national and international organizations;

(b) A framework of coordination and cooperation with mine-action organizations and relevant government institutions, policies relating to mine victims has been developed including:

- Develop a system for data collection and capturing victim's data;
- Enhance coverage of affected areas by medical services, effective and sustainable medical care services;
- Promote effective and sustainable psychological rehabilitation;
- Establishment of psychological support system to ensure their reintegration into society;
- Develop and implement economic integration programs;
- Promote effective coordination, advocacy, legislations and policies.

(c) The NMAC works as supervising, monitoring and coordinating body of the VA Programme. Monthly coordination meetings, chaired by the NMAC, are held and include all the relevant ministries, the NCPD, the National authority for prosthetics and orthotics, the Red Cross, UN agencies, national and international organisations;

(d) A separate action plan to assist landmine victims exists, as well as a monitoring and evaluation mechanism of its implementation (periodic reports of implementing agencies, monthly meetings and field visits);

(e) The NMAC has a coordinating mechanism with the NCPD, during quarterly meetings and that the NMAC publishes annual reports on the victim assistance programme;

(f) Workshops were held to raise awareness of persons with disabilities on their rights, to advocate their issues, and establishment of institutions for persons with disabilities to provide a number of services such as orthotics and prosthetics, assistance devices, and micro-economic projects, with the last project implemented in Kassala, funded by the Government of Japan.

28. The Committee noted that Sudan reported the following challenges in the implementation of its victim assistance commitments:

(a) Victim assistance is not prioritized, because of the limited available budget. The limited support for victim assistance from donors, has led to limited activities;

(b) The following challenges exist to integrate mine/ERW victims in society:

- i. limited availability of support, compared to the needs of the victims, and their numbers are increasing in some hazardous areas contaminated with mines and explosive remnants of war, that have not yet been cleared;
- ii. low level of victim's awareness about their rights;
- iii. low level of community awareness in advocating for psychosocial support and social acceptance;
- iv. Lack of funding to support for outreach activities on the rights of persons with disabilities;
- v. Lack of media advocacy for the people with disabilities.

(c) Lack of adequate assistance is due to lack of adequate support, and awareness of persons with disabilities of the available services leading to poor services being provided to the target groups;

(d) Lack of services provision in the remote areas and that this impedes access to provide services, such as distance, and lack of service delivery in remote areas;

(e) Challenges facing reporting and monitoring include a lack of coordination with relevant actors and the shortage of qualified national teams in this field.

29. The Committee concluded that it would welcome information on efforts to implement Actions 16 of the Maputo Action Plan.

30. The Committee concluded that it would welcome information from Sudan on measurable improvements made in the well-being and the guarantee of rights of mine victims, challenges that remain and priorities for assistance.

Yemen

31. The Committee welcomes the submission by Yemen of its Article 7 report for the calendar year 2016 containing updated information on its victim assistance activities. Based on the information provided, the Committee presents the following conclusions:

32. The Committee concluded that Yemen was acting upon its commitment under Action 15 of the Maputo Action Plan by reporting on the following activities to increase availability of and accessibility to appropriate comprehensive rehabilitation services,

economic inclusion opportunities and social protection measures for all mine victims, regardless of their gender and age:

(a) The Yemen Association for Landmine / UXO survivors (YALS) established in 2004 is responsible for the Yemeni mine survivors and implements the level 4 of victim assistance which implement physical therapy, victims registration and victim reintegration into community life;

(b) The Yemen Ministry of Health and Ministry of Insurance and Social Affairs, in conjunction with Yemen prosthetic centre and international NGOs conduct support programmes for mine victims including community based rehabilitation projects and training of field workers to cover all priority areas including prosthetics;

(c) The victim assistance programme is implemented in three phases: survey and register of victims by special forms containing all information about each victim and their needs, an examination to address their needs and the provision of health care, artificial limbs and physical rehabilitations.

33. The Committee noted that Yemen has expressed challenges in the implementation of its victim assistance commitments. In particular Yemen reported that it was unable to carry out victim assistance activities according to the national standard and that the Yemen Mine Action Programme and the Ministry of Health coordinated efforts to address victim assistance according to the recent situation and provide medical assistance according to the available limited funds.

34. The Committee concluded that it would welcome information on efforts to implement Actions 12, 13, 14 and 16 of the Maputo Action Plan.

35. The Committee concluded that it would welcome information from Yemen on measurable improvements made in the well-being and the guarantee of rights of mine victims, challenges that remain and priorities for assistance.

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Tajikistan

1. The Committee welcomes the submission by Tajikistan of its Article 7 report for the calendar year 2016 containing updated information on its victim assistance (VA) activities. Based on the information provided, the Committee presents the following conclusions:
2. Tajikistan reported that despite efforts to prevent accidents there were still 6 accidents in 2016 including 2 boys and 4 men with one of these victims being killed.
3. The Committee concluded that Tajikistan was acting upon its commitment to assess the needs of mine victims, the availability and gaps in services and support, and existing or new requirements for disability, health, education, employment, development and poverty reduction activities needed to meet the needs of mine victims, and to refer victims to existing services where possible in accordance with Action 12 by reporting the following:
 - (a) The National Mine Action Centre (TNMAC) is responsible for the coordination and monitoring of all mine action activities, including coordination of VA in Tajikistan as well as the database for mine victims which since 1992 has registered 864 mine victims with a total of 489 having been wounded and 375 having been killed with 30% of which were children;
 - (b) Training on the collection of data was carried out by UNDP and ICRC volunteers of the Red Crescent Society of Tajikistan (RCST). Tajikistan reported that RCST volunteers completed the collection of data and assessment on needs of mine victims projected in 2016 (disaggregated by sex and age) with nearly;
 - (c) More than 90% of the results of data collection effort have been entered into the TNMAC's data base.
4. The Committee concluded that it would welcome information on the data collection efforts results of these efforts.



5. The Committee concluded that Tajikistan is acting upon its commitment under Action 14 of the Maputo Action Plan by reporting on the following enhancements that have been made or will be made to disability, health, social welfare, education, employment, development and poverty reduction plans, policies and legal frameworks needed to meet the needs of mine victims, and on budgets allocated for their implementation:

(a) In 2016, by Decree of the Government of the Republic of Tajikistan (#455) the National Programme for the Rehabilitation of Persons with Disabilities 2017-2020 was approved;

(b) In 2016 the National Strategy for Development of the Republic of Tajikistan was adopted with the medium-term programme including the rights of persons with disabilities in accordance with the CRPD;

(c) In 2016, based on the assessment of needs, 192 families of survivors were supported through the programme of the ICRC “Microeconomic initiatives”;

(d) In November 2016, two grant agreements on microfinance were extended between the UNDP and two micro-credit funds “Rushdi Sughd” and “Fayzi Surkhob” until May 2017. Persons with disabilities living in three districts of Sogd oblast and three districts of Rasht Valley continue to enjoy preferential low-interest micro-loans with the aim of creating income and increase the opportunities for self-employment.

6. The Committee concluded that Tajikistan was acting upon its commitment under Action 15 of the Maputo Action Plan by reporting on the following activities to increase availability of and accessibility to appropriate comprehensive rehabilitation services, economic inclusion opportunities and social protection measures for all mine victims, regardless of their gender and age:

(a) In 2016 the VA programme continued its successful integration into government programmes and the UNDP programme, including in the rule of law and access to justice, and a joint project of the United Nations country team entitled “Building and Strengthening Alliances for Inclusive Policies and Communities for Persons with Disabilities in Tajikistan”;

(b) The UNDP provided technical support to the Government of the Republic of Tajikistan in publications of the revised text of the CRPD in Tajik language and analysis of the legal, economic and functional consequences of accession to the CRPD as well as holding a round table on the accession of Tajikistan to the KPI;

(c) In the framework of the UNDP project “the rule of law and access to justice” legal advice is provided for free to persons with disabilities, including mine/ERW affected families;

(d) Measures to increase physical accessibility to landmine survivors were advanced including by training architects and designers in accessibility and adapting toilets and bathrooms in two pilot areas (the Dushanbe Circus and the Scientific Research Institute for medico-social assessment and rehabilitation of persons with disabilities).

7. The Committee welcomes the information provided by Tajikistan on this matter. In particular, the Committee concluded that Tajikistan had adopted a National Plan for the Rehabilitation of Persons with Disabilities 2017-2020. The Committee concluded that it would welcome a copy of the National Plan.

8. The Committee concluded that Tajikistan acting upon its commitment under Action 16 of the Maputo Action Plan by reporting on the following activities to enhance capacity to ensure the inclusion and active participation of mine victims and their representative organisations in national action plans, legal frameworks, policies, implementation mechanisms and monitoring and evaluation:

In 2016, mine and ERW affected persons with disabilities and their representative organisations, as members of the technical working group on VA, participated regularly in meetings and took decisions on matters relating to survivors and other persons with disabilities.

9. The Committee noted the following challenges faced by Tajikistan in the implementation of its victim assistance commitments:

(a) Unavailability of specialised medical centres and institutions, insufficient number of treatment and prophylactic establishments and the lack of qualified professionals working with persons with disabilities in rural areas;

(b) There remains a shortage of experienced professionals and of modern medical-diagnostic equipment as well as a delay in refresher courses and retraining;

(c) Advisory psychological services are available only in the capital and there is a lack of more intensive programs of psychotherapy;

(d) The number of people in need of prosthetic and orthopaedic products increases annually and the prosthetic and orthopaedic plant in Dushanbe is currently experiencing logistical difficulties and budgetary difficulties and does not have the ability of purchasing semi-finished products to meet the demands. Tajikistan also reported that the ICRC, since 1998 has a prosthetic and orthopaedic plan in Dushanbe and while it does provide support it does not have been able to fully meet the needs of all of those in need;

(e) The number of disabled persons waiting to receive different types of services (wheelchair, prosthetic and orthopaedic services and other) is approximately 700.

10. The Committee concluded that it would welcome information on efforts to implement Actions 13 of the Maputo Action Plan.

11. The Committee concluded that it would welcome information from Tajikistan on measurable improvements made in the well-being and the guarantee of rights of mine victims, challenges that remain and priorities for assistance.
