

**7<sup>th</sup> Meeting of the State Parties (7 MSP)  
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**Promotion of quality of, and access to medical first aid for mine victims**

One of the main objectives of our Co-Chairs on victim assistance is the promotion of quality of, and access to medical first aid for mine victims.

Insufficient quality and sometimes inadequate medical procedures in dealing with mine victims have been persistently reported, most recently in the framework of the Intersessional of May 2006. Lack or improper medical procedures in the first stage after an injury or an accident is not only resulting in an increased mortality rate as a direct consequence, but also represents an additional burden for the victim and the following surgical treatment phase will require additional and more complex interventions. Delayed recovery and deprived results of rehabilitation are also a consequence of this situation.

The problem of quality is compounded in many countries by difficulties for the victims to access the first chain of medical care.

In an emergency situation the main reasons for trauma deaths are:

1. Airway block
2. insufficient breathing and
3. excessive blood loss

These reasons are preventable by providing appropriate pre-hospital care (first-aid).

A number of States Parties and International Organisations have called for action to promote awareness of existing guidelines and lessons learned in the field and to increase training and exercise for the ‘first responders’ (including, but not limited to medics and paramedics), mainly in the pre-hospital phase of care.

With a view to address the issue, the Co-Chairs organized a series of workshops on ‘quality of, and access to medical first aid for mine victims’ in which participated the main actors involved, in particular **HI, ICBL, ICRC, IFRC, TMC, UNDP, UNICEF and WHO** and with the aim to compile and consolidate best practices and appropriate standards in the field of medical care including access related issues.

The working group recommended adopting a comprehensive approach considering all important steps of medical care:

- Pre-hospital phase
- Hospital phase and
- Physical rehabilitation

The Co-Chairs decided to concentrate on the pre-hospital phase, although without neglecting the other phases.

The Co-Chairs examined a number of existing guidelines and with the help of working group summarized essential and basic first aid 'key points' for 'first responders'. The key points were presented during the Intersessional in May 2006.

Following the outcomes of the Intersessional on this topic and recommendations of the working group, the Co-Chairs developed **a leaflet** with illustrations, highlighting **seven essential and basic first aid actions**, with a view to promote the quality of pre-hospital care.

The leaflet has been developed to emphasise on '**do and don't do tips**', taking into consideration the cultural context, specific beliefs and misconceptions.

This 'leaflet' intends to highlight basic life support points and recommendations reaching different public and different situations of emergency **especially the 'First responders'** that are first at place of the accident, most likely villagers and community volunteers with no medical background and training.

Care is not depending on the mechanism or cause of injury and therefore, it is very important to underline that:

The 'leaflet' aims to address the basic and simple first-aid actions to assist mine victims and **can be extended for all trauma victims in general, regardless to the cause of injury**, for instance those resulting from road accidents, gun shots and injuries caused in natural disasters.

The 'leaflet' is meant to be a tool directing the action of the 'First responders' at time of emergency and also to be utilised as **guidance for first-aid training and exercises**.

It is suggested to provide **proper practical first-aid training by certified first aid instructors** to an individual or group of people prior to distribute the leaflet.

**The seven basic key points for 'first responders' are:**

1. Call for help
2. Safety (universal precautions)
3. Airway and breathing
4. Blood circulation – Stop the bleeding
5. Keep the victim warm
6. Transportation of the victim
7. Human contact and psychosocial support

It is important to root in pre-hospital training into national health care systems, as it would be the security of the link between the pre-hospital, hospital and rehabilitation phases.

The Co-Chairs would like to underline the importance of the dissemination of the contents of the 'leaflet' and to give it a long term and systematic approach and also recommend that the affected States should include **training of the first responders** in their objectives for 2009 and in their subsequent national plan.

Indeed, it is central, to promote the link of Mine Risk Education (MRE) and dissemination of the basic key points on first aid by using existing networks of volunteers and to have a cultural approach to the training, including discussions on existing beliefs and misconceptions.

In order to enable those Countries to implement the above mentioned recommendation, it is necessary to have the full support, both political and financial, from States in a position to do so to help:

- to support the relevant NGOs and local communities to implement training for 'first responders' and
- to support the most affected States to develop, within their national health structure, low cost rural decentralised medical facilities to improve the quality of medical response.

The Co-Chairs extend and express the concern about the increasing number of casualties and problems and to provide adequate assistance also to the Non Signatory States to the Mine Ban Treaty. We encourage these States to use the tools devised for Victim Assistance.

It is important to underline that all these activities, according to the principle of non-discrimination of all victims, aim at ensuring to all individuals equal access to emergency and continuing care for injuries unrelenting in accidents, regardless of age, sex or social condition.

Switzerland and Afghanistan intend to remain committed to the issue and to ensure, with the support of the incoming Co-Chair, the follow up of the implementation of this objective.