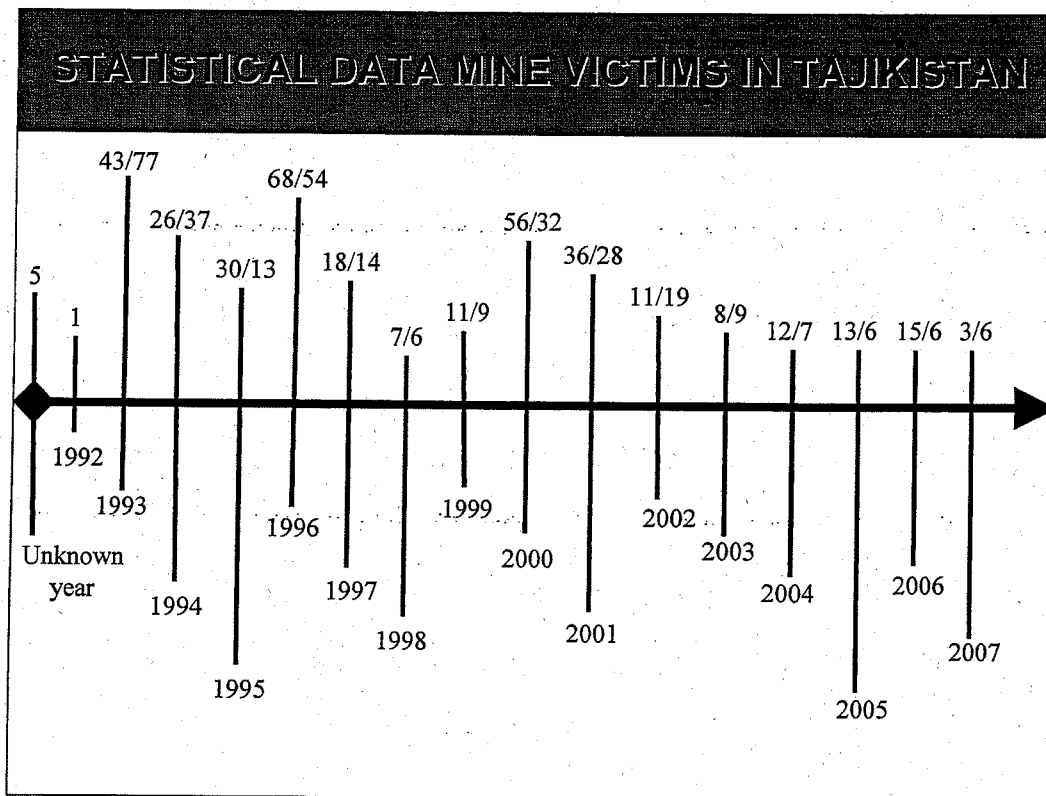


Dear Co-chairs, excellencies, ladies and gentlemen!
For your attention presented Victim assistance in Tajikistan!



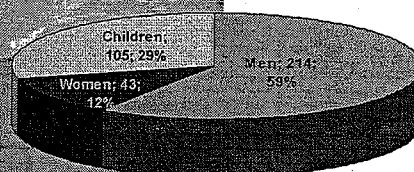
First slide show you statistical data on mine victims in Tajikistan. Since landmines were first laid in Tajikistan, there has been 325 deaths and 362 injuries connecting with landmines and explosive remnants of war (ERW) which included also victims of CMs.

We started to separate landmine victims from cluster munitions victims recently. Data on landmine survivors as well as cluster munitions survivors is not fully collected.

Regrettably amount of accidents, connecting with landmines and CMs, is decreasing rather slowly. In 2007 there have already been 9 casualties = 3 injured (2 children) & 6 killed (1 children).

STATISTICAL DATA MINE VICTIMS IN TAJIKISTAN

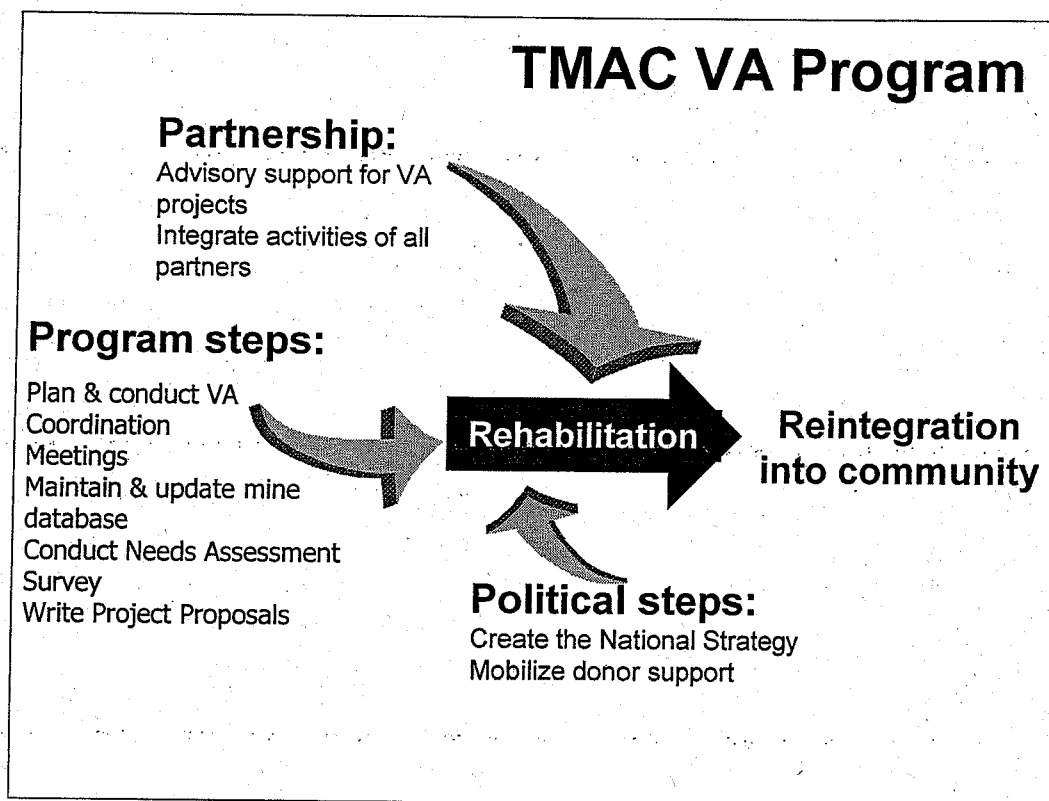
Total number of injured - 362



Total number of killed - 325



TMAC collects data on mine casualties in cooperation with the ICRC and Red Crescent Society, by requesting information from official sources and questioning people in mine-affected communities.



VA program is responsible for the following:

We create the national strategy, write project proposals, update database, conduct coordination meetings and Needs Assessment Survey. We work with the government and NGOs and coordinate all VA work in the country. We offer support for the implementation of all VA projects and finally we mobilize donor support!



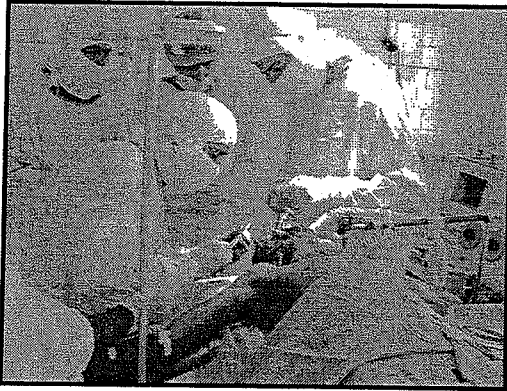
Problems in Tajikistan

- ✦ Poverty / Economic hardship;
- ✦ Unemployment;
- ✦ Lack of opportunities for reintegration;
- ✦ State disability pensions are very small;
- ✦ Absence of psychological support;
- ✦ Medical services located in urban centres are too expensive;
- ✦ Lack of funding commitment.

From another side we have some problems in Tajikistan, which are hindering VA work in Tajikistan. Now I am going just mention them.

1. Tajikistan is a very poor country. There is widespread POVERTY and lack of economic opportunities for people, even for healthy people, let alone for people with disabilities.
2. UNEMPLOYMENT which resulted in hundreds of thousands of Tajiks to move to Russia to work, even a number of survivors moved there.
3. LACK OF OPPRTUNITIES FOR REINTEGRATION: If somebody is injured in Tajikistan, it's almost impossible for them to either get a job or be reintegrated into their communities the same way as they wree before. The become a burden on their families.
4. VERY SMALL STATE DISABILITY PENSIONS: The government of Tajikistan can only afford to pay a very small pension to people with disabilities. For example on average, a disabled person receives, 20-30 Tajik somonies, which is less than 10 dollars per months. This pension is simple too small amount. You can not afford to live with this small amount.
5. ABSENCE OF PSYCHOLOGICAL SUPPORT. Most of landmine survivors are people in rural areas where there is not psychological support. Some of these villages are so remote that it's very hard to get to them during the summer and in winter, some are completely cut off from the rest of the country because of snow.
6. MEDICAL SERVICES LOCATED IN URBAN CENTRES ARE TOO EXPENSIVE: There are some services available in big cities, but it's expensive form villagers to come and medicines are too expensive to afford.
7. LACK OF FUNDING COMMITMENT.

Emergency and continuing medical care



■ Project of WHO "Assessment of the preparedness of the local medical facilities to provide emergency medical care" is going on.

■ 29 survivors received treatment in different hospitals - 2006; 15 -2007.

■ 13 district hospitals received trauma and anesthetics kits from WHO.

Next slide show you the progresses made by Tajikistan in the providing emergency and long-term medical care for landmine survivors.

-MoH is implementing National Strategy on Health. This includes transition into family doctor practice, strengthening of capacity, trainings for staff and paid medicine. There will be several exceptions to paid medicine including persons with disabilities and emergency cases.

-Project of WHO "Assessment of the preparedness of the local medical facilities to provide emergency medical care" is going on.

-15 survivors received treatment in different hospitals in 2007.

-13 district hospitals received trauma and anesthetics kits from WHO;

Emergency and continuing medical care (cont)



**Training for tajik doctors in the Slovenia
Institute for Rehabilitation, November
2007.**

First Introduction trainings on rehabilitation for 3 tajik doctors in the Slovenia Institute for Rehabilitation was conducted during two weeks in November 2007 with financial support of ITF.

Physical Rehabilitation at the National Ortho Centre

- Free transportation to and from Dushanbe;
- Accommodation;
- 3 hot meals / day during their stay.



Most landmine survivors have access to physical rehabilitation services at the NOC in Dushanbe run by the MLSP in cooperation with the RCST with ICRC financial and technical assistance.

Survivors are provided with free transportation, accommodation & 3 hot meals at the Center during their stay.

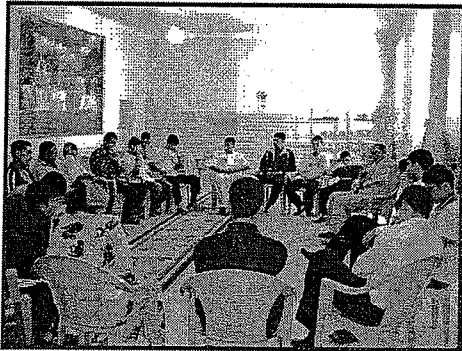
until 1 november 2007 – 37 mine/CM survivors were received at the National ortho center.

Summer Camp

In 2005 - for 32 survivors

In 2006 – for 19 survivors

In 2007 – for 25 survivors



Every summer TMAC together with its partners including ministry of labour and social protection, NGO "Garmony of the World" and the Red Crescent society of Tajikistan, organizes a summer camp to help the physical and psychological rehabilitation of a small group of survivors. This included psychology individual and group sessions, art-therapy and so on.

In 2007 25 young survivors received treatment in sanatorium "Sadbag" in the Romit district.

Professional Training



- 2 survivors entered at Special School for Disabled Children in 2007 and 2 - graduated in 2007;
- School offers classes in accountancy, IT, tailoring, shoe and TV repairing;
- 3 Female survivors are included in the project "Social reintegration of vulnerable women in the Sugd region".

2 landmine survivors at present is getting education in the special boarding school for young people with disabilities and two – graduated in 2007.

In 2007 in the frames of integration with other projects three female survivors were included and successfully finished training in the project of RCST "Social reintegration of vulnerable women in the Sugd region".

Socio-economic Rehabilitation

- Bee-keeping Project for 21 survivors' families is underway;
- 8 Individual Income generation projects for 11 survivors have been supported;
- 72 landmine survivors entered the income generation scheme.

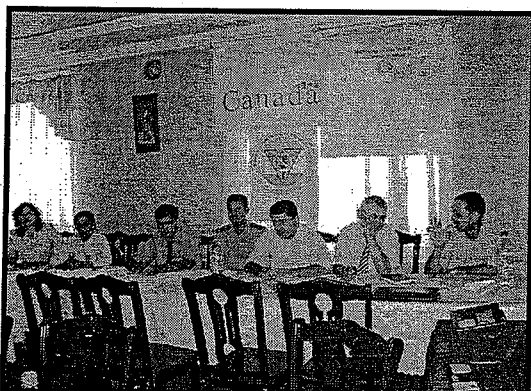


Access to employment by landmine survivors is exacerbated by high unemployment in Tajikistan. Poverty and lack of development in affected communities hindering the economic reintegration of persons with disabilities.

Income generation scheme, implemented by Red Crescent Society of Tajikistan has begun in 2005 by giving a breeding pair of goats or sheep to 72 families. But unfortunately in the 2006 the third stage was not supported by donors.

In the framework of the Individual income generation projects TMAC helped 11 survivors in 2007.

Laws and public policies



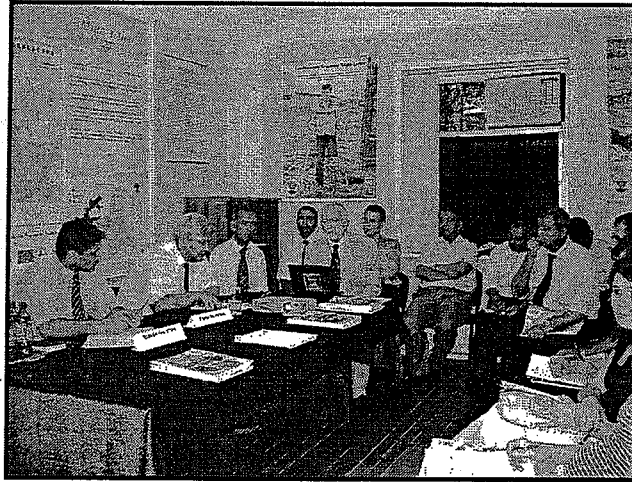
- ➡ In accordance with legislation of the RT, the basic rights and freedoms of PwDs, as with all citizens, are equally guaranteed.
- ➡ Harmonization of Tajik legislation according to the implementation of the International Humanitarian Law.
- ➡ Ratification of UN Disability Rights Convention with financial support of US Embassy is going on

Tajikistan has legislation protecting the rights of persons with disabilities, including mine survivors, to medical care, physical rehabilitation, socioeconomic reintegration and pensions. In accordance with the Constitution and other legislation of the RT, the basic rights and freedoms of PwDs, as with all citizens, are equally guaranteed.

- Project on "Harmonization of Tajik legislation according to the implementation of the International Humanitarian Law" was supported by CIDA and conducted by NGO "Harmony in the World" with coordination of TMAC. In the result of analyzing of the existing legislation and two round tables it was recognized that should develop a "National program for improving the QoL of PWDs. Recommendations will be presented for consideration of the Government of RT .
- Ratification of UN Disability Rights Convention Ratification with financial support of US Embassy is going on

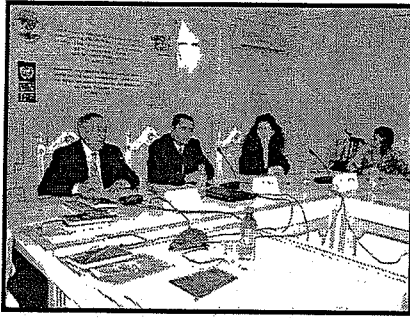
Government Measures

- Adoption of Tajikistan's Victim Assistance objectives and plan of action 2005-2009 by the CIIHL, 27 of July, 2006
- Establishing an inter-ministerial coordination group



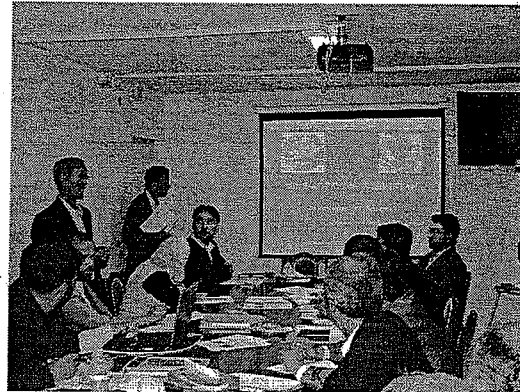
Government of Tajikistan try do their best within the framework of Tajik Legislation to provide assistance for victims' families and survivors but problems including budget shortages force us to ask for funding from donors states.

The government of Tajikistan adopted the VA plan of Action and established an inter-ministerial coordination group which discusses VA challenges and tries to coordinate the work of all relevant government ministries and integrate their work into wider government programs.



Participation of Tajik VA delegation in the second National VA Workshop in Afghanistan, Kabul, 23-25 October 2007

**Workshop on the implementation of the Mine Ban Treaty,
Dushanbe, 30 March 2007**



On 30 March 2007, the ICBL and the Tajik Mine Action Center (TMAC) jointly held a workshop in Dushanbe to discuss progress made and remaining challenges in treaty implementation in Tajikistan.

The necessary recommendations to the international community and to the government of Tajikistan were made.

Tajik VA delegation actively took part in reviewing & discussion of the status & progress of the VA Plan at the second National VA Workshop in Afghanistan in the October 2007. It brought worthwhile experience for Tajikistan VA program.

Portfolio of Mine Action Projects

1. **RCST: Rehabilitation and reintegration of mine victims through social centers (51,251)**
2. **RCST: Community income-generating initiatives for mine victims (26,770)**
3. **MoH: Ongoing Medical Care for landmine survivors (18,990)**
4. **NOC and MLSP: Travel and subsistence assistance for mine victims at national Ortho centre (35,385)**
5. **TMAC and RCST: Victim Assistance Needs Assessment Survey (9,700)**
6. **RCST: Socioeconomic Reintegration of Landmine Survivors (33,040)**
7. **NRIRPwDs: Support to ongoing medical care and physical rehabilitation for persons with disabilities including landmine survivors (141,500)**
8. **TMAC and RCST: Summer Camp for Landmine Victims (10,000)**
9. **NRIRPwDs: Juridical Support Centre for mine survivors (7,336)**

We included nine projects totalling about (333.972 \$) 400 thousand dollars in the 2008 portfolio of mine action projects. These proposals are all in the portfolio. If you are interested, you can have a look.

Plan of Action

- ✦ **Complete NA survey (including assessment of economic status of landmine and CM survivors);**
- ✦ **Provide all need survivors with prosthesis by 2009;**
- ✦ **Provide psychosocial support to at least 50% of registered mine/UXO survivors by the end 2008.**
- ✦ **Train 50 healthcare workers to improve pre-hospital emergency response capacity in all mine-affected districts by the end 2007;**
- ✦ **30 survivors will participate in the Summer Camp;**
- ✦ **72 victims and their families continue participate in Income Generation Project and 72 new beneficiaries will begin new cycle;**
- ✦ **Disseminate the directory of economic reintegration services in Tajikistan to all mine affected communities by the end of 2007.**

From our 5-year national strategy, we have a time-based plan action for 2005-2009 years and we know what we can do and what we want to do. We recognize our potential and know that we can do a good job. We just need help and financial support to make it work.

**Thank you for your
attention!**

**Reykhan Muminova,
TMAC VA Officer**

**17 November 2007
Amman**

Thank you for attention!