This policy brief is an introduction to the policy paper on victim assistance in the context of mines and explosive remnants of war. The full version of the policy paper is available on Skillweb: http://www.hiproweb.org/uploads/tx_hidrtdocs/PP11VictimAssistance.pdf

Key messages

Handicap International has an historic commitment to victim assistance (VA) that goes back nearly three decades. Many of the beneficiaries of Handicap International’s initial and ongoing projects were survivors of mines and explosive remnants of war (ERW). Since its inception in 1982, Handicap International has delivered services and supported existing services with technical advice in domains ranging from medical care, rehabilitative services, from fitting artificial limbs to providing psychological support, as well as contributing to the development of inclusive education, social services, livelihoods and leisure programs, and supporting awareness-raising and training. At the end of 2009, we expanded our involvement by supporting national authorities to improve coordination for VA and other efforts to advance a disability inclusive society.

Over the years, Handicap International has contributed to developing a common understanding of VA as a long-term process that aims to ensure the participation and inclusion of mine/ERW victims and people with disabilities in general in society in a sustainable manner. In an effort to prevent further humanitarian harm and to address the consequences of mine/ERW, Handicap International not only works on VA, but on four of the other five pillars of humanitarian mine action as well, namely: advocacy, humanitarian demining, stockpile destruction and mine risk education.

Handicap International is involved in victim assistance (VA) today for four key reasons, namely:

1) Our long standing commitment to provide support to victims/people with disabilities;

2) Our key role in international advocacy for the universalisation of the ban on landmines and cluster munitions and for the comprehensive implementation of the related conventions, in particular regarding VA;

3) Our ongoing work in field level delivery of VA, capacity building to improve national VA coordination, and national and international advocacy for the inclusion of victims and people with disabilities;

4) VA in the context of the Mine Ban Treaty (MBT) and Convention on Cluster Munitions (CCM) as an important means by which way to address disability issues in countries for which this is not ‘on the radar’.
Why Handicap International works in the field of victim assistance

**Definition: Victim versus survivor**

Handicap International understands the term 'victim' as referring to those persons killed or injured by mine/explosive remnants of war (ERW), as well as their families and mine/ERW affected communities; a conceptualization that is now officially recognized in article 2 of the CCM and articulated as follows: "All persons who have been killed or suffered physical or psychological injury, economic loss, social marginalization or substantial impairment of the realization of their rights caused by the use of cluster munitions."

In order to make a distinction between those people that had an accident with a mine/ERW and other victims of the same weapon, the notion of 'direct' victims has been introduced to refer to people injured or killed by mine/ERW, and 'indirect' victims to refer to family of the person directly affected by a mine/ERW accident as well as communities affected by mine/ERW. Mine/ERW victims are all, in one degree or the other, affected by the consequences of mine/ERW suspicion and presence in their community.

One may also come across the term 'casualty', which carries the same meaning as the term 'direct victim' and denotes a person who had an accident with a mine/ERW and who was either injured or killed. Another more commonly used term is that of 'survivor' which is used more specifically to refer to a person who had an accident with a mine/ERW and survived it.

The term 'victim' tends to evoke a charitable and disempowering image, but, given the now internationally and legally accepted enlarged understanding of 'victim' under the MBT and the CCM, Handicap International has decided to also use this term. Another reason for using this term is that it allows us to broaden the scope of our 'VA' work to go beyond survivors and include affected families and community members as well.

**Legal frameworks contexts and linkages with the Convention of the Rights of Persons with Disabilities**

Victim assistance is an obligation enshrined in two instruments of international humanitarian law: The Mine Ban Treaty (MBT) and the Convention on Cluster Munitions (CCM). These two instruments reflect that victims have rights equal to the rest of the population. This means that victims have the right to assistance and that States Parties have the obligation to implement it and be accountable.

Strong linkages exist between VA in the MBT, CCM and the Convention of the Rights of Persons with Disabilities (CRPD) and synergies between these three conventions are evident. The evolution of the understanding of disability has been mirrored by the evolving understanding of VA. As defined by the Convention on the Rights of Persons with Disabilities, disability is now widely understood as “an evolving concept [which] results from the interaction between persons with impairments and attitudinal and environmental barriers that hinders their full and effective participation in society on an equal basis with others.” As such, the entry into force of the Convention on the Rights of Persons with Disabilities in 2008 has strengthened recognition of the rights of people with disabilities, including those impaired by mine/ERW. This Convention currently is the highest human rights standard pertaining to people with disabilities and has an explicit social development dimension. It provides a human rights framework for the implementation of VA.

**Context of Handicap International’s work**

In the context of the MBT and the CCM, States Parties have agreed that VA is comprised of the following six elements:

1) Understanding the extent of the challenges (data collection); 2) Emergency and ongoing medical care; 3) Rehabilitation; 4) Psychological and psycho-social support; 5) Socio-economic inclusion; 6) Laws and public policies.

Rather than using the terms ‘medical care’ and ‘socio-economic inclusion’ - which were developed in a disarmament context - Handicap International has deliberately chosen to align the four service-related aspects of VA with the Convention of the Rights of Persons with Disabilities.

As such, Handicap International refers to services in the following sectors/policy areas:

1) Health; 2) Rehabilitation; 3) Psychological and psycho-social support (including cultural, sports and leisure activities); 4) Education; 5) Work and employment. In addition, Handicap International proposes a sixth area, namely: adequate standards of living and social protection.
How Handicap International works in the field of victim assistance

Principles of intervention

Non-discrimination: The Article 5 2(e) of the CCM prohibits discrimination against and among cluster munition victims as well as between cluster munition victims and those who have suffered injuries or disabilities from other causes. VA should rely on strategies and systems developed for people with disabilities and as such, these should reach survivors as well. Equally, initiatives developed in the context of VA should not only benefit survivors, but people impaired through other causes as well.

Twin-track approach: In order to ensure that the goal of inclusion is reached, VA efforts need to be oriented in a twin-track approach. It requires the integration of VA into existing healthcare and social service systems, and policy frameworks, as well as related plans and programs (without required the development of a parallel system). At the same time, it requires support to specific empowerment initiatives, so that victims and people with disabilities are identified and get autonomy to access services and claim for their rights.

Recognizing the specific needs of survivors: The VA provisions reinforce action in response to the needs of survivors, namely: Access to first aid, a safe supply of blood, trauma surgery skills & eye sight saving measures; Support with post-traumatic stress disorder; Access to rehabilitation services including prosthetics and orthotics; and work to eliminate negative local attitudes towards survivors.

Gender approach: Gender is a guiding human rights principle of Handicap International’s work, thereby making sure that every victim can benefit equally from our interventions. Whereas men constitute the majority of casualties, women constitute the majority of indirect victims. And, if one looks at the trends, amongst casualties men have a much greater chance to survive their accident than their female counterparts.

Projects with a victim assistance approach

1) Facilitating access to services through the establishment of a system that links survivors, people with disabilities and their families to services:
   - Service mapping and issuing of a directory of services for victims and people with disabilities
   - Awareness raising on the situation of victims and other people with disabilities as per the MBT, the CCM and the CRPD
   - Personalized social support.

2) Support to provision of services for victims and people with disabilities in the following sectors:
   - Health (emergency and ongoing medical care)
   - Physical and functional rehabilitation
   - Psychological and psycho-social support
   - Adequate standards of living and social protection
   - Education
   - Work and employment.

Applying for VA earmarked funds for a project with a VA approach does not change anything about the service support’s aspect of the project, but it should include the following activities:
   - Identify how many survivors, and possibly, indirect victims are amongst beneficiaries of the project
   - Establish a clear link between the project and, if in place, the authority responsible for coordinating VA and/or disability
   - Show linkages between the expected results of the project and objectives in an existing national action plans on VA or on disability
   - Participate in meetings of the national level coordination committee on VA, if present
   - Establish collaboration with Survivor’s and Disabled People’s Organizations to assist with identifying victims and other people with disabilities and to empower them as part of the global disability movement.

Projects with specific victim assistance interventions

1) Capacity building of national authorities
   - Support to national authorities with conduct of survivor needs and capacities assessment
   - Development, implementation and monitoring of national VA/disability action plan.

2) Advocacy for victim assistance
   - International advocacy
   - National advocacy
   - Ban Advocates.

3) Research on victim assistance

4) Collective development of mine/ERW impacted communities
Recommendations for the implementation of national action plans on Victim Assistance and disability

This focus lists key elements that comprise Victim Assistance (VA) according to Handicap International, and which should be reflected in national action plans on VA/disability.

1. Sectors/policy areas

In order to take a comprehensive approach to inclusion, National Action Plans on Victim Assistance should include actions that target the provision of services in the following sectors/public policy areas: health, rehabilitation, psychological support, adequate standards of living and social protection, education, as well as work and employment.

2. Cross-cutting issues of accessibility, empowerment and awareness-raising

National Action Plans on Victim Assistance should systematically include actions to improve these issues – all crucial to ensuring sustainability. **Accessibility measures** should eliminate obstacles and barriers in urban and rural areas to buildings, roads, transportation, schools, housing, medical facilities and workplaces, as well as to information and communications. **Empowerment measures** should ensure survivors know their rights and are able to advocate for them. **Awareness-raising measures** should ensure that the rights and capacities of survivors are known and respected throughout society.

3. Implementation support measures

National Action Plans on Victim Assistance should: include measures to collect relevant statistics and data, including assessments on the needs and priorities of survivors and available services; ensure national legislation embodies the rights and obligations of survivors and other people with disabilities; include a disability perspective in all policy-making; provide relevant capacity building and training to all stakeholders involved in Victim Assistance; ensure Victim Assistance is governed through an inter-ministerial, multi-stakeholder process that coordinates work through a focal point; and mobilize national and international resources. All of these efforts should be incorporated into, or at least linked to, broader disability, human rights and development frameworks at national and international level.

4. Guiding principles on human rights

National Action Plans on Victim Assistance should integrate specific and cross-cutting actions to advance human rights principles, especially those of non-discrimination, special attention to vulnerable groups, full and effective participation and inclusion, and age and gender considerations.

5. Monitoring and reporting

National Action Plans on Victim Assistance should include mechanisms for annual monitoring and reporting at national and international levels, on the status and progress of Victim Assistance implementation. Reports should include information on the progress made during the reporting period, challenges in implementing the National Action Plan, the amount of resources allocated for its implementation, factors affecting its degree of fulfilment, and updated objectives.

6. International cooperation and assistance

National Action Plans on Victim Assistance drawn up by mine/ERW-affected States should include information on the technical, economic and other resources required from the international community to complement national resources. State Parties committed to international cooperation and assistance should also support the implementation of Victim Assistance by: a) providing support to specific aspects of the National Action Plan on Victim Assistance, and b) ensuring cooperation policies and programs are designed to be inclusive of, and accessible to, survivors and other people with disabilities (including bilateral and multilateral cooperation and support to international and non-governmental organizations).