## Wednesday 27 November/Thursday 28 November

## Agenda item 7 - Review of the operation and status of the Convention: (d) Assisting the victims

Landmines remain a major threat to the physical safety of people, and the longer-term development of communities. The UK believes that **support for mine victims is essential**. That support needs to be sustainable, and to offer the full range of support to victims, we may need to draw on wider sources of funding.

In the UK's experience, the **most effective**, **efficient and**, **importantly**, **sustainable approach** to address the long-term needs of mine victims is through support that is integrated into wider health, social and economic development programmes in affected countries.

Victim assistance that is integrated into wider healthcare frameworks, for example, will ensure that mine victims have the same access to services as other persons with disabilities. More than half of all people with disabilities live in countries affected by conflict and natural disasters. In those contexts, people with disabilities are at greater risk of abuse,

exploitation, discrimination and serious harm. Despite this, people with disabilities are often invisible in, and excluded from, the humanitarian response, and are unable to access adequate assistance and protection due to physical, communication and attitudinal barriers. The UK's position is clear: we want to deliver inclusive support for all. We do not discriminate against, or among, persons with disabilities, whether they be victims of anti-personnel mines, cluster munitions, armed conflict generally, or disabled through illness, accident or other causes.

Victim assistance **programmes that are targeted** at particular groups, through mine action, run the risk of not meeting the lifetime needs of mine victims as they are unlikely to continue when mine action programmes end. In addition, they risk duplication of effort, creating parallel systems of support that can take support away from people disabled through other causes, and potentially reduce resources available to tackle the real root cause, namely mine clearance, risk education and capacity-building.

The UK works to **strengthen health care systems** in many of its partner countries and mine-affected states, as well as **mainstreaming** 

**social inclusion,** and disability in particular, across its broader development interventions.

The UK invests heavily in **increasing overall health standards** in a number of countries. For example, we are providing £250 million from 2015 to 2020 to sustain and accelerate primary health care in Ethiopia. The programme improves the readiness of primary health care units, the availability of essential public health commodities and the skills of primary health care providers. This supports the delivery of Ethiopia's current five-year Health Sector Transformation Plan.

Other UK programmes are working to deliver more specialist healthcare services, in an inclusive way, that ensure **mine victims have access to the healthcare they need**, as part of support to the wider communities. The UK is a founding donor of ATscale, a global partnership that aims to transform access to assistive technology such as wheelchairs, prosthetics, hearing aids and glasses. ATscale will collaborate with a broad range of stakeholders and aims to reach 500 million more people with life-changing assistive technology by 2030.

Last year, the UK launched its landmark Disability Inclusion Strategy.

. The Strategy sets out how we will mainstream disability inclusion into HMG's development systems, structures and cultures – in all policies, programmes, in all country offices and across all sectors – as well as undertaking specific and focused action for people with disabilities. This work will benefit all people with disabilities in partner countries, including landmine victims.