

# LANDMINE VICTIM ASSISTANCE IN INTEGRATED MINE ACTION PROGRAMS

## RECOMMENDATIONS



*Photo courtesy Stephanie Koorey*

by

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## SUMMARY

The ultimate aim of mine action programs is to facilitate a lasting improvement in the daily lives of people living in mine-affected communities. To comprehensively realize this aim, it has been recognized that more attention should be given to addressing the particular needs of survivors of landmine and unexploded ordnance (UXO) incidents living within target communities. Mine survivors and other people with disabilities are among the most impoverished groups in every society, yet the *Landmine Monitor Report 2005* points to an important gap: “local and international NGOs report that a lack of funding, especially long-term funding, is limiting their operations and sustainability of programs [for mine survivors]. There is a greater understanding about the extent of the problem, and that existing programs are far from meeting the needs.”<sup>1</sup>

This document is intended to encourage organizations and agencies to take a more proactive approach in their response to addressing the rights and needs of landmine and UXO survivors as part of integrated mine action programs, and, more broadly, to provide scope for the involvement of all people with disabilities in the target communities where programs are being implemented.

## OVERVIEW

Victim assistance is a core component of mine action and an obligation of States Parties under the Mine Ban Treaty. Article 6.3 of the Treaty stipulates that “Each State Party in a position to do so shall provide assistance for the care and rehabilitation, and social and economic reintegration, of mine victims...” The Mine Ban Treaty’s Standing Committee on Victim Assistance and Socio-Economic Reintegration promotes a comprehensive integrated approach to victim assistance that rests on a three-tiered definition of a landmine victim. This means that a “mine victim” includes directly affected individuals, their families, and their communities. Therefore, victim assistance is viewed as a wide range of activities that benefit individuals, families and communities.<sup>2</sup>

The Final Report of the First Review Conference of the Mine Ban Treaty<sup>3</sup> provides a clear framework on which to develop a victim assistance component in integrated mine action programs. Two statements are particularly relevant:

- “...the call to assist landmine victims should not lead to victim assistance efforts being undertaken in such a manner as to exclude any person injured or disabled in another manner”<sup>4</sup> and
- “...providing adequate assistance to landmine survivors must be seen in a broader context of development and underdevelopment....ensuring that a real difference can be made may require addressing broader development concerns. It is now widely recognized that victim assistance should be integrated into development plans and strategies....”<sup>5</sup>

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<sup>1</sup> International Campaign to Ban Landmines, *Landmine Monitor Report 2005*, Mines Action Canada, Ottawa, October 2005, p. 52.

<sup>2</sup> In the context of this report, the terms “survivor” and “survivor assistance” are also used. “Survivor” is used when referring to the individual that survives a landmine explosion. “Survivor assistance” refers to activities aimed at this individual, rather than the family, or community, as a whole. “Casualty” is sometimes used to refer to the individual directly impacted by a landmine explosion, whether killed or injured.

<sup>3</sup> “Final Report of the First Review Conference 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, Nairobi, 29 November – 3 December 2004,” APLC/CONF/2004/5, 9 February 2005, pp. 26-33. For the full report see [www.reviewconference.org](http://www.reviewconference.org)

<sup>4</sup> *Ibid.*, p. 27.

<sup>5</sup> *Ibid.*, p. 28.

Integrated mine action refers to activities on two levels. First, integrated mine action is defined by programs comprised of four of the five pillars of mine action: demining, mine-risk education, victim assistance, and advocacy. Non-governmental programs do not tend to be involved in stockpile destruction, the fifth pillar of mine action. Second, integrated mine action refers to programs integrated with other sectors including, among others, health, education, and agriculture. Mine action is increasingly integrated into poverty reduction strategies and long-term development plans with the understanding that mine action must be considered in the broader context of development and under-development to work efficiently and achieve a lasting impact. Perhaps most importantly, integration requires that community development be undertaken after mine clearance has been completed, and ideally this should include activities resulting in the productive use of the demined land. In this sense, integrated mine action programs seek to make productive use of mine cleared land, to underline and enhance the cost-benefit of demining efforts, and to support the social and economic development efforts of communities.

All these aspects of integration are essential to improving the response to issues faced by landmine and UXO survivors. A truly integrated program will focus on each of the four core elements of mine action, emphasizing victim assistance and advocacy as much as mine clearance and mine risk education, even when a greater portion of the program budget may be dedicated to demining. From a development perspective, the added attention given to the rights and needs of mine survivors through the Mine Ban Treaty has in effect raised awareness of the rights and needs of all persons with disabilities. This focus has seen the building of infrastructure and capacities to address some of the needs of people with physical disabilities, regardless of the cause, in many mine-affected countries. However, an improvement in the daily life of people with a disability cannot be separated from the sustainable development of their community as a whole. The needs of landmine survivors are long-term, often lasting a lifetime, and far exceeding the duration of mine clearance and integrated mine action efforts. Services to survivors should form a critical part of post-clearance development efforts, based on a rights-based and social approach to disability, and ultimately seek to integrate services for people with disabilities into existing structures.

A twin-track approach to disability in mine action programming is therefore essential: addressing inequalities between disabled and non-disabled persons in all strategic areas of the work, while at the same time, supporting specific initiatives to enhance the empowerment of people with disabilities.<sup>6</sup> These two approaches – targeted services for people with disabilities, including mine/UXO survivors, where necessary and integration wherever possible – should be an integral component of all integrated mine action programs.

Inclusion of people with disabilities is a widely accepted component in rights-based approaches to development and is as important as integration where victim assistance is concerned. Equality of rights and opportunities for people with disabilities in the target communities is particularly noteworthy in so far as it relates to socially and economically marginalized people who would be systematically excluded unless policy and programs recognize their rights and address their specific needs. The 1999 “Bad Honnef Framework” provides guidelines for the integration of victim assistance in mine action programs and reinforces the role of mine action in broader development assistance.<sup>7</sup> The framework is based on three principles:

- Participation – all programs require the appropriate involvement of those affected, at all levels and from the beginning;

<sup>6</sup> Department for International Development (DfID), “Disability, Poverty and Development,” United Kingdom, February 2000, p. 11.

<sup>7</sup> German Initiative to Ban Landmines, “Mine Action Programmes from a development-oriented point of view (The Bad Honnef Framework),” June 1999. Full text available at [www.landmine.de/fix/BH\\_English.pdf](http://www.landmine.de/fix/BH_English.pdf)

- Coherence – programs should be embedded between straight emergency relief measures and long-term development programs;
- Solidarity – programs should encourage independence and not promote new dependencies.

The most basic “Bad Honnef” principle is that “the needs and aspirations of people affected by mines are the starting point for mine action programmes.”<sup>8</sup> The framework also includes guidelines for emergency first aid, physical rehabilitation, socio-economic, cultural, and psychological rehabilitation, and encourages the allocation of funds to the different categories of mine action, including victim assistance.<sup>9</sup>

The United Nations Standard Rules for Persons with Disabilities,<sup>10</sup> adopted by the UN General Assembly in December 1993, also imply a strong moral and political commitment to take the necessary actions to ensure that people with disabilities enjoy the same rights and opportunities as other members of their communities. The rules cover areas such as preconditions for equal participation (awareness-raising, medical care, rehabilitation and support services), and target areas for equal participation (accessibility, education, employment, income maintenance and social security, family life and personal integrity, culture, recreation and sports, and religion).

People with disabilities are among those which social development practice seeks to protect and empower as a cornerstone to achieving successful and sustainable programs. Many countries with low levels of development often lack legislation to protect the rights of people with disabilities. Therefore, equitable treatment in the social and economic life of the community, as well as in the development process, will not be achieved without programs conscientiously designed to support the rights and needs of such marginalized groups. As an integrated part of the development process, mine action must strive to adopt a rights-based and participatory approach; an approach particularly relevant to victim assistance. Indeed, the catch-cry of Disabled People’s Organizations is “nothing about us without us.” This statement should influence every stage of the program cycle, from planning to assessment.

## **RIGHTS AND NEEDS OF MINE/UXO SURVIVORS AND OTHER PEOPLE WITH DISABILITIES**

The situation facing mine survivors and other people with disabilities share common characteristics even though the situation in every community, and for each individual and their family, is unique. These common elements suggest that integrated mine action programs seeking to benefit landmine and UXO survivors should strive to achieve not just service delivery but also social change and empowerment.

Mine survivors and other people with disabilities have the same rights, and often the same basic needs, as other members of their communities including access to health care, food, water, education, training and income generating activities, and legal representation. Yet they are typically the poorest and most vulnerable, in their communities. They can face discrimination and misunderstanding from their families and communities – the very people upon whom they depend.

People with disabilities are often not regarded as, nor have the opportunities or confidence to become, fully contributing members of their community. For those living in rural communities, their daily life is made more difficult due to poor access to health and rehabilitation services, poor food security, and isolation. In many mine-affected countries, extreme poverty is widespread and all members of target communities stand to benefit from an integrated mine action program that addresses developmental issues such as food security

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<sup>8</sup> Ibid, p. 5.

<sup>9</sup> Ibid, pp. 6-7, 10. S

<sup>10</sup> United Nations General Assembly, document A/RES/48/96, 20 December 1993.

and access to water. However, when a family member has a disability or is involved in a mine explosion the situation can become even more insecure due to the extra demands on the resources of the family for health care, medicines, and rehabilitation.

Women and children are among the most vulnerable. Women with disabilities are likely to be poorer, less healthy and more socially isolated than their male counterparts. Special attention is needed to ensure that women and girls with a disability have equal access to services. In addition, women are often the primary caregivers or become the principal income earner or head of the household if their partner is killed or injured in a landmine explosion. For the child of a mine casualty, the impact on the economic situation of the family often results in children losing the opportunity to gain an education, as the child is forced to look for employment to support the family.<sup>11</sup> In some cases, a mine explosion can lead to the break up of families as children are sent to live with relatives when their immediate family is no longer able to provide for them.<sup>12</sup> Children are also especially susceptible to exploitation, abuse and neglect when they suffer from a disability. Health workers often receive little or no training on disability issues and teachers lack knowledge on how to work with children with disabilities.

The cost of hospital services is often beyond the limited means of the mine casualty and their family. Transport costs are increased because the casualty is often accompanied by a carer, usually the spouse. Spouses frequently have to shuttle back and forth between the hospital and the home to take care of other domestic duties and to care for children, incurring additional transport costs. In addition, there are charges for staying in hospital – sometimes for several weeks or months. Families often sell land or other family assets such as livestock, or borrow money, often at high interest rates, to cover the costs of emergency medical care. If the injured person was the main provider, the family is not only faced with the loss of the food or income that he/she provided, but the added burden of debt.

The means of ensuring food and an income to support the family during the rehabilitation phase or the fitting of artificial limbs is also an issue. Many survivors reportedly struggle to raise the money to cover their travel costs to the rehabilitation centre. These may be reimbursed later but the reimbursement is often not sufficient to cover the total costs. In addition, the amputee may be away for three weeks or more during the fitting period, placing an extra burden on the family if he/she was the main provider. A similar situation applies if a mine survivor or other person with a disability participates in a vocational training program. Depending on the length of the training, the family will have to find alternate means of support for food and income if the person participating in the training was the main provider.

In 1999 and 2000, Jesuit Service Cambodia conducted a survey as part of its outreach program. As a result of the survey, mine survivors developed a 12-point plan to address their needs and priorities. The plan provides useful indicators when addressing the needs of mine survivors in program planning.

- The villager has a house that shelters the family from the weather.
- Villagers have enough food.
- Villagers have access to water for drinking and cleaning.
- Children have access to school and adults to learning opportunities.
- The family has access to primary health services.
- Survivors have access to income generating possibilities for family expenses.
- There are no mines left in the housing, farming and recreational areas of the village.

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<sup>11</sup> UNICEF, “Impact of Landmines on Children in the East Asia and Pacific Region,” East Asia and Pacific Regional Office, UNICEF, September 2003, pp. 10-11; available at [www.unicef.org/emerg/regional\\_assessment\\_final.pdf](http://www.unicef.org/emerg/regional_assessment_final.pdf)

<sup>12</sup> “Action for Victim Assistance: Cambodia 2003,” Disability Action Council, Cambodia, September 2003, p. 8.

- Villagers deprived of land due to war and mines receive title to available demined or other land.
- Disabled survivors have access to prosthetics, wheelchairs, hearing aids, counselling services.
- Roads to market, with bridges and water control systems, are available to the village.
- Villagers participate in common projects, social and cultural events, and in decisions that affect their lives.
- Villagers discuss and solve issues affecting them.<sup>13</sup>

Where issues of disability in the development context are concerned, achieving social change is required in order to achieve tangible development outcomes. It is essential to address the root causes of vulnerability in order to reduce poverty. Victim assistance inputs should overlap with the human rights community on issues not previously thought to be a part of development – let alone mine action – such as justice, governance and democracy. Small advocacy activities can go a long way to empowering people with disabilities in the community. Perhaps most importantly, this can be achieved by adopting an “asset-based” as opposed to a “problem-based” approach to program management. Rather than starting with needs and problems, build on strengths and what people have to contribute to locally determined change. The asset-based approach seeks to identify and use assets in the community to bring about positive changes. Adopting such an approach can improve the likelihood of empowering landmine survivors as part of the integrated program even where advocacy inputs are otherwise weak or under-resourced.

## RECOMMENDATIONS

Victim assistance must be integrated into all stages of the program cycle for the rights and needs of landmine and UXO survivors to be successfully addressed as part of integrated mine action programs. To provide guidance in program planning and implementation at each stage in the process the following recommendations are categorized according to key stages in the program cycle. Advocacy plays a particularly prominent role in program planning for victim assistance due to the social and economic marginalization of people with disabilities in many mine-affected countries. In such cases, programs for people with disabilities are only sustainable where service delivery is accompanied by some degree of social change. The advocacy recommendations provided should therefore be viewed as required, rather than optional, to achieving successful victim assistance inputs within these contexts.

### Situation Analysis:

1. Review existing data and policy including analyzing information on the prevalence and locality of landmine survivors and other people with disabilities; the issues and problems faced in their daily lives; relevant legislation affecting this group; current programs that address their needs, with specific reference to targeted and integrated approaches.
2. Conduct stakeholder consultations including meetings with key stakeholders working in this field to understand the situation of landmine survivors, and other people with disabilities, and what is being done to respond to their rights and needs.
3. Visit the field to consult with program staff, community members including landmine survivors, the families of those killed or injured, other persons with disabilities, and other locally based NGOs and health centres providing support to the target group.

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<sup>13</sup> See [www.jrscambodia.org/proj\\_12pp.html](http://www.jrscambodia.org/proj_12pp.html)

4. The key questions addressed during the course of research and field visits might include:
  - What are the needs of people with disabilities in the target area?
  - What is the community perception of persons with disabilities?
  - Who is working with persons with disabilities in the target area? What are they doing?
  - What health provision is available to mine victims and other persons with disabilities in terms of a system of referral and transport, physiotherapy, prosthetics, counselling? Is there a mobile team that conducts home visits?

### **Project Design:**

5. Ensure that a specific amount of available funding for an integrated mine action program is allocated to meet the needs of mine survivors and other people with disabilities in the target communities, and by provision of detailed reporting on use of funds, create a mechanism to ensure that this targeted allocation of funds has been spent in the most efficient way to meet those needs.
6. Prioritize consultation with persons with disabilities in the design and implementation of programs.
7. Undertake an in-depth needs assessment including more focus at the community level for mine survivors and other persons with disabilities in the target areas. People with disabilities, as beneficiaries of the project, should be actively involved in planning and conducting the assessment. This needs assessment would:
  - collate existing needs assessments of persons with disabilities carried out in the target areas by other programs.
  - conduct Participatory Rural Appraisal (PRA)<sup>14</sup> activities to allow people with disabilities at community level to express their own needs and priorities. At the same time, this would enable people with a disability to build their capacity in problem identification and analysis. The PRAs should also identify and evaluate sources of information on disability in the community, for example, village chiefs, commune councils and schools.
  - study the level of involvement of people with disabilities in community leadership, for example, at village and district level, and the local authorities' knowledge and practice regarding disability issues.
  - study the policy and practice on disability of non-disability specific NGOs (both local and international) in the target area, to assess the current degree of disability integration in programming.
8. Establish links with existing service providers, including government agencies, to develop a comprehensive referral service for mine survivors to facilitate access to healthcare, rehabilitation and socio-economic reintegration programs. Alternative models of service delivery could be examined to improve access.<sup>15</sup>
9. Allocate funding for emergency support, as part of program activities, to assist mine victims and their families in the immediate aftermath of a mine incident to reduce the financial impact on the family, or liaise with other agencies working in the health sector to ensure that emergency funds are provided. Funds could cover the costs of

<sup>14</sup> PRA is also known as PLA (Participatory Learning and Action) which is a more expanded form of PRA and relates to participatory and qualitative research.

<sup>15</sup> For example, the urban location of vocational training centres is often a barrier to access. An alternative is providing people with a disability with vocational training near to their homes by local skilled people.

transportation to hospital, surgery, hospitalization, and food security for the family during hospitalization. The experience of other NGOs with established equity funds to assist vulnerable groups, including persons with disabilities, could be sought for guidance.

**Project implementation:**

10. Establish a mechanism, for example through the recruitment of a Disability Officer, to ensure that mine survivors, other people with a disability, and the spouse and children of mine survivors, enjoy equal access to education and training offered in the integrated mine action program and if necessary ensure that persons with disabilities are provided with the necessary skills to make them eligible for programs; for example, through literacy training. Special attention should also be given to the needs of women and girls who may otherwise be systematically excluded from programs.
11. Develop a pilot project, in collaboration with an experienced disability-focused NGO, in the program area to undertake outreach activities to support mine survivors and other people with a disability in target communities. The nature of these activities would depend on the outcomes of the needs assessment, but could include assisting access to health and rehabilitation services, psychosocial support, socio-economic reintegration activities, or the establishment of self-help groups. The criteria for inclusion in a self-help group could be expanded to allow access by other vulnerable people in the community to avoid stigmatization but clear emphasis should be on those sharing common experiences/problems.
12. Establish links with agencies specializing in first aid to facilitate training at the village level to respond to mine incidents and other traumatic injuries.
13. Improve existing mechanisms for facilitating transport to hospitals, rehabilitation centres and other services.
14. Include at least one of the recommendations related to advocacy to promote a rights-based approach and strive to empower landmine/UXO survivors and other people with disabilities in the target communities.

**Advocacy:**

15. Work closely with local and community authorities to ensure that people with disabilities are properly represented in all decisions affecting them. Encourage the active participation of people with disabilities in such structures, for example, in election processes, and by building up the capacity of local authorities to understand disability issues and to reach out to people with a disability.
16. Work with non-disability specific socio-economic projects, for example, vocational training centres, agricultural training programs, micro-credit programs, cooperatives, etc to promote the inclusion of people with disabilities in their activities. This could be achieved through disability awareness-training, lobbying for inclusion of people with disabilities and improving physical accessibility.
17. Support awareness-raising and capacity building activities to promote the empowerment of persons with disabilities. These initiatives might include building the capacity of demining organizations to integrate people with disabilities in mine clearance programs ensuring that their integration takes place in a fair and equitable manner and that candidates have the appropriate skills for the work. In addition, awareness-raising activities could be undertaken within the target communities to improve attitudes

towards people with disabilities and inspire community actions to encourage better integration in social and economic networks at the local level.

18. Donors should be made aware of the changing nature of disability in the country where the program is being implemented, for example from road traffic accidents, and, while continuing to meet their obligations under the Mine Ban Treaty, allow greater flexibility in the use of funding to address the needs of all persons with disabilities, regardless of the cause.

**Monitoring, Evaluation, Impact Assessment:**

19. Ensure that a mechanism is in place to measure and report on the impact of the program, based on specific objectives and strategies, in improving the quality of life of persons with disabilities in the target communities. For example, indicators<sup>16</sup> could include:
  - Number/proportion of people with disabilities in the target community.
  - Number/proportion of people with disabilities included in the program.
  - Number/proportion of women with disabilities included in the program.
  - Number/proportion of children with disabilities included in the program.
  - Average income of people with disabilities in the project compared to average income of others in the project.
  - Number/proportion of people with disabilities accessing various components of the program.
  - Number/proportion of people with disabilities in decision-making village committees.
20. Integrate people with disabilities into the monitoring, evaluation and impact assessment strategies, including qualitative and quantitative tools such as structured and unstructured interviews, surveys, and focus groups.
21. Evaluate participation including a specific focus on the participation of people with disabilities in all aspects of the program.
22. Select monitoring, evaluation or impact assessment consultants with an understanding of disability issues or, if this is not possible, a background in health issues. Experience of participatory assessments and planning, monitoring and evaluating advocacy, is also desirable.

**CONCLUSION**

Mine/UXO survivors are often the poorest of the poor in remote communities where people suffer from the obstacles of poverty, including lack of access to housing, water, food, an income, or health and rehabilitation services. The impact of a mine explosion, or other emergency, usually results in families getting poorer and poorer as they are forced to sell assets to cover the costs of treatment.

People with disabilities themselves are the key to identifying needs, developing proposals, and implementing programs to meet the needs of mine/UXO survivors. Victim assistance programs should be designed to meet the needs of the target community, in collaboration with the relevant authorities at the local, provincial and national level. To understand the particular needs, priorities, and the actual situation of people with disabilities in the target communities will require visiting individual affected families and their close involvement at all stages of programming.

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<sup>16</sup> NORAD, “The Inclusion of Disability in Norwegian Development Co-Operation: Planning and monitoring for the inclusion of disability issues in mainstream development activities,” Oslo, January 2002, p. 23.

The clear framework provided by the Final Report of the First Review Conference of the Mine Ban Treaty is useful for the development of a victim assistance component for integrated mine action programs. Activities “...to assist landmine victims should not lead to victim assistance efforts being undertaken in such a manner as to exclude any person injured or disabled in another manner;” and, “...victim assistance should be integrated into development plans and strategies...”<sup>17</sup>

Disability should be integrated into general development policies on issues such as health, education and labour. At the same time, there should also be specific disability policies which include empowering persons with disabilities through strengthening organizations of disabled people, and ensuring access to appropriate rehabilitation facilities and aids. It is also essential that the integration of disability issues be supported by appropriate levels of funding, for example through earmarking a certain percentage of the mine action budget to disability issues.

Sustainability is the key to making a real difference in the daily lives of people with disabilities living in mine-affected communities. To ensure sustainability and to avoid unnecessary segregation of survivors or the families of those killed, assistance should be viewed as part of general development planning for their community as a whole. However, at the same time, there should be specific activities targeted at landmine survivors and other people with disabilities including ensuring access to appropriate rehabilitation facilities and aids, and opportunities for socio-economic integration. These two aspects – targeted services where obviously necessary and integration wherever possible – constitute the *twin track* approach to disability and should be an integral component of any integrated mine action program. Because landmine and UXO survivors are often marginalized within their communities, programs should seek to achieve service delivery as well as social change, so that integrated mine action programs become a source of empowerment and possibility for participants with disabilities.

Furthermore, three factors are essential for long-term sustainability of activities assisting mine/UXO survivors and other people with disabilities: community ownership; adequate funding; and the assumption of responsibility for services by the government at all levels.

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<sup>17</sup> “Final Report of the First Review Conference 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, Nairobi, 29 November – 3 December 2004,” APLC/CONF/2004/5, 9 February 2005, pp. 26-33.

**ANNEX 1 – NORAD “Checklist for programme planning (from identification and justification to programme document)”<sup>18</sup>**

*The checkpoints below could also be used when assessing project application from Norwegian NGOs:*

- ✓ *Disability relevance* – has this been studied, and have appropriate conclusions been made?
- ✓ *Target groups* – has it been noted that there may be people with disabilities within all target groups? Are conclusions reflected?
- ✓ *Stakeholders* – Have all the important groups been involved?
- ✓ *International commitments and instruments in the social and economic sector* – Are these reflected in the development objectives?
- ✓ *Accessibility* – are the programme components, activities and expected results accessible to people with functional limitations?
- ✓ *Vulnerability* – Has the vulnerability of people with disabilities and the disability dimension been taken into account? Have any balancing measures been included?
- ✓ *Resources of people with disabilities and their organisations* – has this been noted, and will people with disabilities be effectively involved in components concerning them?
- ✓ *Sustainability* – will the sustainability of results for people with disabilities be ensured through systematic and continuous policy-backing, involvement of people with disabilities and a sustainable resource flow?
- ✓ *Non-discrimination* – is the programme non-discriminating and does it support the objective “development for all”?
- ✓ *Follow-up measures* – will these be sensitive to disability issues and involve people with disabilities to an appropriate degree?

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<sup>18</sup> NORAD, “The Inclusion of Disability in Norwegian Development Co-Operation: Planning and monitoring for the inclusion of disability issues in mainstream development activities,” Oslo, January 2002, p. 21.