

### Victim Assistance in Mozambique: then and now

Mozambique	1	2	3	4	5	6
According to original study						
According to LM 2002		•				
According to LM 2003		•				

#### **Key Developments (LM 2002):**

The final conclusions of the Mozambique Landmine Impact Survey were published in September 2001. Some 791 communities affected by 1,374 suspected mined areas were identified. At the end of 2001, the National Demining Institute produced its first Five Year National Mine Action Plan (2002-2006). In September 2001, Mozambique destroyed its first 500 stockpiled antipersonnel mines. The remaining 37,318 mines must be destroyed before 1 March 2003. In 2001, 60 mine incidents were reported, resulting in 80 casualties.

#### **Indicator 1: The extent to which information on mine victims' demographics and needs is available.**

##### **According to original study:**

Data on mine accidents is being collected under the National Coordination Program of Education Activities to Prevent Mines and UXO Accidents (PEPAM) coordinated by HI which collects, verifies and analyses accident report forms. These include the following information: location of accident with sketch of the scene of the accident, description of accident, date of accident, circumstances in which the accident took place, number of victims, type of device that caused the accident, consequences of accident, sex and age of victims. In 1998, records indicate that men constituted the greatest number of reported victims at 46 percent, children represented 42 percent, and women represented 12 percent. Throughout 1996, 1997, and 1998, the largest number of accidents occurred while victims were working on their farms. LM 2000 reports that 60 casualties were recorded in 1999 and it appears that the casualty rate is declining. The LSN database indicates that according to UNICEF, 60% of mine victims in Mozambique die because lack of access to health services. The WHO/ICRC Strategic Framework for Planning Integrated Mine Victim Assistance Programmes being established in Mozambique, includes the development of a system for the monitoring and surveillance of mine injuries.

The Canadian International Demining Centre (CIDC) is conducting a SAC-monitored Level 1 Impact Survey in Mozambique which collects data on recent mine accidents. The GICDH is currently completing a Study of the Use of Socio-Economic Impact Analysis in Mine Action for the UNDP which will include analysis of the impacts on mine victims and incorporates a country case-study of Mozambique. A draft report of the Study is expected to be available at the SMSP.

##### **According to LM 2002:**

In 2001, 60 mine incidents were reported resulting in 80 new casualties, of which 60 were men and 20 were women.<sup>61</sup> It was not reported how many of these casualties were killed or injured. The reported casualties in 2001 represent a large increase from the 29 new casualties reported in 2000, of which eight were killed and 21 injured.<sup>62</sup> However, it should be noted that the casualty statistics for 2000 are believed to be understated as those working in the field know the number were much higher.<sup>63</sup> On 16 July 2001, a deminer and four mine detecting dogs were killed, and seven others injured, when a vehicle carrying seven NPA deminers and a driver hit an antivehicle mine in Manica province.<sup>64</sup> In the first six months of 2002, another two deminers were killed.<sup>65</sup>

Data collection for the Mozambique Landmine Impact Survey was completed in May 2001. The Survey identified 172 "recent" landmine casualties, of which 53 were killed. In total, 2,145 casualties were recorded. However, the report acknowledged that this figure is probably understated as 31 communities reported "many" casualties, but did not estimate an actual number. The activity at the time of the majority (71 percent) of recent incidents included being involved in economic activities, such as collecting food/water, farming, herding, or household work, while incidents during travel (seven percent) and tampering (one percent) were rare.<sup>66</sup>

#### **Indicator 2: The extent to which a national disability coordination mechanism exists and recognizes mine victims.**

**According to original study:**

The Ministry of Coordination for Social Action (MICAS) has formal responsibility for the coordination of programs and services for the disabled, but its capacity for program delivery is weak. A inter-ministerial coordination mechanism was established in May 1999 with WHO support to coordinate a Strategic Framework for Planning Integrated Mine Victim Assistance Programmes in Mozambique. A technical coordination group that will include implementing agencies and NGOs is being developed.

**According to LM 2002:**

No new information.

**Indicator 3: The extent to which programs and services for the medical care and rehabilitation of mine victims are available.****According to original study:**

Surgical facilities are available through a system of general, central, provincial and rural hospitals throughout Mozambique. However, of these facilities lack important resources and access from rural areas is often difficult. LM 1999 reports that as of January 1999, there were 9 orthopedic centers run by the Ministry of Health with technical assistance from HI and POWER. The Mozambican Red Cross is establishing a Jaipur Limb project in Gaza province. The Ministry of Health, in consultation with HI, plans to open centers in Gaza and Manica provinces such that there will be orthopedic services available in every province of Mozambique. However, these often experience shortages of materials and equipment. There are five rehabilitation centers run by the Physical Medicine and Rehabilitation Section of the Ministry of Health which also manages the 30 existing physiotherapy units and was planning to open an additional 26 units in 1999. The Ministry for the Coordination of Social Action is responsible for running transit centers which provide temporary accommodation for patients of orthopedic centers in Inhambane, Vilanculos, Beira, Nampula and Maputo. With the support of HI, the Ministry of Social Action has initiated the SIRT program (System of Information, Referral and Transportation) to improve access by disabled people to medical and rehabilitation services. Psychosocial support services are practically non-existent.

**According to LM 2002:**

The responsibility for landmine survivor assistance in Mozambique is shared between the Ministry of Health (MINSAU) and the Ministry for Women and the Coordination of Social Action (MMCAS). According to Landmine Survivors Network (LSN), facilities for evacuation, transportation, emergency and hospital treatment, and rehabilitation are inadequate to meet the needs in Mozambique. Because of a lack of transport many facilities are inaccessible to landmine survivors. The health infrastructure was severely damaged during almost thirty years of armed conflict. The floods of 2000 also damaged four hospitals, and 48 other health centers. Mozambique is dependent on international funding to support its health care infrastructure. Programs for the disabled are being developed in the eleven provinces of Mozambique.<sup>67</sup> The Institutional Support Program, established by Handicap International in 1997, assists landmine survivors and includes transport, medical care, rehabilitation, and cooperation between agencies in the provision of socio-economic reintegration.<sup>68</sup>

In 2000, the World Health Organization (WHO) initiated a training program for trainers in pre-hospital care for trauma victims, including landmine casualties. By the end of 2001, twenty trainers, including twelve doctors and eight medical technicians, had participated in the program at a national level and will now initiate pre-hospital trauma care training programs throughout Mozambique.<sup>69</sup>

There are eleven orthopedic workshops, run in cooperation by the Ministry of Health and international and local NGOs. In addition, there are rehabilitation centers and physiotherapy centers, some of which are managed by the Physical Medicine and Rehabilitation Section of the Ministry of Health.

In 2001, Handicap International supported six orthopedic center in the cities of Vilanculos, Inhambane, Lichinga, Tete, Pemba, and Nampula, which are now fully integrated into the Ministry of Health. The HI program also provided training to local staff. HI works with the MMCAS and the Forum of Mozambican Associations of Disabled Persons to improve the access of disabled persons to Physical Medicine and Rehabilitation services, and to promote the rights of disabled persons.<sup>70</sup>

POWER, a UK-based NGO, supported the Ministry of Health prosthetic and orthotic services until the end of May 2002. The program focused on the quality of production and logistics. In 2001, 608 patients were assisted,

575 prostheses produced and 248 fitted, and 125 wheelchairs and 1,663 crutches distributed. The program assisted all persons with disabilities, and was funded by USAID and UNICEF.

The Jaipur Limb Campaign, in partnership with the Mozambique Red Cross Society, opened the Jaipur Orthopedic Center in February 2000 in Gaza province, Manjacaze district. It is the first rehabilitation center to be wholly run by a Mozambican NGO, the Mozambique Red Cross Society (MRCS), and is located in a rural district to facilitate and improve rural people's access to services. The center provides mobility appliances, vocational training, disability awareness and social support programs. From January 2001 to March 2002, the center assisted 343 people, of which about 80 percent were landmine survivors. Funding for the center in 2001/2002 was provided by the UK-based Comic Relief, the Diana, Princess of Wales Memorial Fund, Khalatbari Foundation, and private donors.<sup>73</sup>

The orthopaedic centres existing in the country are not enough to assist the growing needs of the disabled people."<sup>76</sup>

#### **Indicator 4: The extent to which programs and services for the social and economic reintegration of mine victims are available**

##### **According to original study:**

The UNDP is currently supporting a project by the World Rehabilitation Fund to develop guidelines for the socio-economic reintegration of landmine survivors based on pilot projects in four mine-affected countries including Mozambique.

LSN Rehabilitation Database provides the following information. The Ministry of Social Action (MICAS) has responsibility for programs for disabled persons and manages a Community-Based Rehabilitation (ABC) program, designed to promote the change of negative attitudes and traditional beliefs in relation to the disabled person; to promote the integration of the disabled children in the normal education; to create conditions of integration in the labor sector through self-employment projects; to provide information on disabilities and their prevention; to promote the awareness of the National Policy of Disability and the existing legislation; to support disability associations; and to increase the responsibility of the Governmental Structures and of the society in general for the amelioration of the quality of life of the disabled peoples. However program delivery is extremely weak through most provinces of Mozambique.

There is only one center which focuses on the vocational training of disabled persons (INEFP project in Chimoio, Manica province) that has yet to be completed. Some of the provincial chapters of ADEMO (Mozambican Association of Disabled Persons) report that they run vocational training workshops on an ad hoc basis. LSN plans to facilitate work apprenticeships and enroll survivors and other amputees in training and mentor programs on a case-by-case basis in Zambezia province.

The government social security system (INAS) provides monthly food subsidies to vulnerable persons including disabled Mozambicans. However, these are meager and do not always cover subsistence needs. There are nineteen INAS centers located throughout the eleven provinces in Mozambique. Cooperation Canada-Mozambique (COCAMO) offers economic assistance and grants for projects promoting social re-integration, employment and technical training for people with disabilities in Nampula and Inhambane provinces.

##### **According to LM 2002:**

The Landmine Survivors Network (LSN) has been active in Mozambique since 1999. The LSN program engages community-based outreach workers, who are also amputees, to work with individual survivors to assess their needs, offering psychological and social support, and educating families about the effects of limb loss. LSN assists survivors in accessing services that provide mobility devices, health services, or vocational training. If no such services exist, LSN intervenes to ensure the needs of survivors are met, which in some cases can include direct assistance including covering the cost of prostheses, house repairs or emergency food aid. The recipient is required to provide a community service in return for the aid. In 2001, LSN assisted 114 landmine survivors. LSN works alongside local associations, including ADEMO and the Association of Military Disabled (ADEMIMO), to increase awareness about disability rights.<sup>74</sup> LSN headquarters are in Quelimane and it is currently working in the areas of Quelimane, Ile, Maganja da Costa, and Nicoadala.

The World Rehabilitation Fund (WRF), in partnership with UNDP, is developing a number of projects including: a rural economic development project for a community with a high percentage of landmine survivors; supporting POWER and ADEMO with two vocational training programs in metal work and baking; providing technical consultation to IND in the development of policies for survivor assistance; and providing technical assistance to Beira Hospital to improve services to landmine survivors.<sup>75</sup>

Mozambique reports that “the mine victim’s support system faces great difficulties due to problems of getting financial resources to implement projects ...also difficulties... for establishing specific professional training for disabled people....”<sup>76</sup>

**Indicator 5: The extent to which mine victims are protected and supported by effective laws and policies. According to original study:**

Proposed national disability legislation recognizes fundamental rights and principles for people with physical and mental disabilities; the draft law foresees the creation of a National Council on Disabilities which would act as an advisory body to government and include the participation of representatives of the disabled community. Various existing national laws establish rights for persons with disabilities in education, labor, financial, transport, military and health sectors. Despite these laws, national disability organizations claim the legislation often is not put into practice. Ex-military personnel with disabilities have special legal status and are entitled to a small state pension, though they often experience difficulties and delays in receiving it. The rest of the disabled population does not receive state pensions and there is minimal welfare assistance for amputees.

**According to LM 2002:**

Mozambique has a national rehabilitation policy for persons with disabilities.

Legislation to support the rights of the disabled remains unchanged.<sup>77</sup> In 1999, the Cabinet approved the first national policy on persons with disabilities that included principles and strategies to encourage the active participation of disabled people in the country’s socio-economic development. However, the plan had not been fully implemented due to funding constraints.<sup>78</sup>

Following a Mine Victim Assistance Workshop, sponsored by WRF, on 11 November 2001, the IND has developed a draft policy for Survivor and Victim Assistance that attempts to define the role and responsibilities of IND concerning mine survivor assistance.<sup>79</sup> The policy includes plans to “develop appropriate strategies and methodologies for providing long-term assistance” for landmine survivors.<sup>80</sup>

**Indicator 6: The extent to which there is a disability community advocacy network.**

**According to original study:**

The Forum of Mozambican Disabled Persons Associations (FAMOD), a network of the major national disability NGOs, is engaged in various campaigns to promote awareness of disability needs and rights in Mozambique.

**According to LM 2002:**

In 2002, POWER changed its emphasis from prosthetics and orthotics to assisting the disabled in Mozambique to participate fully in civil society by empowering disability organizations to build capacity and services for their members, working closely with the Association of Disabled Mozambicans (ADEMO).<sup>72</sup>

**Endnotes:**

<sup>61</sup> Article 7 Report, Form I, 2 July 2002.

<sup>62</sup> IMSMA database, Victim Statistics, National Demining Institute, 31 January 2001.

<sup>63</sup> World Rehabilitation Fund, “Mine Victim Assistance Support Visit: Mozambique Country Visit,” November 2001, p. 4.

<sup>64</sup> Norwegian People’s Aid Press Release, “Serious AT mine accident in Mozambique,” 26 July 2001.

<sup>65</sup> IMSMA database, Victim Statistics, National Demining Institute, 8 July 2002.

<sup>66</sup> *Landmine Monitor Report 2001*, pp. 118-119; see also Mozambique Landmine Impact Survey, accessed at [http://www.sac-na.org/surveys\\_mozambique\\_executive\\_summary.html](http://www.sac-na.org/surveys_mozambique_executive_summary.html) (17 July 2002).

<sup>67</sup> For more details see Landmine Survivors Rehabilitation Database, accessed at [www.lsndatabase.org](http://www.lsndatabase.org).

<sup>68</sup> Article 7 Report, Form J, 2 July 2002.

<sup>69</sup> Portfolio of Landmine Victim Assistance Programs, accessed at [www.landminevap.org](http://www.landminevap.org).

<sup>70</sup> Handicap International Review of Activities 2001, pp. 18-19.

<sup>72</sup> Ibid., 12 July 2002.

<sup>73</sup> Isabel Silva, Projects Officer, Jaipur Limb Campaign, response to Landmine Monitor Survivor Assistance Questionnaire, 11 July 2002.

<sup>74</sup> Nando, Executive Assistant, Landmine Survivors Network Mozambique, response to Landmine Monitor Survivor Assistance Questionnaire, 12 March 2002.

<sup>75</sup> Mozambique, *Our World*, Volume 3, Issue 1, Fall 2001, p. 5; see also Portfolio of Landmine Victim Assistance Programs, accessed at [www.landminevap.org](http://www.landminevap.org).

<sup>76</sup> Article 7 Report, Form J, 2 July 2002.

<sup>77</sup> See *Landmine Monitor Report 2001*, p. 120; see also *Landmine Monitor Report 2000*, p. 80.

<sup>78</sup> US Department of State, *Country Reports on Human Rights Practices - 2001: Mozambique*, March 2002.

<sup>79</sup> World Rehabilitation Fund, "Mine Victim Assistance Support Visit: Executive Summary – Mozambique Country Visit," World Rehabilitation Fund and UNDP, November 2001.

<sup>80</sup> National Demining Institute, "The Five-Year National Mine Action Plan: 2002-2006," 19 November 2001, p. 21.