The second strategic outcome of the United Nations Mine Action Strategy 2019–2023 (hereafter, the Strategy) states that “Survivors, family members and communities affected by explosive ordnance have equal access to health and education and participate fully in social and economic life”. The Strategy aims to enhance assistance to victims in accessing needed health services and ensuring their inclusion in social and economic life consistent with the United Nations Policy on Victim Assistance (VA). For further information see Assistance to survivors | E-Mine (mineaction.org)

Countries/territories with a UN mine action presence are at different stages in progressing towards the Strategy’s outcomes. UN support to victims varies widely across different UN mine action programmes depending on the national victim assistance capacity, the existing support for victims available in the country/territory, the nature and scale of the threat of explosive devices, and the type of UN mine action engagement taking place.

The quantitative data from the surveys of 2018 and 2019 showed that Nigeria and Vietnam varied in their progress towards the Strategy’s outcome on VA. Supplemented by information garnered though in-depth interviews with stakeholders in both countries this study provides insight into the qualitative data provided in the survey, the progress that the UN mine action programmes are making, and the contextual and technical challenges that need to be considered for improved response.
Victim Assistance and the Country Level Survey of the UN Mine Action Strategy 2019 – 2023

The results of 2019 country-level survey showed varying results in terms of advocacy and coordination of VA at the national level, as well as participation and inclusion of victims and survivors in social and economic life. 72% of surveyed countries/territories have a national disability policy and 52% have a national representative for victims/survivors of explosive ordnance. The presence of legal and institutional frameworks, however, is not often translated into action. In 81% of cases, service providers for victims/survivors are not mapped-out, and in another 81% there are no referral pathways to support victims/survivors. VA “continues to be the most under-funded pillar of humanitarian mine action”. The charts below show the status of four VA indicators based on data gathered in 2019. The indicators are the existence of a national disability policy, existence of a UN coordination mechanism for VA, regular meetings of UN and governments to discuss VA services provision, and UN documentation of, and support to, referral pathways.

In this study, VA engagement in Vietnam and in Nigeria was examined to better understand contextual circumstances and specific institutional and response-related issues that may provide insights into the status of progress towards VA indicators across the countries where the United Nations has a mine action presence. These include opportunities and challenges resulting from the impact of the development and/or conflict situation in both countries, social and cultural contexts, national legal and institutional frameworks that govern VA, and mine action response in the country. The study captures good practice and recommends areas of focus that provides stakeholders with insights into the challenges in making progress towards this strategic outcome as well as practical guidance for field programmes aiming to strengthen their interventions in this area.

2 Report of the Secretary General on Assistance in mine action, Aug. 2019, p.22
Victim Assistance in Mine Action in Nigeria

1- National context

At the request of the Resident / Humanitarian Coordinator, in July 2018, UNMAS deployed an emergency response team to north-eastern Nigeria, which lead to the establishment of an UNMAS programme. Currently UNMAS co-leads the Mine Action Area of Responsibility with the Nigerian authorities and is fully integrated into the Humanitarian Country Team. Mine action actors are active in three of Nigeria’s north eastern states namely Borno, Yobe, and Adamawa.

Most areas have restricted access for humanitarian actors due to ongoing conflict, and restrictions imposed by the military which limits humanitarian mine action activities. According to the programme, 75 to 80% of Borno state for example is inaccessible due to security. Due to inaccessibility, these areas have not been surveyed and contamination level remains unknown.

Some humanitarian actors have capacity to provide first aid emergency services. Medical evacuation by helicopter is activated for the most serious cases in cooperation with MSF, ICRC, WFP and UNHAS, who are quite well equipped for medical evacuation and casualty stabilization. However, movement in the areas of intervention is difficult and dangerous, which affects access of the population to other kinds of services, such as medical follow up, physical rehabilitation and psycho-social support.

2- Victim Assistance in Nigeria: M&E country-level survey results

Findings of the country-level survey showed that Nigeria has a national disability policy. However, coordination on VA, referral pathways, mapping survey of victims’ needs, and inclusion of victims in socio-economic life are yet to be addressed.
The country is a State party to the Convention of the Rights of Persons with Disability (CRPD), and the Discrimination Against Persons with Disabilities (Prohibition) Act was signed into law at the federal level in January 2019. The country, however, does not have a designated national representative for victims/survivors of explosive ordnance, and no coordination mechanism to support and integrate the needs of victims into mine action service delivery and programming has been established.

3- National victim assistance legal and institutional framework

In Nigeria, there is no national coordination mechanism for VA. The national capacity to support survivors, family members and communities affected by explosive ordnance requires further enhancement. Nationally led public services exist, but mainly in big cities, outside of which it is difficult to identify VA capacities of the Government. VA is yet to be a priority for mine action operations in Nigeria, due to the nascent status of mine action operation in response to the recent EO contamination problem in the country, and to the “lack of resources due to the scarcity of funding towards mine action in northeast Nigeria”\(^3\). Referral pathways, mapping survey of victims’ needs, and inclusion of victims in socio-economic life are yet to be addressed.

4- Victim assistance in UN mine action operations in Nigeria

In Nigeria, UNMAS is the UN mine action focal point. WHO leads on the health sector with the Ministry for Reconstruction, Rehabilitation, and Resettlement in Borno as the counterpart. However, there is no UN (or government) coordination mechanism nor specific survivors’ networks dedicated to VA or disability in the country.

The UN country team takes the lead on service provision for victims. The burden has increased however, since 2015, due to the high number of IDPs, the limited access of people in need to service provision, and the increasing numbers of people injured by the conflict. UN support to national authorities over the years has proved fundamental in terms of services provision. Over the last few years, UN response focused on first aid capacity building and UNMAS provided first responder courses to the Nigerian Security and Civil Defense Corps and the Nigerian Police Force\(^4\).

Additionally, the UN works with the Nigerian Ministry of Health to provide physical rehabilitation and psycho-social support for victims of explosive ordnance, in cooperation with other international organizations. In 2019, UNMAS began working with IOM to identify psycho-social support services for victims and is receiving information and finalizing the identification of psycho-social support service focal points so that mine action actors can start giving referrals. The Mental Health and Psycho-Social Support MHPSS sub-working group in Northeast Nigeria

\(^3\) Results of the UN Mine Action Country-Level Survey 2019
\(^4\) UNMAS Website [https://unmas.org/en/programmes/ni](https://unmas.org/en/programmes/ni)
provides training to mine action actors on Psychological First Aid (PFA) and basic psychological skills, which will improve the quality of referral and equip mine action actors providing psychological first aid. Work on disability data collection started recently and the protection sector needs to engage more on disability inclusion.

Understanding the needs of victims and survivors, requires robust casualty’ data collection and development of analysis on patterns of death and injury from mines, ERW and IEDs disaggregated by gender and age. For this Nigeria has established an injury surveillance system that collects data on explosive ordnance victims. More qualitative data is needed to better understand the profile of victims, the circumstances of EO accidents, their consequences, and the level of access to services, which is crucial for VA. UNMAS plans to publish fact sheets using data already collected and has already started disseminating information for the mine action community to give visibility to VA.

### 5- Proposed areas of focus to support progress towards UN Mine Action Strategy outcomes

<table>
<thead>
<tr>
<th>UN Output in the UN Mine Action Strategy</th>
<th>Proposed areas of focus to support progress towards achievement of Strategic Outcomeo Tw</th>
</tr>
</thead>
</table>
| **SO2-IO1** 1.1 Dissemination and implementation of global standards on assistance for survivors within national policies and other frameworks supported | • Advocate for the Government to provide support to victims and persons with disability in Northeast Nigeria consistent with obligations of the APMBC and/or CRPD and reflect progress while reporting on these conventions.  
• Advocate for the Government to develop national mine action standards consistent with IMAS |
| **SO2-IO1** 1.2 Technical assistance and guidance on assistance for survivors, including development of referral pathways for multi-sectoral assistance, provided | • Provide technical assistance to Government on victim identification and referral pathways development consistent with international standards  
• Develop referral pathways, in partnership with other UN partners and/ or Government |
| **SO2-IO1** 1.4 Coordination and planning of national and international efforts to integrate assistance to survivors, affected family members and communities within broader programmes facilitated and supported | • Advocate for victims to be included in humanitarian needs assessment and Humanitarian Response Plans. |
### Victim Assistance in Mine Action in Vietnam

#### 1- National context

Forty-five years after the end of the conflict, all 63 provinces of Vietnam are still contaminated by explosive ordnance, leading to many casualties over the past four decades. No official casualty data is published, so while it is known that many people are killed or injured by explosive ordnance, many of whom are still in need of help, the exact number is not known. UNDP is working on creating a database for Persons with Disabilities\(^5\). VA activities do get technical and financial support from both the government and the United Nations. Still, challenges to VA exist, especially cultural challenges such as stigmatisation of victims. There is a stronger focus on war veterans in terms of victims needs, but other victims have received less attention over the years.

#### 2- Victim assistance in Vietnam: M&E country-level survey results

The results of the country-level surveys showed progress towards strategic outcome two of the Strategy in Vietnam between 2018 and 2019. As was planned in 2018, an explosive ordnance victims’ mapping of service providers was conducted in 2019, and UNDP Vietnam started

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\(^5\) [https://www.vn.undp.org/content/vietnam/en/home/presscenter/pressreleases/PwDdatabase.html](https://www.vn.undp.org/content/vietnam/en/home/presscenter/pressreleases/PwDdatabase.html)
documenting referral pathways for survivors of explosive ordnance. As highlighted in the charts below, Vietnam is progressing well towards the Strategy indicators. The country has had a national disability law since 2010 and has been a state party to the CRPD since 2015. The national mine action authority has a representative for victims/survivors of explosive ordnance, and the UN regularly meets with the government-designated focal point to discuss service provision, including referral pathways, for explosive ordnance victims. Vietnam is also setting up a coordination mechanism to support and integrate gender-sensitive needs of victims into mine action service delivery and programming.

![Image showing referral pathways progress](image-url)

*Figure 3: M&E Country-Level Survey 2019
SO2: Victim Assistance Key Results in Vietnam*

In 2019, and as part of a project implemented by UNDP and the Vietnam National Mine Action Center (VNMAC), the Department of Social Affairs, under the Ministry of Labor-Invalids and Social Affairs (MOLISA), conducted a mapping of service providers for explosive ordnance victims. Referral pathways are not officially established yet in the country and UN assistance in this regard is currently in progress. UNDP shares explosive ordnance data/analysis with key stakeholders regularly, via the Information Management System for Mine Action (IMSMA) and via meetings, webpages, reports, and project briefs.

The survey data showed that UNDP advocates for the equal inclusion of female and male victims/survivors in education and employment and supports improved accessibility to public services for persons with disabilities by providing medical, livelihood and rehabilitation services, as well as skills and vocational training and job placement for identified survivors. The UN also advocates for survivors to be integrated in larger government Social Assistance programmes and for institutionalizing VA support in related national laws and policies.

### 3- National victim assistance legal and institutional framework

Vietnam is a state party to the CRPD and has its own law on persons with disabilities, which was signed in 2010, but does not reference VA or services to persons with disabilities due to explosive

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ordnance specifically, however the country does have a representative of explosive ordnance (??) victims at the national level. In 2017, the UN Mine Action Partnership Group was established to coordinate mine action in general, with the intention to have various technical sub-groups including on VA. The Group is facing some challenges and currently some of its roles are carried out (??) by the Landmine Working Group, which is an operator-level coordination unit with the government participating at the middle management level alongside NGOs involved in mine action, as well as concerned donors and embassies and in which. VA is discussed. In addition, there are various forums on disability which are generally government-led but not specifically focussed on VA. The establishment of a designated group for coordinating VA is still in progress.

VNMAC is the main focal point for the mine action sector, especially when it comes to partnership with international actors. For victim assistance however, the Ministry of Labor-Invalids and Social Affairs is the lead. Referral pathways are not yet formally established at the national level.

According to the survey results, the national capacity in VA improved between 2018 and 2019. There are areas that need strengthening such as annual casualty data, but the country has the capability to progress. UNDP is currently supporting national authorities in reviewing and updating the national mine action regulatory framework which includes VA, along with national mine action standards to be aligned with International Mine Action Standards (IMAS).

4- Victim assistance in UN mine action operations in Vietnam

UNDP works in two of the 15 most contaminated provinces in the country: Binh Dinh and Quang Binh. In 2019, the first large-scale comprehensive survey in these two provinces of persons with disabilities was carried out, which included gathering data on explosive ordnance survivors. This survey, which uses “a new survivor tracking and case management system”7 and which the government intends to use nation-wide, found that there are 75,000 persons with disability in those two provinces alone. This new survivor tracking and case management system engaged survivors in its development, which “empowers them to update their own information online and print certificates to access government assistance”8, therefore advocating for the integration of explosive ordnance survivors in the larger government Social Assistance programme.

The Government’s voluntary disability registration system supports registered disabled persons regardless of the cause of their disability. UNDP however, elaborated the system to include a case management module, which helps to manage the needs of persons disabled due to explosive ordnance and the means to address them. The system shows that currently out of the 75,000 persons with disabilities, there are 9,100 explosive ordnance survivors in the provinces of Binh Dinh and Quang Binh.

7 Report of the Secretary General on Assistance in mine action, Aug. 2019, p. 22
UNDP also supports projects focused on providing prosthetics to 180 survivors, including support to specialized hospital systems in a manner that is inclusive to the needs of all beneficiaries with disabilities and not only survivors of explosive ordnance.

Furthermore, the database designed with MOLISA and with active social workers in the field, where trends for the past 10 years are being analyzed to identify and address specific needs of victims. All data from UNDP project sites, where survey and clearance is being undertaken by the military, is shared with VNMAC for integration into IMSMA.

6- Proposed areas of focus to support progress towards achievement of UN Mine Action Strategic Outcome Two

<table>
<thead>
<tr>
<th>UN Output in the UN Mine Action Strategy</th>
<th>Proposed areas of focus to support progress towards achievement of Strategy Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SO2-IO1</strong></td>
<td>• Advocate for the Government to reference victim assistance in existing legal and institutional frameworks according to international standards, and to draw a long-term VA strategy for ensuring that survivors and other Persons with Disability get access to support.</td>
</tr>
<tr>
<td>1.1 Dissemination and implementation of global standards on assistance for survivors within national policies and other frameworks supported</td>
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<tr>
<td><strong>SO2-IO1</strong></td>
<td>• Advocate for more national commitment to VA coordination at higher governmental levels.</td>
</tr>
<tr>
<td>1.4 Coordination and planning of national and international efforts to integrate assistance to survivors, affected family members and communities within broader programmes facilitated and supported</td>
<td>• UN to institutionalise its current informal VA coordination efforts in close collaboration with NGOs working in the domain.</td>
</tr>
<tr>
<td><strong>SO2-IO2</strong></td>
<td>Support national authorities in scaling up casualty data collection processes and standards and providing technical assistance to improve national surveillance system in a way that identifies victims’ needs and manages cases.</td>
</tr>
<tr>
<td>2.1 Collection, analysis and dissemination of age and gender-disaggregated data on survivors facilitated through relevant coordination mechanisms</td>
<td></td>
</tr>
<tr>
<td><strong>SO2-IO2</strong></td>
<td><strong>SO2-IO2</strong></td>
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<td>-------------</td>
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<tr>
<td>2.2 Development of integrated health service and assistance referral pathways for survivors supported and facilitated</td>
<td>• Provide technical support to national authorities to develop and disseminate referral pathways for use by all involved in assisting victims.</td>
</tr>
<tr>
<td>2.3 Inclusion of critical life-saving health services (and in particular first aid), integrated and continued access to rehabilitation, within ongoing health programmes and initiatives advocated for and facilitated, to address gaps in coverage of survivors.</td>
<td>• Advocate for prosthetics production tailored to the needs of persons with disabilities. • Promote inter-sector coordination between the prosthetic industry and the health sector to fill government insurance schemes gaps in a way that covers all beneficiaries with disabilities.</td>
</tr>
</tbody>
</table>
**Key Findings and Best Practices to Scale Up UN Mine Action Victim Assistance**

“The United Nations Mine Action Strategy 2019–2023 features victim assistance as a key strategic priority, with a special focus on establishing referral pathways, in line with the United Nations Victim Assistance Policy. Greater coordination with other sectors, such as health and development, is necessary to ensure a multisectoral response. I call on all States to dedicate the necessary resources, human, financial and technological, to ensure victims’ rights and assistance to survivors of explosive ordnance”. Report of the Secretary General on Assistance in Mine Action – August 2019

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**Conflict and victim assistance:**

UN entities operating in countries in *conflict* suffer harsher realities and more complex challenges when designing and implementing VA interventions. Conflicts affect national capacities, availability of resources, coordination, access to services, and *prioritization* of VA over more pressing basic needs such as safety, shelter, food, and clean water for the wider population. This *negatively impacts* and *compromises* both UN and government efforts to provide support to survivors, family members and communities affected by explosive ordnance. In such situations the UN may choose to focus on *emergency VA* and on advocating for its inclusion in the national and international *humanitarian response frameworks* (e.g. Humanitarian Response Plans) and in existing *health sector* frameworks and initiatives.

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**Victim assistance legal and institutional frameworks:**

The United Nations should advocate for *referencing* VA in national legal and institutional frameworks, and to support the development of *implementable and budgeted action plans* to translate those laws and strategies into actionable response.

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**Victim Assistance standards:**

The UN should support the dissemination and implementation of global standards on assistance for survivors within national policies and other frameworks, by providing technical support to national authorities in the setup and update of clear *SOPs* and well-defined *processes*. 
**Coordination of victim assistance:**

The Strategy’s results framework identifies the role of the United Nations to facilitate and support coordination and planning of national and international efforts to integrate VA into broader disability (??) programmes. Evidence from the M&E country-level survey and from the qualitative research carried out for this study showed that national authorities and UN coordination positively enhances VA and pushes it up on the national list of priorities. UN mine action actors need to work on institutionalizing VA coordination in cooperation with national authorities, NGOs and INGOs in support of VA services provision to survivors, their family members and communities affected by explosive ordnance.

**Victim assistance sex, age, and disability disaggregated data (SADDD) collection:**

It is essential for the UN to support and facilitate the collection SADD data and support the development of analysis on patterns of death and injuries from explosive ordnance. SADD data is essential to map out victims’ needs and establish referral pathways. UN mine action could provide technical support to national authorities on national surveillance systems and on collection, analysis, and dissemination of SADD VA data.

**Victims’ Representation and Participation:**

Identifying victims’ needs is key to the success of VA response, this requires the active representation and participation of victims in VA initiatives, for example when end-users in Vietnam are involved in testing the development of a new victim-related software. UN mine action operators need to advocate and facilitate the equal participation of all survivors in assessments, decision-making, planning and implementation of multi-sectoral assistance.

**Victims’ inclusion in social and economic life:**

The Strategy further emphasizes the role of the United Nations in advocating for and supporting national authorities to ensure equal access, inclusion and accessibility for victims and persons with disabilities to education, social services, and employment opportunities. This further includes advocating for and supporting integration into national social protection and development strategies, consistent with the International Convention on Persons with Disability (ICPD) and the Sustainable Development Goals (SDGs). VA service provision could be enhanced by addressing existing social stigma surrounding the victims, through dialogue and communication to promote psycho-social support to victims and survivors.