Distinguished Delegates, Ladies and Gentlemen,

Thank you for giving me this opportunity to speak at this Regional Conference on the Universalization of the Convention on Cluster Munitions. I am Margaret Arach Orech, a survivor from Uganda. I was injured by a landmine 13yrs ago, a weapon equally indiscriminate as cluster munitions, which lasts beyond wars. As a survivor, I shall be making this statement on Victim Assistance; the human aspect which is a central component of the Convention on Cluster Munitions.

Throughout the evolution of the convention to its present state, a lot of resources have been utilized by states, UN agencies and civil society organisation. Now that the convention is in place, on behalf of the survivors in Africa and around the world, I urge you to take further steps to make the treaty work. It should not just remain a treaty on paper; let the commitment that states made when signing the Convention on Cluster Munitions reach survivors, their families and communities.

Destroying existing stockpiles would reduce the possibility of new cases. Where do we stand with this in Guinea Bissau (SP), Guinea, South Africa, Nigeria (SIG), and Eritrea, Ethiopia, Sudan, Zimbabwe (NSP)

It is your obligation as states affected or not affected by cluster munitions to ensure that Victim Assistance makes a significant change in the lives of survivors for it is their right. The convention aims at the full realization of rights of all cluster munitions victims by asking states, to adequately provide assistance, including medical care rehabilitation and psychological support, and provide for their economic and social inclusion, in accordance with applicable humanitarian law and human rights law. In Africa, some states parties, signatories and non signatories to the CCM are also party to the Mine Ban Treaty and the Convention on the Rights of Persons with Disabilities.

Thus far, in Sub-Saharan Africa, the following states are States Parties to the Convention that have a responsibility towards victims of cluster munitions: Guinea-Bissau, Mozambique, and Sierra Leone. In addition, Angola, Chad, Democratic Republic of Congo, and Uganda have signed the convention. We hope they will soon become States Parties and expect that, in the meantime, they too will work towards providing assistance to cluster munitions victims. Non-signatory states that have cluster
munitions victims include Eritrea, Ethiopia, South Sudan and Sudan. Make a humanitarian move and join the treaty.

At the First Meeting of States Parties to the Convention on Cluster Munitions, The Vientiane Action Plan was adopted. It provides a guide to prioritizing implementation of all aspects of victim assistance. To gauge the progress made so far: have States Parties with cluster munitions victims collected data to assess needs, disaggregated by age and gender? We believe that States Parties Guinea-Bissau, Mozambique and Sierra Leone still have to make effort to collect such a data.

Has each State Party made efforts to increase availability and accessibility of services, particularly in remote and rural areas where they are most often absent? In Guinea-Bissau, the availability of prosthetics services increased in 2011 with the opening of a major rehabilitation center. There was some increase, although limited, in access to vocational training and education in Mozambique as a result of programs targeting persons with disabilities more generally. According to our information, no specific services or improvements were reported for Sierra Leone.

Within one year of Entry into Force, have each State reviewed national laws and policies in order to meet the needs and protect the human rights of cluster munitions victims? Some states already have plans to address the needs of survivors as well as persons with disabilities. Implement these plans. Remember survivors are there to work with as they know their needs better. Victim assistance does not require the creation of separate mechanisms only for cluster munitions victims. Instead, it requires that victim assistance be implemented with a view to its incorporation into existing mechanisms for disability, development and human rights, while ensuring that cluster munitions victims can take full advantage of these services. This approach requires States Parties to develop specific measures to ensure that existing services are accessible to all cluster munitions victims. In cases where existing services do not suffice to meet the special needs of cluster munitions victims, States Parties must develop new, inclusive services to address those gaps.

The active participation of cluster munitions victims and other victim assistance expert was instrumental in the development of the convention and must continue during its implementation.

Let us all make the Convention work.

Thank you.