

To prepare this presentation, my colleague Katleen Maes and myself went through the numerous testimonies we collected in the past ten years among communities affected by cluster munitions. I am going to tell you one of these stories, as I think it underlines most of the challenges that lie ahead of us if we think about developing a framework for cooperation and assistance. It is the story of Dam, a Laotian boy, but it could as well be the story of Cha, Faiz or Adnan, or any of the testimonies you can find in *Fatal Footprint*, our report on the global human impact of cluster munitions.

Dam's life story was told to us by our colleague Yvon Lechevantou, one of our clearance experts in Savanakheth province in Laos. In September, Yvon visited a young boy called Dam. Dam was injured by a cluster submunition in 2003, when he was nine years old.

#### QUOTE

*I met Dam tonight in Phalanexay, 108 km from Xepon where we are based. Dam is all right. I found a different boy than the one I saw last time in 2003. He is almost twelve now and follows the last class of the primary school, so his studies are going quite well. He smiles a little. I was surprised as I never saw him smiling before; he doesn't speak a lot though, but for sure he was very happy to see us arriving in his village. All his friends came and we had some good time. He did not remember very well the accident. He was so young when it happened. All he remembers is travelling in the ambulance to Savannakhet.*

*His father thanks us again. His son is still alive thanks to us, he says. His son had a serious life threatening impact in the back, fragmentation in the lower abdomen and his left leg and arm were fractured. Dam was first evacuated to Savannakhet hospital, where after two days his state seemed stabilized, but the following day he had severe complications and a serious infection. He was dying slowly...*

*We then decided to Medevac Dam to Thailand, where there is a better equipped hospital and where the infection was very quickly stopped, he could then recover slowly. Today his father tells us what follows:*

*"When I saw my son loaded in the ambulance's stretcher half unconscious on the way to travel by ferry to Thailand I was sure that I would never see him again alive."*

*Dam's family is very poor and they had no money to pay the hospital in Savannakhet. All they have is a bicycle, three buffaloes and a small paddy.*

*The accident still affects Dam today, even though he says he forgot it. It is difficult to communicate with him. It is very strange: he seems to be somewhere else when you speak to him, he still dreams of the explosion, he says. Crying is not common for the Lao people, but his father tells us that Dam is very sensitive and reacts by crying for small things, as missing his parents or being alone too long.*

#### UNQUOTE

Just like in many stories of cluster munitions survivors, three things strike me in this story: first the seriousness of the injuries (massive abdominal trauma, shrapnel wounds, leg and arm broken by the blast); then the fact that his family – like most families living in areas affected by cluster munitions – had no money to pay for the treatment; finally, the psychological impact of the blast (the boy continues to have nightmares 3 years after the incident & remains traumatized). This story ends relatively well with Dam among his friends and doing well in school, but most stories we collected do not end that well. What we generally see is families that are increasingly poor, because they used their entire life

savings to pay for hospital costs, and where a psychological trauma remains years after the accident.

These individuals, families and communities affected by cluster munitions should be our main focus when we develop a framework for international cooperation and assistance. They need such a framework, now!

### **What do we know?**

First, we know that 23 countries and 2 territories are affected by cluster munitions (we recorded one more affected country since November: Yemen); this compares to 78 countries and 8 areas affected by landmines. We estimate that at least 33 million unexploded submunitions are still lying around, with the potential of killing or injuring civilians during many more years. A major challenge relates to data collection: largely insufficient. In our research, we found 11,044 cluster munitions casualties, but we estimate that the total number could be as high as 100,000 as information provided so far is limited and often incomplete. Among recorded casualties, we found 98 percent civilians, 84% male and 27% children (2,982 children, almost all boys). 30% of casualties died as a result of the incident (this compares with 24% for landmines). The vast majority of casualties occur while people carry on their normal, daily livelihood activities. This has a direct economic impact on cluster munitions contaminated communities and countries.

Questions remain concerning the number of affected communities. Similarly, the socio-economic consequences on families and communities of cluster munitions use have yet to be measured; we hope to provide you with more information on this subject in the coming months. I already touched on the psychological impact of cluster munitions on survivors; a number of factors indicate that such impact is more important than in the case of landmines.

### **What do we need?**

We need recognition of the plight of these ‘victims’ in order to respond adequately to their needs. When we say victim we mean individual, family and community. In our view, this response can only be adequate when there is a treaty that speeds up cluster munitions clearance, ensures victim assistance and improves the exchange of information. Users should urgently provide strike data as well as technical information to assist clearance. From a humanitarian perspective we cannot be sure we are providing adequate assistance as long as there are gaps in casualty data collection, including information on assistance. We do not need to reinvent the wheel, some structures are already in place. It is more efficient to reinforce and support existing public health, disability and social infrastructures, as well as specialized mine action structure when possible. However, when needed, special provisions for cluster munitions ‘victims’ need to be made.

To those who would argue that Protocol V is the response, I would simply remind them that Protocol V is not retroactive and “does not apply to areas that were, and still are, affected by unexploded submunitions and other ERW prior to its entry into force in November 2006. Nor does it address the humanitarian problems associated with cluster

munitions at the time of their use, such as the fact that their wide area effect makes them indiscriminate when used in or near populated areas.”<sup>1</sup>

**In conclusion**, coming back to what survivors and their families expect from us, I think that we can summarize these around three main challenges:

**First**, stop the massacre: ban cluster munitions & destroy your stockpiles, in order to prevent new massacres of civilians.

**Secondly**, acknowledge the plight of affected individuals, their families and communities: improve data collection and national reporting mechanisms so that assistance better serves the needs of those that have been forgotten for too long.

**Thirdly**, taking advantage of existing services and strengthening them will be a cost effective solution: structures exist but need to be reinforced, supported and made sustainable. For example, most countries & territories affected by cluster munitions are also affected by landmines and some structures are already in place. We know what services are available, however the extent to which they meet the needs of ‘victims’ is largely unknown. Therefore we would call upon states to put reporting mechanisms in place, to track progress and to identify and respond to challenges. In short, making sure that cluster munitions victims such as Dam, his family and community receive concrete and effective support.

So I ask you, act now! Let us work together to tackle these challenges.

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<sup>1</sup> “Addressing the humanitarian impacts of cluster munitions,” background paper to the Oslo Conference on Cluster Munitions, p.2.