



Mine Action and UXO HOTSPOTS PROGRAMME IN ALBANIA

VA Workshop CCM Meeting 18 May 2016

Albanian Mine & Munitions Coordination Office
(AMMCO)



Empowered lives.
Resilient nations.





MA Programme Main Achievements



- **Successful completion of clearance of mine and Cluster Munitions contaminated areas in NE Albania in November 2009.**
- **The communities in NE Albania can move safely. The mine/UXO threat is no longer an obstacle to the development.**
- **National sustainable capacities to plan, monitor and manage mine action activities established in Albania.**
- **Zero mine/UXO accidents in NE Albania since 2005.**
- **Rehabilitation capacities (Prosthetic & Physiotherapy) at Kukes Regional Hospital capable (trained/equipped) to treat mine/UXO survivors in the region.**
- **84 survivors/their families in northeast Albania able to establish home based economies.**
- **104 mine/UXO survivors completed the vocational training courses.**
- **10 child mine/UXO survivors assisted with educational reintegration activities.**

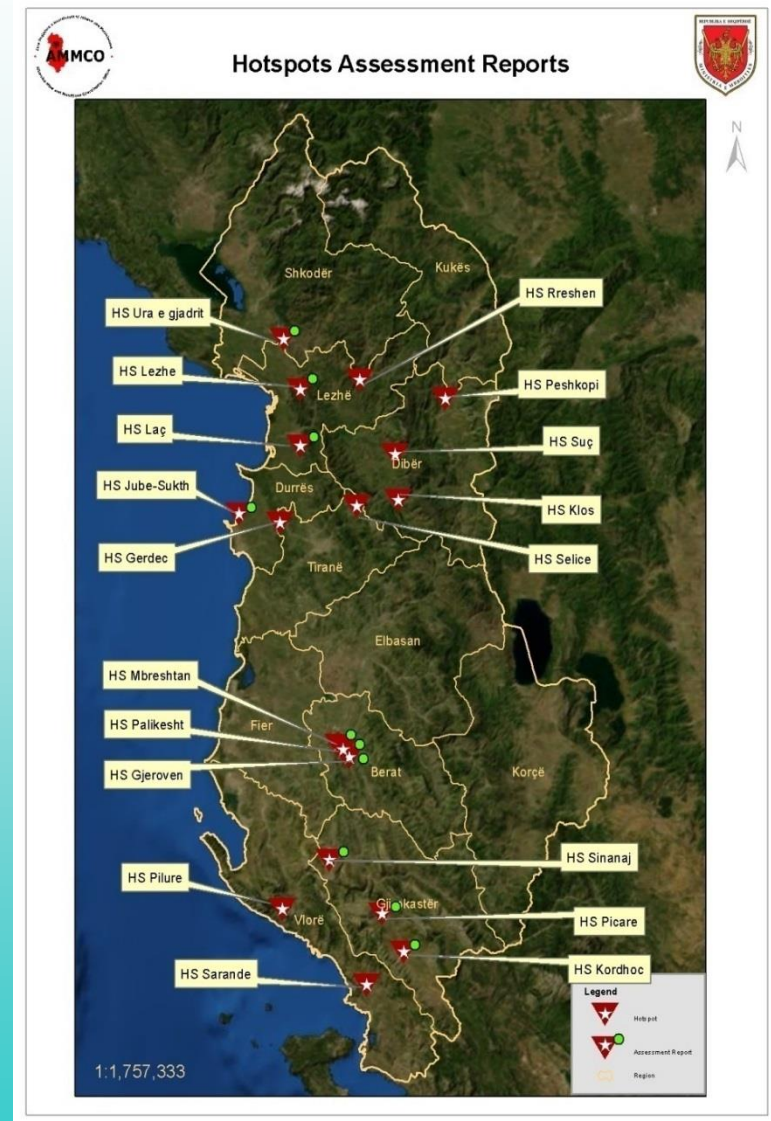
Together we made it happen



Data and Statistics



- Data collected in cooperation with local health and other institutions, ICRC/ARC, ALB-AID, other local NGOs.
- **150** people dead and **846** injured have been registered in: **landmines and cluster munitions, ERW** and **unexploded ordnances** in Albania (Total casualties in Albania **996 victims** as of April 2016).
- The last accident with **UXO from Hotspots** recorded in 22 September 2015 (Vertop – Berat).
- Data disaggregated by **Age and Gender**.
- Data are **shared continuously** with all stakeholders.





Emergency and Medical Care



- ❑ Improve **emergency** capabilities at **village/rural/remote** level:
 - ✓ Establishment of Community Based Rehabilitation (CBR) network with 30 nurses in former mine and cluster Munitions region.
 - ✓ Provisions of training for the village nurses working in former 39 mine/cluster munitions areas.
 - ✓ Provisions of equipments and other supplies to 30 health centers in former mine and cluster munitions villages.
- ❑ Improve **surgical capabilities of hospitals** in former mine and cluster munitions areas:
 - ✓ Training of medical doctors in emergency and surgical trauma in Albania and abroad.
 - ✓ Surgical Equipments provided to Kukes regional hospital and the district hospital in Tropoja.
 - ✓ X- Ray equipments ; C- Arm and ICONOS, provided to Kukes Regional Hospital.
- ❑ Treatment of **sight impaired** mine and cluster munitions: – 10 child survivors.
- ❑ In process..... from the **government and donor support**:
 - ✓ National Emergency Center, (CCC, number 112, Staff, new auto- ambulances & helicopter support .
 - ✓ Every regional hospital upgraded in equipments
 - ✓ National Center for Continuing Education (training , conferences and seminars)
 - ✓ Visits at home for PWD - part of the contract for family doctors
 - ✓ Number of medications in the reimbursement list increased.



Physical Rehabilitation



- ❑ **Support from ICRC at the National Ortho- Prosthetic Center.**
 - ✓ Raw materials, components for prostheses provided.
 - ✓ On – job training for prosthetic technicians in Albania and 1 PO technician cat II abroad.

- ❑ **Support from U.S. Department of State through ITF**
 - ✓ During the emergency phase for rehabilitation of patient outside Albania,
 - ✓ Start building the capacities in former mine and cluster munitions area in Albania:

- ❑ **Implementation of the project “Access to Physical Medicine and Rehabilitation- Three Phases 2006-2011):**
 - Development of the Rehabilitation unit (prosthetic Workshop and physiotherapy unit) in Kukes within the hospital structure. More space provided, number of staff increased.
 - Nursing Faculty in Tirana implements a sustainable program for the development of physiotherapy as a branch in education system. Development of Physiotherapy curricula and Master programme at National level. Every years students enrolled in academic year.
 - Training of 6 Ortho-Prosthetic technicians at the national level.
 - Training for 1 year for medical doctor on physical medicine.
 - Upgrade of rehabilitation unit at Kukes Regional Hospital (former mine effected areas).



Socio-Economic Inclusion



- ❑ **Socio- economic reintegration project for the development of household economies among of survivors and their families northeast Albania.**
 - ✓ 84 mine/UXO survivors and their families have benefited from this support.
- ❑ **Vocational training project implemented for survivors and their family members.**
 - ✓ There was a study for the professions needed in the former mine affected areas, survivors where consulted for the professions needed.
 - ✓ 104 mine and cluster munitions survivors and/or their families have benefited from this support.
 - ✓ 10 child mine/UXO survivors assisted with school/educational activities
 - ✓ In these initiatives; the participation of survivors, indirect victims, and affected communities was facilitated to set priorities
- ❑ **Beyond mine action ...) “Kukes Regional Development Initiative”.**
 - ✓ With focus and priority to former mine affected areas; in total 89 different development projects implemented .
 - ✓ Active participation and decision making of affected communities, indirect victims and survivors in setting the priorities,
- ❑ **In process..... from the government and donor financial and technical support:**
 - ✓ There is much attention from the government in “Vocational Schools “ and this is done in close cooperation and coordination with some donor countries, under the lead of Ministry of Social Welfare and Youth and Ministry of Education.



The major needs identified from the Needs Assessment project;



I- Emergency/Medical & Rehabilitation Needs;

- ❑ 527 persons with amputations need to be fitted and/or periodic maintenance of prosthesis/orthoses; this number includes below and upper limb prostheses, including partial foot and loss of fingers.
- ❑ 528 injured persons need to have regular medical checks.
- ❑ 21 survivors need corrective surgery.
- ❑ 610 persons need to attend physiotherapy sessions.
- ❑ 137 injured survivors should have periodic checks of their eyes from the specialists.
- ❑ 12 injured survivors should undergo operation for their vision.



II- Economic inclusion/ income generation activities

- ❑ 583 survivors are in need of further economic support such as; employment opportunities, income generation activities and support with micro - loans for family home based businesses.
- ❑ 347 survivors wish to attend vocational training Courses.
- ❑ 57 survivors wish to attend high school (Secondary school) and 34 persons to attend university studies.
- ❑ 123 families of survivors need to be supported for re-imbusement of studies of their children.
- ❑ 20 survivors ask to have access to daily Care Centers.

III- Psycho-Social/Peer Support, Sport Activities;

- ❑ 262 injured survivors should attend psycho-social sessions.
- ❑ 32 injured survivors have special needs such as following: supplies with reading tools for blind persons (Braille), Sign language media(sound with brails), Somniferous books (special books with sound with brails).
- ❑ Almost all survivors want to participate in recreational activities and psychosocial support to overcome the trauma, including in the peer support programs.



Collaboration and Coordination from all partners and sectors



- At all the process: **continuous collaboration maintained** with districts hospitals, other local authorities, Social Services Directories, relevant line ministries, national & international NGOs involved and mine/ERW and UXO Hotspot survivors , their representative organizations and other Persons with Disabilities.
- Enabling **rapid and reliable communication**: Information/Coordination mechanism in place, (coordination meetings, frequent visits, bilateral discussions, awareness/media materials).
- National and International **meetings, seminars/workshop** with participation and voice from survivors, other PWDs, Mine Action Portfolio- good chance to discuss the progress of the year and the future planning.
- Mine action/Victim Assistance has been part **health/rehabilitation structures and plans, other regional development strategies**; awareness raising for the problem.



Challenges to the VA in Albania



- **Migration of the capacities from the distance/rural region** to more urban areas has resulted in short of the services in some services in hospitals and in Primary Health Care in affected areas.
- Other **competing priorities within the health sector** have resulted in less attention to the needs of the survivors and other people with disabilities in terms of the physical rehabilitation needs.
- It will take time before there is a **sufficient number of professionals** able to treat patients in need at all primary, secondary and tertiary level (years...?). **Change of mentality within health professionals** to make them aware of the importance of physical rehabilitation services.
- High **unemployment rate in mine/UXO affected region** have burden the possibilities for mine survivors and disabled persons in general to employment opportunities. Even when assisted with the vocational training initiatives, the survivors have difficulties in competing with same other professions and services offered.
- Poverty and **lack of the economic developments in mine/UXO affected region**, has brought another difficulty for mine survivors to get jobs and develop economic reintegration activities.
- More **Synergies, collaboration, coordination** within the disability sector- **much needed**.



Victim Assistance

IMPLEMENTED BY



DONORS



Private Sector



Victims Assistance Activities



Regjistrimi i Viktimave te Municioneve qarku Vlore -10 Qershor 2015 -Foto J.Kola



Thank you