

Victim Assistance: Response from a Socio-Economic Perspective

World Vision International has been helping the disabled in Cambodia since the early 1970s. The author emphasizes that a focus on a socio-economic approach to victim assistance is important to ensure successful rehabilitation of the disabled.

by Chhouk Chantha, *World Vision International*

Introduction

Cambodia has a population of 11.5 million, and there are an estimated four to six million landmines remaining to be cleared. That is roughly one landmine for every two people. Consequently, Cambodia has one of the highest numbers of mine victims in the world. In Battambang province where I work, our records show that there are 6,900 disabled (this includes mine victims and other disabled). That means that one in every 112 people is disabled mostly as a result of landmine-related accidents.

World Vision first started work in Cambodia in the early 1970s and returned in 1979 after the fall of the Khmer Rouge. Our Mine Programme consists of four components:

- Mine clearance funded by the Australian Agency for International Development (AusAID) and through our partner NGO Mines Advisory Group (MAG)
- A mine awareness/mine action team project, also partially funded by AusAID
- Five community development projects (ADPs) in mine-affected districts
- A victim assistance project—the Vocational Rehabilitation for Disabled Project

Socio-Economic Perspective to Victim Assistance

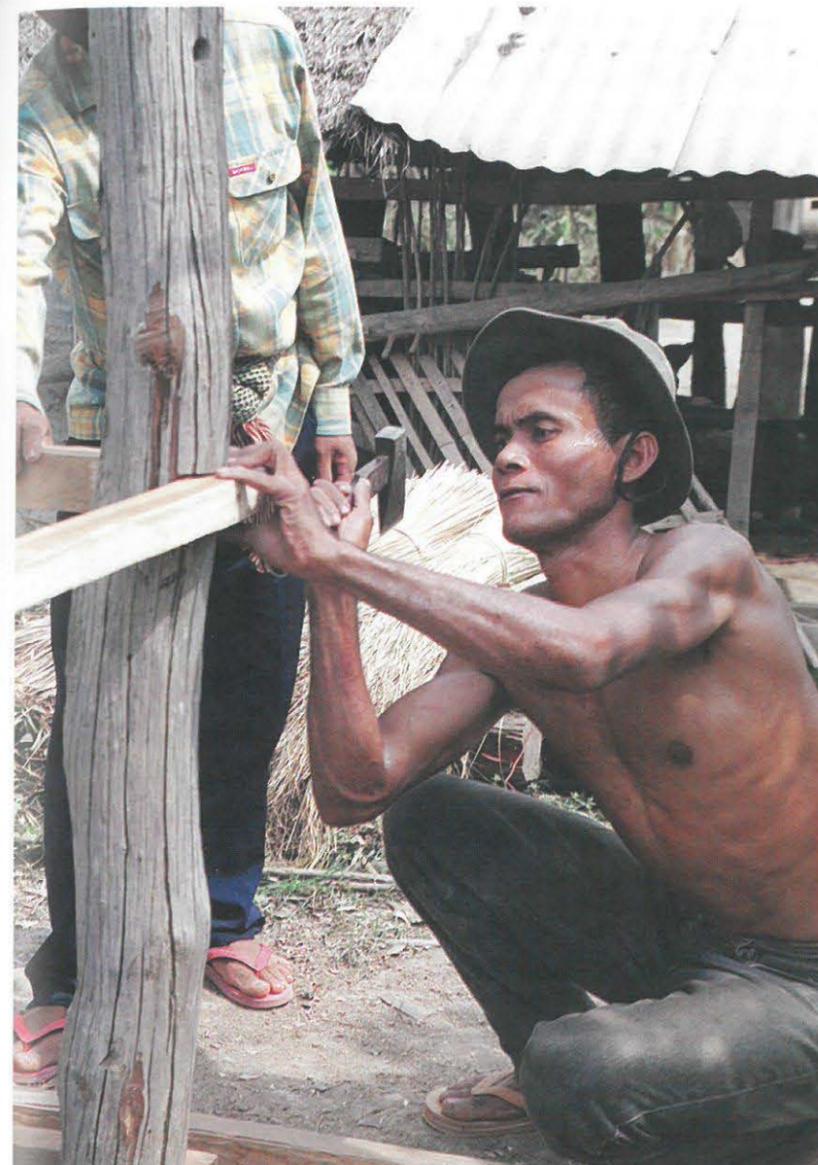
I think that we can view victim assistance in two ways: first from a short-term medical response perspective, and second from a longer-term livelihood perspective.

Most of the landmine survivors I have met and worked with tell a familiar story of wanting to die in the first days after their accident. They all have experienced feelings of hopelessness for themselves and their families. So we understand the importance of initial emergency surgery, emotional support for the survivors and their families and then the fitting of suitable prostheses.

But it's not enough just to give medical treatment and prosthetics—although those are important. In the longer term, you need to give people a way to help themselves, a way to earn their own income and once again be able to provide for their families. If a member of a Khmer household becomes an amputee, this affects the whole family, as it probably removes at least one source of income.

We can provide assistance to victims and their families in a variety of ways including appropriate skills training, microcredit loans, relief handouts and so on. In our work in Cambodia, we have focused on skills training in radio, TV and engine repair, and agriculture. This programme was initiated in 1993 with funding from the Australian Government Aid Agency (formerly AIDAB). What I would like to highlight here are six important learning points:

1. The importance of teaching skills that can be used back in the villages where the beneficiaries come from
2. The importance of pre-selection (We have an Extension Unit that conducts village research to find students who have the capacity to study and where a local village market for those skills exists)



3. The importance of a correct mix of training: theory, practice, examination and apprenticeship

4. The importance of follow-up after graduation: help with workshop set-up, a grant of a tool kit, an initial small loan, further multiple loans if successful, follow-up every week for six months and then another evaluation 18 months after graduation

5. The importance of doing all of this within the goal of reintegrating landmine survivors back into their communities, either by ensuring they have skills that they can use in their village (as we teach at our Vocational Rehabilitation Training Centre) or by targeting disabled and non-disabled but vulnerable beneficiaries (as we do in our four Vocational Rehabilitation Agriculture Units)

6. The importance of working towards making all of the above sustainable by partnering with the local government department so that by increasing their capacity they can continue to run these activities long after NGO funds have run out

In conclusion, when we consider mine/UXO victim assistance, we need to remember the very different but equally important perspectives of the amputee: the short-term medical treatment (including prosthetics) and the longer-term socio-economic impact. ■

Biographical Information

Mr. Chhouk Chantha served as Mines Programme Coordinator for World Vision Cambodia between 2000 and 2002 and prior to that as Coordinator of the World Vision Vocational Rehabilitation for the Disabled Project for several years.

**All photos courtesy of Philip Maher/World Vision.*

Contact Information

E-mail: andy_leigh@wvi.org

■ (Top) Tem Meuy, Roeun's husband, building a new henhouse. Raising chickens contributes to the family's income. (Bottom) Tending the family pineapple crop.

■ Sao Roeun, a 41-year old mother of seven, has survived extreme poverty, a landmine accident which resulted in the amputation of one leg and abandonment by her first husband. Through World Vision training and support for an animal husbandry and agriculture project, she is now able to feed her children and send them to school.

