Victim Assistance in Iraq

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Mine Awareness in Iraq

Following the U.S.-led war in Iraq, several non-governmental organizations (NGOs) are saving lives by doing what they can to raise awareness about the country's serious landmine/UXO problem.

by Kristina Davis, MAIC

Introduction

Due to the massive amounts of mines and UXO littering post-war Iraq, the country has arguably become one of the most dangerous places in the world. The main problem areas are around Iraq's borders and military bases, where unfortunately, many local villages are located as well. Many organizations are well aware of the landmine problems facing the Iraqi citizens and are currently implementing thorough mine education programs throughout the region.

Mine Awareness Programs

Handicap International (HI)

While it is difficult to ascertain exact numbers of landmine victims, the HI team reports landmine and UXO accidents occur at the rate of "several times a day in Baghdad and more than a dozen a day in the rest of the country." Hoping to spread awareness, HI has collaborated with the United Nations Children's Fund (UNICEF) to print at least 200,000 leaflets as their first step in educating the Iraqi community about the dangers of landmines. In order to present the messages in a way that would be understood by all, the images were tested on a sample of the Iraqi refugees currently in Jordan—coming from different regions of Iraq and Kurdistan and composed of men, women, and children, both Muslim and Christian. Two main areas have been targeted for distribution thus far: northern Iraq, in collaboration with the Mines Advisory Group (MAG), and southern Iraq, in collaboration with UNICEF in Lamiako. Baghdad will also be targeted with 100,000 leaflets for distribution as certain areas of the city are also polluted with mines and UXO. HI will use the community network, including mosques, the Red Crescent Society and women's organizations to facilitate their mine risk education (MRE) programs. Posters, seminars, and radio and television messages will be used to coordinate with the leaflets in order to successfully reach the largest number of people.

International Committee of the Red Cross (ICRC)

The ICRC has been working in Iraq since the Iran-Iraq war began in 1980. The ICRC mine awareness programs utilize the three pillars of the community-based awareness concept: information collection, community involvement in the fight against landmines, and integration with other programs. In the Middle East, the ICRC is starting up an emergency program with five awareness delegations based in the countries surrounding Iraq. The main aim is to reach the civilian population as quickly as possible with radio messages in order to avoid any unnecessary accidents. Posters, printed material and radio spots will be individually designed for appropriate target groups.

MAG

The Data Coordination Unit (DCU) at MAG has a database that holds records of more than 3,782 minefield incidents in the most heavily contaminated areas of Iraq. MAG’s mine awareness program seeks to minimize the risk of mine encounters among local populations by implementing diverse programs suited to many different types of people. From 1997 to June 2003, MAG trained over 3,000 teachers and school supervisors and was the first NGO to implement ‘‘child-to-child’’ techniques in mine action, including MRE. In addition, MAG visited mosques and shrines to disseminate information with messages from the Holy Koran in order to reach a broad spectrum of mine-affected persons.

The United Nations

The United Nations Office for Project Services (UNOPS) has managed the northern Iraq Mine Action Program since 1997. UNOPS estimates that the average number of mine victims in northern Iraq has increased significantly since the conflict began in March of 2003, how- ever, no one knows for certain exactly how many Iraqi civilians have been injured or killed. The number of civilian victims is very high but cannot be estimated due to the difficulty of counting them. Since conflict began in March 2003, more than 12,000 people have been killed or injured in landmine incidents. The ICRC counted, "writes Beatrice Cami of Handicap International, a dramatic increase in the number of victims.

Large amounts of UXO and mines left behind from the continuing conflict in Iraq have resulted in a dramatic increase in the number of victims. This article was written while the coalition forces were still engaged in conventional combat prior to the fall of Saddam Hussein.

by Kimberly Kim, MAIC

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They continued to run without interruption during the entire war. The only alteration they made to normal operations was the implementation of a contingency plan to help meet the needs of prospective victims. In addition to making preparations for a new influx of medical patients, the plan stipulates the need for an assessment of borders between the three northern governorates of eastern Iraq and newly liberated areas in southern and central Iraq. The purpose for this assessment is to estimate the number of victims from conflict and to aid families of victims by providing information.

EMERGENCY runs 21 first aid posts, two surgical centers, and two Centers for Rehabilitation and Social Reintegration.

Over 60 percent of the employees working in these rehabilitation centers are handicapped. In 2002, the network provided services to over 800 new patients, produced over 1,200 prostheses and orthoses, provided over 5,000 physiotherapy services to patients, and had over 20,000 outpatient visits. All services also regularly provided transportation as required. One important part of the network, the Emergency Surgical Hospital for Civilian War Victims (ESHCCW), is currently implementing rehabilitation and vocational training services in the Kurdistan region.

The United Nations is also working to include standardized administrative processes, develop standard databases, consolidate tracking and technology at all funded centers, increase production levels to meet demand, assess requirements for new services and establish a protocol of coordination with local authorities. They have been working in cooperation with other UN agencies, NGOs, local authorities and community groups to identify needs and service gaps, find solutions, and coordinate needs.

Handicap International

The HI staff in Iraq has encountered several problems providing aid to victims during this conflict. Working in and around Baghdad, HI teams have been facing challenges providing medical supplies, water,
Socio-Economic Impact of Landmines in Iraq

Years of war and internal conflict have left Iraq littered with landmines, UXO and stockpiled munitions. Mr. Johan Van Der Merwe of the United Nations Office for Project Services (UNOPS) and Colonel Lionel Dyck, MineTech chairman, describe the hazards Iraqis face that threaten normal activity and disrupt socio-economic redevelopment.

by Jennette Townsend, MAIC

Background

The socio-economic impact of landmines, UXO and stockpiled munitions extends across multiple areas, including:

- Accessing public areas
- Salvaging metal from mines/UXO
- Accessing land for agriculture
- Repairing infrastructure

The indirect impact of landmines includes materialization/urbanization and the spread of infectious diseases, in part due to the inability to water purification systems and to provide public health services in regions isolated by mines and UXO.

CARE International

With the collapse of security after the fall of Saddam Hussein's regime in April 2003, CARE workers in Baghdad have witnessed a large number of victims suffering tragic losses. In May, two of their vehicles were hijacked, and a security guard was shot in the leg when thieves attacked their warehouse. Because of these problems, the organization was forced to move temporarily out of Baghdad. Despite difficulties, CARE continues to distribute clean water to the west of the city. They also continue to deliver hygiene goods and lactose-free milk to malnourished children.

Accessing Public Areas

Johan Van Der Merwe, Technical Advisor with UNOPS, and Colonel Dyck, chairman of MineTech International, a leading mine clearance contractor, were recently in Iraq. Johan Van Der Merwe observed, "In the south, one of the biggest problems is stockpiled munitions. Wide ranges of munitions are stockpiled everywhere - in schools, hospitals, in defensive positions and in normal military installations. The munitions ranged from small arms to missiles and even suicide vests. Thousands of projectiles, unexploded bombs, cluster munitions and other ordnance turn streets, mosques and even some homes into hazardous areas and restrict or endanger normal social activities. For example, Mines Advisory Group (MAG) recently found a stockpile of approximately 500-700 AP mines stored in a mosque." The Area Mine Action Coordination Team suggests that enough to fry an egg," says Colonel Dyck.

Numerous reports of death and injury associated with UXO and landmines confirm that children are especially at risk. For example:

- In May 2003, the International Campaign to Ban Landmines (ICBL) reported an eight month old baby died in a blast in the living room of her family's flat in Baghdad. The explosion occurred on the floor and bumped an unexploded bomb brought into the house by her young cousin.
- Johan Van Der Mer we observed "Kids playing with propellant in small arm shells. They light the propellant and to fire mortar rounds, creating an instantaneous flame. Many sustain flash burns from being too close when they ignite the propellant."
- In the streets of the city, children are reportedly playing soccer among explosive remnants of war, stockpiles of ammunition, and even abandoned armored fighting vehicles. On April 27th, three children were killed while playing with a mortar shell.

Amnesty International delegates saw children playing around landmines located immediately next to the homes of university staff. The staff told the delegates that they had asked for help in removing landmines, but no such assistance has been received.

Colonel Dyck met a young girl who lost an arm at the site of a dumping ground that was unexploded mortar rounds in a field in Bassora, Iraq. The field, just outside the city, is replete with unexploded mortar rounds in a field in the fleeing AP since the end of the war. To help counter­pioneered a new prosthetic technology and more than a dozen a day in the rest of the city. They have also hired local hospitals and various other NGO medical centers, HI runs several ortho­

International Committee of the Red Cross

Since conflict began in March, the ICRC has been working almost without interruption at health facilities in Iraqi main cities (such as Baghdad, Basra, Baghuz, Baghdad, Qadisiya, Diyala, Babel, Kirkuk, Najaf, Saladin and Wasit). Despite massive looting at many hospitals and continued insecurity that prevents some staff from coming to work, the ICRC (partnered with the Movement), plans to continue its support of hospitals and key health workers by providing supplies for war wounded, distributing massive amounts of drinking water and making emergency repairs to water and sanitation plants.

Most hospitals working with the ICRC suffer from shortages in cooking gas, oxygen and fuel for generators. As other organizations working in Iraq, the ICRC lists security as another major concern. They write, "Although the Coalition Forces are present in some hospitals, many others are 'protected' by armed groups, who interfere with the administration and management of the health structures. Looting still takes place occasionally." In April, one of its logistics managers, Mr. Artacho Ardil, was tragically killed in crossfire while driving with other ICRC staff members in one of their vehicles.

Currently, the ICRC is working in collaboration with the Iraq Red Crescent Society (IRC) to collect data on mine casualties and stockpiling victims. The ICRC has trained volunteers from 11 IRC branches who are collecting information that will allow danger zones to be mapped and allow proper assessments of victim numbers. IRC volunteers are also passing out printed mine education material and broadcasting public service announce­ments over the radio. One of the greatest concerns the ICRC has been working hard to help reestablish water treatment facilities and working sewage systems in Iraqi communities. The ICRC is also helping send repair specialists and providing replacement parts for water facilities damaged during the conflict, they have made it possible for donated tanker trucks to temporarily distribute clean water to the communities. In the future, the ICRC, supported by the International Federation, will focus on emergency repairs to vital infrastructure, such as fishing and re-equipping hospitals and other health institutions, and providing health consumables and equipment.

In addition to providing support to local hospitals and various other NGO medical centers, HI runs several ortho­
Public health care in Tajikistan to establish a sustainable, National Mine Action Capacity, ensuring the transfer of knowledge at all levels, from explosive ordnance disposal (EOD) operators to EOD management positions. With continued support from the FSD and OSCE, Tajikistan is hoping to become mine-free in the near future.

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World Bank. "Croatia's demining process is a 'complex, slow and humanitarian' problem. Lack of finances influences the definition of priorities for mine removal-assessment, which territories offer the greatest potential benefit if the mines are removed. Clearly, such territories should be de-mined first.

The international community noted that humanitarian mine action in Croatia presents problems and has been "demining plans" with its own finances. By the end of 1998, the mandate of UNMAC in Croatia ended, and Croatia immediately the Mine Action Center (CROMAC) was established. CROMAC developed an empirical efficient counter-mine action. It contributes almost 80 percent of total funds for annual "Demining Plans" with its own finances from the state budget and World Bank loans. In order to save ever-growing operating costs, many donors decided to switch to CROMAC's management was forced to divide demining projects. At that time, the lack of priority coordination and the failure to meet the needs of stakeholders was noticed, namely because "classical" methods, including intuitive decision-making, cannot determine the optimal solutions for the humanitarian demining problems. Therefore, in 2001, CROMAC, in collaboration with the Foundation for Mine Action in Croatia, developed a hierarchical approach for the demining problem in Croatia. Within the pilot project, for example, the "landmine assessment" method was applied in order to provide an objective approach.