

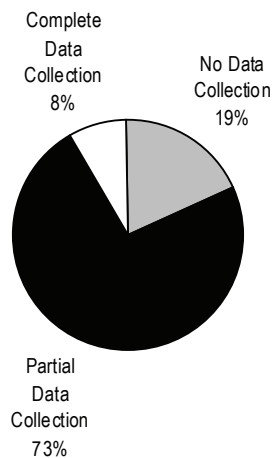
CASUALTY DATA COLLECTION

States Parties are committed “to do their utmost in providing assistance for the care and rehabilitation, including the social and economic reintegration of mine victims”¹, and the limited availability of data on mine/ERW/victim-activated IED casualties and survivors should be of concern to all those involved in victim assistance.

In 2006, **5,751** mine/ERW/victim-activated IED casualties were recorded in 68 countries and areas. The actual total number of mine/ERW/victim-activated IED casualties is unknown but certainly higher than 5,751, as data collection is inadequate or non-existent in **92 percent** of countries where casualties occurred in 2006.

In addition the number of survivors, often needing life-long assistance continues to grow: Landmine Monitor identified at least **473,000 survivors** as of August 2007. Although it is impossible to say how many of these survivors are still alive, this is likely an underestimate, as many survivors are not officially registered, especially if they live in remote areas, are from ethnic minorities, or when incidents occurred long before data collection was implemented. Statistics regarding survivors from some countries with large veteran populations, such as the United States and the Russian Federation are not available. Inadequate data also deprives implementers of a sound basis for the planning and provision of survivor assistance. Ten years after entry into force of the Mine Ban Treaty, efforts to improve data collection are urgently needed.

Collection System in 2006



Adequacy of data collection

Data collection is inadequate or non-existent in 64 of 68 countries with recorded casualties in 2006. Of the total 5,751 casualties, 5,279 occurred in countries where surveillance mechanisms are inadequate or non-existent.

Of the States Parties identified as the so-called VA24, 22 have inadequate casualty data collection mechanisms, despite having significant numbers of survivors the greatest need for assistance and responsibility to act.

However, more detailed information on casualties is available in States Parties – which recorded 28 percent of casualties where age, gender or status details were unknown – than in states not party to the treaty, where such details were not known in 72 percent of cases.

What are the main concerns regarding casualty data collection and data management?

- data collection is not prioritized; this is reflected in its poor quality and incompleteness (for example, in **Ethiopia*** and **Turkey**);
- lack of capacity impedes proactive data collection (for example, in **Colombia*** and **Angola***);
- geographic and demographic coverage is limited, not nationwide or excludes some groups (for example, in **Laos** and **Thailand***);
- mine/ERW/IED casualties occurring during conflicts are generally under-reported (for example, in **Myanmar/Burma** and **Iraq**);

¹ Preamble, Convention on the Prohibition of the Use, Stockpiling, Production and Transfer of Anti-Personnel Mines and on Their Destruction.

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- lack of differentiation between device types, recording of personal details, numbers of casualties involved per incident and injury types (for example, in **Burundi*** and **Poland**);
- lack of standard methodology, terminology and types of information collected (for example, in **Georgia** and **Kosovo**);
- poor quality control and verification resulting in duplications or fields containing the wrong information (for example, in Croatia* and Azerbaijan);
- data may be censored, embargoed or not used transparently for political or conflict reasons (for example, in Iraq and Colombia*);
- multiple actors collecting data leads to competing databases, overlapping and contradictory information (for example, in Lebanon and Bosnia and Herzegovina*);
- few data collection mechanisms provide socioeconomic or survivor assistance information, or it is collected inconsistently (in nearly all countries);
- casualty data is insufficiently linked to contamination data (in nearly all countries);
- data is not shared for planning purposes, contains insufficient information for planning, or data collectors have insufficient analytical capacity (for example, in DR Congo* and Peru*); and,
- casualty data is not linked to referral mechanisms, resulting in data collection for compilation purposes rather than assistance (for example, in Sudan* and Serbia*).

* VA 24 country