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Landmines and Cluster Munition Policy 2017- archived

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Australasian Faculty of
Rehabilitation Medicine

The Royal Australasian College of Physicians

Landmines and Cluster Munition Policy

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Date for next review: 5 years from publication

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Preamble

The Royal Australasian College of Physician (RACP) and its Australasian Faculty of Rehabilitation Medicine (AFRM) note that:

1. Landmines (anti-personnel mines, anti-vehicle mines), explosive remnants of war (ERWs) including UXOs (unexploded ordinances) and cluster munitions (i.e. large weapons that open to release hundreds of small bomblets which rain down over a wide area) are a leading cause of traumatic amputation both in children and in adults in countries currently or previously involved in armed conflict.¹
2. Landmine, ERWs and cluster munitions are abhorrent and indiscriminate weapons. They cannot be aimed, and can unintentionally be triggered by adults, children or animals. They recognise no cease fire and they go on maiming and killing decades after hostilities cease. Those most likely to encounter land mines are the rural poor who are likely to live far from adequate medical facilities.
3. Further, over 47 per cent of landmine, ERW and cluster munitions victims are children who suffer loss of life or lifelong disability and loss of opportunity and rarely have access to appropriate rehabilitation and prosthetic intervention.²
4. In many cultures and societies those who suffer amputations are often victims of discrimination, abuse and ostracisation which negatively affect their psychosocial wellbeing and their financial opportunities.³ Families of amputees are 40 per cent more likely to have difficulty feeding themselves and many amputees are unable to return to agricultural work due to the mining of agricultural land.⁴ In 1995 (which is the most recent data available), it was estimated that without landmines, agricultural production could be increased by 88–200 per cent in Afghanistan, 11 per cent in Bosnia, 135 per cent in Cambodia, and 3–6 per cent in Mozambique.⁵
5. Landmines also close roads to agricultural fields, healthcare facilities, and schools. As a result, economic growth is depressed, unemployment levels rise, housing becomes scarce and the incidence of malnutrition and infectious and waterborne diseases increases. This is likely to encourage many amputees and those in their communities to become refugees^{6,7}

The RACP and AFRM recognise that:

1. In many parts of the world, facilities to adequately treat and rehabilitate victims of landmines are lacking.
2. One in every 236 Cambodians,⁸ one in every 470 Angolans,⁹ one in every 1,000 Somalians in Northern Somalia was an amputee, and 75 per cent of landmine victims in Somalia were children.¹⁰

¹ Perkins ZB, De'Ath HD, Aylwin C, Brohi K, Walsh M, Tai NR (2012), Epidemiology and outcome of vascular trauma at a British Major Trauma Centre, *Eur J Vasc Endovasc Surg.* 2012 Aug;44(2):203-9. doi: 10.1016/j.ejvs.2012.05.013. Epub 2012 Jun 2.

² The Landmine and Cluster Munition Monitor (2013), Fact Sheet: The Impact of Mines/ERW on Children. Available online: <http://www.the-monitor.org/index.php/content/view/full/25064> [Retrieved 05/05/2017]

³ Walsh NE and Walsh WS (2003), Rehabilitation of landmine victims — the ultimate challenge. *Bulletin of the World Health Organization* 2003, 81 (9), pp.665-670. Available online: <http://www.who.int/bulletin/volumes/81/9/Walsh0903.pdf?ua=1> [Retrieved 5 May 2017]

⁴ Andersson N, Palha-be-Sousa C, Paredes S (1995) Social cost of landmines in four countries: Afghanistan, Bosnia, Cambodia, and Mozambique. *The British Medical Journal*: 311:718

⁵ Andersson N, Palha-be-Sousa C, Paredes S. (1995) Social cost of landmines in four countries: Afghanistan, Bosnia, Cambodia, and Mozambique. *BMJ*: 311:718

⁶ Walsh NE and Walsh WS (2003), Rehabilitation of landmine victims — the ultimate challenge. *Bulletin of the World Health Organization* 2003, 81 (9), pp.665-670. Available online: <http://www.who.int/bulletin/volumes/81/9/Walsh0903.pdf?ua=1> [Retrieved 5 May 2017]

⁷ Strada G. (1996), The horror of land mines. *Scientific American* 1996:40-5

⁸ United Nations Documentation Centre (2006) - UN Daily New Services (4 April 2006)

⁹ Africa Watch (1993), Landmines in Angola. Human Rights Watch

¹⁰ New Internationalist Magazine (1999), Landmines – The Facts. Available online: <https://newint.org/easier-english/landmine/lfacts.html> [Retrieved 17/05/2017]

3. One fifth of the 1,000,000 deaths in Afghanistan during the civil war were caused by land mines and 400,000 Afghans have been wounded by them.¹¹
4. In Poland between 1999 and 2008 there were at least 204 casualties from landmine and ERW laid during the Second World War despite the fact that over 250,000 mines had already been cleared.^{12,13}
5. In 2015, civilians made up 97 per cent of all cluster munition casualties.¹⁴ According to the Cluster Munition Monitor 2016, over 20,300 cluster munition casualties have been documented globally from the 1960s to the end of 2015.¹⁵ However, many casualties go unrecorded or lack sufficient documentation and the estimated number of global all-time casualties for 33 countries and three other areas is more than 55,000.¹⁶
6. In 2012, child casualties were reported at much higher rates than the global average of 47 per cent in a number of countries including India (72 per cent), Somalia (70 per cent), Sudan (65 per cent), Afghanistan (61 per cent) and Yemen (50 per cent).¹⁷ Additionally, significant increases were also noted in Yemen, Colombia and Cambodia between 2011 and 2012 which represents a concerning trend.¹⁸

Anti-vehicle mines, explosive remnants of war (ERWs) including UXOs (unexploded ordinances) and cluster munitions

The RACP and AFRM note the following:

- Anti-vehicle mines have the same injurious effect on people and on their access to land as do anti-personnel mines.¹⁹
- Unexploded ordinances and improvised explosive devices have the same injurious effect on people and on their access to land as do anti-personnel mines.²⁰
- The small bomblets released by cluster munitions may or may not explode on impact with the ground and are designed to allow those that do not explode on impact to act as landmines. These therefore have the same injurious effect on people and on their access to land as do anti-personnel mines.

¹¹ International Committee of the Red Cross (ICRC), Symposium on Anti-Personnel Mines (Montreux Symposium), Montreux, Switzerland, 21–23 April 1993 Montreux Symposium Report

¹² Jody Williams (1993), Social consequences of widespread use of landmines, in ICRC, Report of the Symposium of Anti-Personnel Mines: Montreux, p.69

¹³ Landmine and Cluster Munition Monitor Website, Archives 1999-2014: Poland, last updated 19 June 2010. Available online: http://archives.the-monitor.org/index.php/cp/display/region_profiles/theme/58 [Retrieved 05/07/2017]

¹⁴ International Campaign to Ban Landmines – Cluster Munition Coalition (2016), Cluster Munition Monitor 2016. Available online: <http://www.the-monitor.org/media/2394895/Cluster-Munition-Monitor-2016-Web.pdf> [Retrieved 14/05/2017]

¹⁵ International Campaign to Ban Landmines – Cluster Munition Coalition (2016), Cluster Munition Monitor 2016. Available online: <http://www.the-monitor.org/media/2394895/Cluster-Munition-Monitor-2016-Web.pdf> [Retrieved 14/05/2017]

¹⁶ International Campaign to Ban Landmines – Cluster Munition Coalition (2016), Cluster Munition Monitor 2016. Available online: <http://www.the-monitor.org/media/2394895/Cluster-Munition-Monitor-2016-Web.pdf> [Retrieved 14/05/2017]

¹⁷ The Landmine and Cluster Munition Monitor (2013), Fact Sheet: The Impact of Mines/ERW on Children. Available online: <http://www.the-monitor.org/index.php/content/view/full/25064> [Retrieved 05/05/2017]

¹⁸ The Landmine and Cluster Munition Monitor (2013), Fact Sheet: The Impact of Mines/ERW on Children. Available online: <http://www.the-monitor.org/index.php/content/view/full/25064> [Retrieved 05/05/2017]

¹⁹ Public Health Association of Australia (2014), Landmines and Cluster Ammunition Policy. Available online: <https://www.phaa.net.au/documents/item/262> [Retrieved 05/05/2017]

²⁰ Public Health Association of Australia (2014), Landmines and Cluster Ammunition Policy. Available online: <https://www.phaa.net.au/documents/item/262> [Retrieved 05/05/2017]

Anti-vehicle mines:

- Have an indirect effect on human activity by stopping or delaying movement of both local trades, essential goods and humanitarian aid by interrupting transport and so increase the numbers of people who die and suffer in humanitarian crises associated with armed conflict.
- Affect civilians as well as military personnel and peacekeepers.
- Can be set up to be triggered off from pressure as light as a child's' footstep in effect making them anti-personnel mines.
- Can be fitted with anti-handling devices making them dangerous to mine clearing personnel.
- Can be utilised through "mixed use" systems that combine anti-personnel and anti-tank mines in areas such as the Korean de-militarized zone.²¹

All this makes abolition of both anti-personnel mines and anti-vehicle mines a most urgent humanitarian emergency.

Commendations

The RACP and AFRM commend the Australian Government for the signing of the 1997 *United Nations Convention on the Prohibition of the use, stockpiling, production and transfer of anti-personnel mines and on their destruction*²² which was ratified in 1999 and the 2004 *Nairobi Declaration "Towards a Mine Free World"*.²³

We further commend the Australian Government for signing the 2008 *UN Convention on Cluster Munitions*²⁴ which prohibits the use and stockpiling of cluster munitions that cause unacceptable harm to civilians, offers assistance to victims including securing adequate provision of care and rehabilitation to survivors and ensures the clearance of contaminated areas. Further, we commend the Australian Government for its participation in the Dubrovnik Declaration 2015.²⁵

Resolutions

The RACP and AFRM urge the Australian Government to:

1. Join with other nations who believe anti-vehicle mines, explosive remnants of war, unexploded ordinances and cluster munitions which can be detonated on contact by a person are in effect anti-personnel mines and therefore should be banned under the existing 1997 *United Nations Convention on the Prohibition of the use, stockpiling, production and transfer of anti-personnel mines and on their destruction* and 2008 *UN Convention on Cluster Munitions*.
2. In the longer term, work on appropriate outlawing of the production, transfer and use of anti-vehicle mines, explosive remnants of war, unexploded ordinances and cluster munitions in the same manner as anti-personnel mines.

²¹ Geneva International Centre for Humanitarian Demining (GICHD) and Stockholm International Peace Research Institute (SIPRI) (2017), The humanitarian and developmental impact of anti-vehicle mines, Global mapping and analysis of anti-vehicle mine incidents in 2016. Available online: <https://www.sipri.org/sites/default/files/Global-mapping-analysis-anti-vehicle-mine-incident-2016.pdf> [Retrieved 13/05/2017]

²² *United Nations Convention on the Prohibition of the use, stockpiling, production and transfer of anti-personnel mines and on their destruction* (1997). Available online: https://treaties.un.org/doc/Treaties/1997/09/19970918%2007-53%20AM/Ch_XXVI_05p.pdf [Retrieved 16/05/2017]

²³ Nairobi Declaration (2004), *Towards a mine free world*. Available online: http://reliefweb.int/sites/reliefweb.int/files/resources/655DDE27162B354449256F62000AC096-Full_2004_Nairobi_Declaration.pdf [Retrieved 16/05/2017]

²⁴ The Convention on Cluster Munitions (2008). Available online: [http://www.unog.ch/80256EE600585943/\(httpPages\)/F27A2B84309E0C5AC12574F70036F176?OpenDocument](http://www.unog.ch/80256EE600585943/(httpPages)/F27A2B84309E0C5AC12574F70036F176?OpenDocument) [Retrieved 16/05/2017]

²⁵ Convention on Cluster Munitions (2016), Final Report. CCM/MSP/2016/9, 30 September 2016. Available online: <http://www.clusterconvention.org/wp-content/uploads/2016/04/Final-Report.pdf> [Retrieved 17/05/2017]

3. Continue to engage in efforts to ban the production, use and trade of land mines as a priority foreign policy initiative and particularly to lobby nations which have not yet done so to accede to the *1997 United Nations Convention on the Prohibition of the use, stockpiling, production and transfer of anti-personnel mines and on their destruction*, the *Nairobi Declaration 2004* and the *UN Convention on Cluster Munitions 2008*.
4. Continue to foster Australian capabilities in mine clearing as a needed activity that can be a valuable form of technical assistance to a large number of developing countries including many in our region such as Cambodia, Laos, Vietnam as well as Afghanistan, Syria and Iraq. In line with peace keeping activities this would be a particularly welcome and positive use of military forces and expertise.
5. Continue to support programs of assistance and training in the treatment and rehabilitation of landmine survivors in mine affected communities particularly in the areas of paediatric injury.
6. Cease its current practice of condoning the actions of combatants and defence forces who are not signatories of the *1997 United Nations Convention on the Prohibition of the use, stockpiling, production and transfer of anti-personnel mines and on their destruction*, who lay landmines and provide the Australian Defence Force (ADF) with intelligence regarding their positioning.²⁶

As physicians with the role of managing injury and its long term consequences, we urge the Australian Government to support the outlawing of stockpiling and persistent use of all landmines, explosive remnants of war, unexploded ordinances and cluster munitions.

²⁶ Australian Permanent Mission and Consulate-General, Geneva (2015), National Statement in High Level Segment, Ms Jane Hardy, 8 September 2015. Available online: <http://geneva.mission.gov.au/gene/statement757.html> [Retrieved 17/05/2017]

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