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Managing Landmine Casualty Data: Designing and Developing the Data Structures and Models Necessary to Track and Manage Landmine Casualty Data

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Executive Summary

The Mine Action Information Center (MAIC) at James Madison University, through a grant from the US Department of State via RONCO Consulting Corporation, implemented this project to develop a framework for the systematic collection and management of landmine casualty data. This report focuses on Phase II of the project, with Phase I already completed and Phase III to build on the results of Phase II.

The project was premised on the lack of an adequate system for collecting and managing landmine casualty data on a global basis. Data on landmine and UXO casualties is being collected in a systematic manner in some countries, but worldwide, it is not being collected in a comprehensive or consistent manner that allows it to be compared cross-nationally and aggregated globally. The lack of an adequate system hampers the ability of mine action decision makers to effectively design and implement programs and allocate scarce resources.

The Casualty Database Project has two principal goals:

1. To assess existing methods of landmine and UXO casualty data collection, analysis and dissemination
2. To formulate courses of action for the systematic and accurate collection and processing of casualty-related data.

Related to these goals are some core questions that the project seeks to answer:

1. Who is collecting casualty data?
2. What information about landmine casualties do the different systems collect?
3. How effectively and reliably is it being collected?
4. For what purposes is it being collected?
5. How can we improve the collection of casualty data globally?

The methodology used in Phase II to answer these questions involved identifying nine database systems that collected and managed information on landmine and UXO casualties. The Information Management System for Mine Action (IMSMA) developed by the Geneva International Center for Humanitarian Demining (GICHD) and the Swiss Federal Technical Institute in Zurich (ETHZ) is quickly becoming the standard information management system being adopted by mine action centers across the globe. However, several well-established mine action programs have developed their own systems. The project compared eight other database systems with IMSMA, identifying their similarities and differences.

Based on this comparison, a survey was designed to solicit input from experts in the fields of victim assistance and information management. The results of the survey indicate 57 data fields that the survey respondents strongly agreed should be included in a casualty database system. The survey results form the basis for further discussion about developing a core of common data fields that all database systems should collect. The survey process also yielded a lengthy list of people and organizations involved in landmine casualty programs and data collection. The database comparison, the survey results and the contact list all will be used in Phase III of the project, which will bring together some 12-15 victim assistance and information management experts to draw up a common core of data fields that can be used as the basis for a global casualty data collection and management system.

1. Project Overview: The Challenges of Landmine Casualty Data Collection

The Mine Action Information Center (MAIC) at James Madison University (JMU) received a grant from the Department of State via RONCO Consulting Corporation to implement this project to develop a framework for the systematic collection and management of landmine casualty data.

Absence of Adequate Data Collection System

The project was premised on the fact that no adequate system exists for collecting and managing landmine casualty data on a global basis. Some individual countries and organizations collect casualty data in a systematic way, but for many countries, no data exists or information is collected in an inconsistent, non-comprehensive manner. Furthermore, what national data is available often has been collected in such a way that it cannot be aggregated cross-nationally because of different database structures, terminology and type of data collected.

Because of the lack of a systematic casualty data collection and management system, many countries are unable to answer essential questions necessary for program planning and prioritizing facets of a national mine action plan. Some of the questions that require accurate data about landmine victims include:

- How serious is the landmine problem in any given region, country, or locale?
- What areas are hardest hit?
- What are the typical characteristics (nature, type, extent) of injuries?
- What groups of people are prone to become victims?
- When do injuries generally occur?
- How do the casualty patterns affect agriculture, markets, education, etc.?
- Are rehabilitation services meeting the needs of victims?

Effects of the Lack of a System

Globally, the lack of accurate landmine casualty data means that the various mine-affected countries cannot benefit as effectively as they might from the lessons learned from other countries' mine action programs. Without data that can be compared cross-nationally, it is difficult and unreliable to compare the characteristics of landmine contamination or impacts on local populations from country to country. It is thus also difficult to assess how effectively programs in one country can be transferred to another country. These problems also make it harder to coordinate internationally the disbursement of funds and the setting of priorities.

The lack of accurate global landmine data has fostered the use of questionable data as landmine-related organizations have attempted to communicate the essence of the landmine problem worldwide through numbers. The U.S. government in 1994 began to cite the figure of 26,000 landmine casualties annually.[1] This estimate was made based on imprecise methods to begin with, and it remained unchanged for years despite the implementation of numerous mine awareness education programs and the removal of thousands of mines. Despite the questionable

[1] U.S. Department of State, *Hidden Killers* 1994: *The Global Landmine Crisis* (Washington, D.C.:DOS, 1994), p.1.

accuracy of the figure, organizations routinely cited it in promoting their landmine-related causes. For example, the Adopt-a-Minefield website states that landmines maim or kill approximately 26,000 civilians every year, and the Landmine Survivors Network claims that someone is killed or injured by a landmine roughly every 22 minutes, although it acknowledges that the actual numbers are impossible to know. Clearly there has been a desire to quantify the extent of the problem, but the accurate data to substantiate such claims was sorely lacking.

The 26,000 annual figure at last was put to rest when, late in 2001, the U.S. Department of State reported that landmine casualty figures had dropped to 10,000 annually.[2] The State Department report based this figure on data "acquired from U.S. Embassy posts, the United Nations, the International Red Cross, and other reputable sources."[3] The report acknowledges that the casualty data does not "take into account casualties that have gone unreported because of lack of knowledge or procedures for doing so." Thus, while efforts to determine a global landmine casualty figure have improved recently, they still rely on pulling together reports from different sources that have their own individual limitations and that when aggregated still suffer from lack of comprehensiveness.

Challenges of Data Collection

One conclusion of the MAIC study that is very clear is that collecting accurate landmine casualty data on a national level, let alone globally, is a daunting task. Among the challenges to collecting casualty data are the following:

- Reluctance by national authorities to permit the collection of such data or, if collected, to release it.
- Difficulties counting all persons injured or killed by landmines: In some countries, almost half of the victims die before receiving treatment[4] and others may not seek treatment in clinics or hospitals if their injuries are not life-threatening.
- Problems with having a variety of agencies collecting data and then facing the task of integrating the various data sets while avoiding double counting. Sometimes the various organizations are reluctant to share information.
- Risks to the physical safety of data collectors who travel into contaminated areas.
- Difficulties providing proper training and resources to data collectors so that they can gather data in a reliable manner.
- The lack of necessary computer hardware, software and trained data entry personnel to permit the proper recording and management of the data.

As mine action programs worldwide have multiplied in the past decade and gained experience grappling with these and other technical and managerial challenges, methods for addressing these challenges have been developed in various countries. A major challenge now is to share these lessons learned so that additional countries can adopt programs to collect and

[2] U.S. Department of State, Bureau of Political-Military Affairs. "Hidden Killers 2001: The World's Landmine Problem," Appendix F of *To Walk the Earth in Safety: The United States Commitment to Humanitarian Demining*, 3rd Edition (Washington, D.C.: DOS, 2001), p. A-50.
[3] Ibid.
[4] Physicians for Human Rights. *Measuring Landmine Incidents & Injuries and the Capacity to Provide Care* (Boston: PHR, 2000), p. 3.

manage mine action information. This will require infusions of funds from international donors and the political commitment from national governments to remove what barriers to data collection and dissemination that they can.

The Uneven Nature of Landmine Casualty Data

The MAIC study illustrates that the quality and completeness of landmine casualty data is very uneven across the mine-affected countries and regions of the world. Handicap International (HI) issued a report, *Victim Assistance: Thematic Report 2000*, that provides an assessment of the casualty data available in different mine-affected countries. It also reports on the status of national disability laws and policy, and health system and social welfare resources available for victim care. This report, along with the *Landmine Monitor Report 2001: Toward a Mine-Free World* published by the International Campaign to Ban Landmines, provides the most comprehensive picture of the global landmine casualty situation. The State Department's "Hidden Killers 2001" notes the *Landmine Monitor Report's* valuable "global reporting capability" (p. A-50). However, upon reading the HI and ICBL reports, one is struck by how unsystematic casualty data collection remains today. The HI report emphasizes that: "Trying to get a complete picture of the landmine casualties for the past year (incidence) is as difficult as numbering the landmine survivors in the world over time (prevalence). Information remains difficult to collect and makes vain any tentative [*sic*] to obtain a total of the casualties at the international level" (p. 12).

The Role of Information Management Systems

The development of the Information Management System for Mine Action (IMSMA) by the Geneva International Center for Humanitarian Demining (GICHD) and the Swiss Federal Technical Institute in Zurich (ETHZ) at the behest of the UN's Mine Action Service (UNMAS) responds to the need among mine action programs for an effective means to collect and manage data. The information management system has the potential to promote the more systematic collection of mine action data, including information on casualties. IMSMA has now been introduced into 22 mine-affected countries or regions. However, it is not fully operational in all those countries, some of which are struggling to make available the human and material resources needed to make the most of the system. The software and training for IMSMA is provided free of charge, but the hardware equipment needed to run the program is not.

The need for an information management system to support demining operations has been known for years by some of the older national programs, such as in Afghanistan and Cambodia. Both of these countries, as well as some others, have developed their own database systems. They collect much of the same data as IMSMA does, but they also offer some features not in IMSMA. In the case of Cambodia, the victim database is quite well populated and can produce detailed and sophisticated reports. However, few countries have such well-developed databases.

The immediate challenge then is to develop a means to extend to all mine-affected countries the capability to collect, process and analyze landmine casualty data. This includes creating a common core of data that can be collected nationally, aggregated globally and compared cross-nationally. This is where the MAIC research project steps in.

2. Project Goals, Methodology and Potential Benefits

The MAIC research project was designed to investigate in detail the state of landmine casualty data collection in the world, to find out what data is being collected by whom, where and how. It then is charged with tapping the knowledge of experts in the field with experience collecting and using casualty data. Finally, the project will make recommendations for creating a methodology to collect, process and analyze data that will meet the global need for accurate, comprehensive and comparable information on landmine casualties.

Project Goals

The general goals of the project are to:

- Assess existing methods of landmine and UXO casualty data collection, analysis and dissemination
- Formulate courses of action for the systematic and accurate collection and processing of casualty-related data.

Related to these goals are some core questions that the project seeks to answer:

- Who is collecting casualty data?
- What information about landmine casualties do the different systems collect?
- How effectively and reliably is it being collected ?
- For what purposes is it being collected?
- How can we improve the collection of casualty data globally?

The fulfillment of these goals and answers to these questions require a number of specific tasks to be completed. The project has been divided into phases, with phase one already completed. This report reviews the results of phase two of the project. The specific tasks completed in phase two are discussed below. However, the specification of certain parameters that delimit the project's scope first must be explained.

Project Parameters

Definition of Victim: First of all, the project investigates the collection and management of landmine and UXO casualty data. The project thus takes a narrower view of landmine "victims" than does the victim or survivor assistance community: we only look at data that captures information about persons directly involved in a mine or UXO-related incident, that is, an unexpected explosion of a mine or UXO. Usually such incidents cause injury or death to the victim, but not always. Mine incident databases are set up to collect information on incidents even when no one is injured. However, they generally do not collect information on other persons affected by the incident such as family members dependent on the victim for support (part of the broader definition of "victim"). However, a few databases do collect such information, as becomes evident in the study.

Difference between *Incident* and *Accident*: A related point concerns the distinction between a mine "incident" and a mine "accident". These terms are not used in a consistent way across the mine action community, including those involved in casualty data collection. The new *International Mine Action Standards (IMAS)* attempt to clarify the use of these terms (see IMAS 04.10 *Glossary of Mine Action Terms and Abbreviations*), but even IMSMA has not fully adopted the use of the terms according to the standards.

IMSMA distinguishes between incident and accident by having two different sets of forms for collecting information: one for use when there is an "accident" during a demining-related operation and the other for use when a landmine or UXO explodes unexpectedly at times other than during a demining-related activity. Both the IMSMA Mine/UXO Accident Report and the Mine/UXO Incident Report are accompanied by forms to use to report on any casualties that result from the event (a "Casualty" form for accidents and an "Incident Victim" form for incidents). Copies of these IMSMA forms are included in Appendix E.

The MAIC study focuses on casualty data primarily involving persons not involved in demining operations when injured. This distinction is made because the circumstances of the two types of events that result in injury are quite different, and injured deminers generally have access to medical care and rehabilitation services which a non-deminer often cannot obtain. So when developing programs to provide assistance to landmine "victims" or "survivors", non-deminers are the prime focus. Furthermore, the eight databases to which IMSMA is compared do not ask the detailed questions about the demining operations that were underway when the "accident" occurred and so cannot be compared to IMSMA's Mine/UXO Accident and Casualty Reports which collects information specific to demining operations. Most of the databases examined ask whether the victim is a civilian or a military person, but ask little else about the incident as it relates to "demining" operations. In such cases, the demining organizations have their own investigation and reporting requirements, the results of which do not become part of the casualty database.

IMSMA's "Mine/UXO Incident Report" form and "Incident Victim" form are used together when reporting on incidents. When entering the information into the computer, the victim screens are accessed from the incident report screen. This study just focuses on the IMSMA 2.1 mine/UXO incident victim functionality (information reported on the incident/victim forms).

The MAIC study identified one database that collects data specifically on demining "accidents", the Database of Demining Incidents (DDI), developed by Andrew (Andy) V. Smith of AVS Consultants Ltd. The title of his database demonstrates the inconsistent use of the terms discussed above. Nevertheless, the DDI system provides extensive details on accidents that occurred during demining operations. Information is included on the procedures and the personal protective equipment used, and the nature and extent of the injuries. The DDI makes extensive use of text descriptions of aspects of the accident, which provides rich detail for analysis. The DDI serves as a valuable source of information to help improve demining operations. Mr. Smith is working with the developers of IMSMA as they further refine the Mine/UXO Accident functionality. Information on the DDI system is located in Appendix G.

Project Methodology and Design

Phase I: The first phase of the project involved making an inventory of Internet resources, print reports, and organizations and governmental agencies involved in landmine casualty policy and data collection. A contact list of specific individuals and organizations owning or processing landmine casualty information resources was developed. Many of those individuals and organizations attended the *Mine Action Information Systems Interoperability Workshop* sponsored by the Geneva International Center for Humanitarian Demining (GICHD) and hosted by the MAIC on the James Madison University campus in June 2001. This provided the opportunity for the MAIC research staff to meet directly with these individuals so they could become acquainted with the different information management systems used in mine action. These personal contacts proved crucial to the unfolding of the project.

Phase II: The second phase of the project began by identifying the principal mine action information systems that collected casualty data, addressing the question, **Who is collecting casualty data**? In addition to IMSMA version 2.1, whose enhanced mine/UXO incident victim functionality was demonstrated at the workshop, the project researchers identified eight additional casualty database systems in operation in mine-affected countries to study in detail. In seven of the eight cases, the databases had been created prior to the release of IMSMA in 1999 and were designed to meet the specific needs of those programs. They all include some similarities and differences with IMSMA. The eighth system was under development in a country that did not have IMSMA in place but yet wanted to collect casualty data (the ASCATED-UNICEF project in Guatemala). Its design was based somewhat on IMSMA but was adapted to the specific needs of the victim assistance project being planned. It offered an example of the requirements of data collection in Central America and so was included in the study as representative of particular needs for data collection in this region.[5]

The eight database systems included in the study besides IMSMA are:

1. The Cambodia Mine Victim Information System (CMVIS) developed by Handicap International and operated by HI and the Cambodian Red Cross. Data for this system is collected by carefully trained personnel, and the system now produces sophisticated reports on landmine and UXO casualties.[6]
2. The Afghanistan Mine Victim Information System (AMVIS), developed and operated by Handicap International, the ICRC, the WHO and the Mine Action Center for Afghanistan (MACA).[7]
3. The United Nations Office of Project Services (UNOPS) "OPS and PLANS" database developed for use in Northern Iraq.

[5] The OAS-sponsored demining program, PADCA, headquartered in Managua, Nicaragua, implemented the use of IMSMA in 2000. There are some noteworthy differences between the casualty data collected by IMSMA in Nicaragua and the data collected by the ASCATED-UNICEF project.

[6] See *Mine & UXO Casualties in Cambodia: Bi-Annual Report 1998-1999,* Mine Incident Database Project, Handicap International – Belgium and Cambodian Red Cross (with support from UNICEF and The Ministry of Foreign Affairs of Finland).

[7] See *Terms of Reference for the Coordination of AMVIS* (Draft 1, February 12, 2000). Also see e-mail message from Reuben McCarthy of HI-Belgium to Suzanne Fiederlein on 11 October 2001. McCarthy now works on the CMVIS project but was involved in establishing the AMVIS program in early 2000.

4. The information management system used by the Bosnia & Herzegovina Mine Action Center (BHMAC).
5. The information management system used by the Croatian Mine Action Center (CROMAC).
6. The Humanitarian Mine Action Database for Angola developed by Norwegian People's Aid for the National Institute for Removal of Explosive Ordnance (INAROEE – *Instituto Nacional de Remocao de Objectos E Engenhos Explosivos*).
7. The Initial Study to Identify Geographic Areas, Project for Integral Attention to Children with Disabilities due to Antipersonal Mines, ASCATED-UNICEF, Guatemala. ASCATED (*Asociación de Capacitación y Asistencia Técnica en Educación y Discapacidad*) is a Guatemalan NGO contracted to collect the data and plan the assistance program for UNICEF.
8. The International Committee for the Red Cross (ICRC) database developed for planning mine awareness programs in Nagorno Karabakh.[8]

Analysis of the Major Systems

The MAIC project studied the incident or victim casualty data collection functionality of each of these eight information systems and compared them to the IMSMA version 2.1 mine incident victim functionality. In particular, the study identified the data fields used in each system and compared them to those used by IMSMA version 2.1. IMSMA version 2.1 has an enhanced incident victim functionality. Earlier versions, for example, did not separate incident and accident data. IMSMA 2.1 is the version being installed in countries receiving the software for the first time, and the GICHD plans to replace the older versions of IMSMA already in use with the newer version. Version 2.1 or 2.2 (which has no significant changes to the incident victim functionality) are slated to be installed in about fifteen countries in 2001-2002.[9]

Data fields are just one aspect of the different databases that can be compared. One could also examine how the data collection is conducted. How well trained the data collectors are affects the reliability of the data. One could also look at the management of the computerized information management systems – what kind of quality control procedures are in place to ensure the accuracy of the entered data, for example. As was noted at the *Interoperability Workshop* at JMU in June 2001, there is the "Garbage in, Garbage out" problem: An information management system or database can be well designed and sophisticated but it is ultimately as good as the data that is collected and entered into it.

[8] See e-mail communication from Laurence Desvignes, the Coordinator of the Mines Awareness Programme for the ICRC to Suzanne Fiederlein, 2 October 2001, in which she explains the existence of five ICRC databases developed in relevant countries for purposes of planning mine awareness programs. The data collection forms used in each of these countries is slightly different and adapted to specific circumstances in each country/region. Ms. Desvignes reports that the ICRC programs are gradually converting to an IMSMA-based system. The Nagorno Karabakh data collection form was included as an additional example of the types of data being collected on landmine/UXO casualties. The ICRC also uses the AMVIS forms in Afghanistan and works closely with the BHMAC to collect data in Bosnia-Herzegovina through the use of its own data collection form that supplements that used by BHMAC.

[9] See e-mail communication, which includes table on "Installations on IMSMA Field Module since Summer 1999", from Alan Arnold, IMSMA Project Manager, GICHD, and Thomas Bollinger, IMSMA Integration Officer, GICHD, to Suzanne Fiederlein, MAIC, on 21 and 25 September 2001.

Limitations of the Project

The MAIC project could not investigate all aspects of the databases within its time and resource constraints. Thus we could not answer the question, **How effectively and reliably is data being collected?** An assessment of the quality of the data collected and entered would require lengthy site visits. The MAIC study limited itself to an assessment of the data fields used by the different databases as it sought to answer the question, **What information about landmine casualties do the different systems collect?** This focus also was determined by the specific phase II objective to develop a framework for the systematic collection and management of mine casualty data, which includes the development of common terminology and a common core of data fields. Essentially, the specific questions become: What data fields do the different systems have in common? Which data fields do the various experts in the realm of casualty data collection and analysis think are essential or important to collect? How one answers these questions depends on the purposes for collecting data, so the MAIC study also sought to answer the question, **For what purposes is data being collected?**

Achieving the Project's Ultimate Goal

The ultimate goal of the project is to be able to answer the last question set forth above, **How can we improve the collection of casualty data globally?** Or to phrase it in the specific terms of the project proposal, How can the information obtained about the perceived importance of various data fields be drawn into a framework or model for global casualty data collection and management?

In order to answer these questions, the project identified the similarities and differences among the data fields of the nine databases selected for the study by creating a table that would facilitate the comparison of the data fields (see Appendix A). This table then became the basis for drafting a survey that was sent out to individuals and organizations that collected and used casualty data (see Appendices B and C). The survey sought to identify those data fields that most of the respondents could agree were essential or important to include in a casualty database, what could be called a common core of data. Survey instruments have their limitations, but the results of this survey (see Appendix D) indicated data fields that three-quarters or more of the respondents could agree to include, and it indicated areas of data where the respondents disagreed more about what should be included. This information can now be used in the next phase of the project which is to bring casualty data experts together to make recommendations for drafting a common core of data fields that could be incorporated into the various databases collecting casualty information around the world.

Potential Benefits of the MAIC Project

The MAIC project offers several potential benefits for national mine action programs and the global efforts to eradicate landmines and to assist the survivors. The outcome of the project will be a recommended common core of data that all mine action information management systems could collect and share. This common core of data would not preclude the collection

and use of additional data as needed by individual programs, but it would insure that certain data required by different components of mine action operations is available. This can reduce the need for victims to be asked multiple times for the same information. Repeated surveying of victims is one commonly expressed concern of personnel working in victim assistance programs. The common core of data also would further the development of the Extensible Markup Language (XML), a project to create a computer language that will allow different computer systems to readily share data.

The development of a framework for the global collection and management of casualty data also would:

- Make record keeping easier
- Reduce duplication of effort and conserve mine action resources
- Promote the sharing of lessons learned by making data more comparable
- Provide more accurate global landmine casualty data that can be used for program planning and funding decisions

3. Efforts to Improve Data Collection and Management

The MAIC study builds on the work of several prominent organizations involved in the international effort to prevent mine accidents and assist landmine victims. The need for more accurate and comprehensive casualty data has long been recognized by the International Committee for the Red Cross (ICRC) and the World Health Organization (WHO), both of whom consider landmine and UXO injuries to be a public health epidemic. The ICRC has published articles and reports on the implications of landmines for public health since the early 1990s. The WHO and other health care-oriented organizations like the Physicians for Human Rights joined the call to address the threat landmines pose as a public health issue that requires input from trained medical and public health practitioners. The providers of prosthetics and physical rehabilitation for amputees, such as Handicap International and POWER: The International Limb Project, also expanded their programs for landmine survivors throughout these years. They all began to clamor for better casualty data so that their policy recommendations and program planning could be based on more accurate data.

Unfortunately, recognition of the need for more accurate and comprehensive data did not easily translate into the establishment of a means to obtain that data. Several of these organizations, however, did make significant contributions to laying the groundwork necessary to create a casualty data collection system. Some of their most important work in this vein is discussed below. The publications mentioned are ones that proved quite helpful in conducting the MAIC study. IMSMA, which is discussed elsewhere in this report, also stands as a significant contribution to the advancement of mine action data collection and management. The South East Europe Harmonization Project also merits recognition.

The International Committee of the Red Cross (ICRC): The ICRC was the first organization to begin collecting data on landmine victims in a comprehensive way. In 1991, it began collecting information gathered from its affiliated hospitals for its *Surgical War Wound*

Database. For close to two years, from January 1995 to November 1996, it attempted to create a database of mine incidents, but ended the project due to recognized problems with it. It also established databases based on information from its orthopedic centers. However, the ability to create a comprehensive database on landmine and UXO casualties has eluded the ICRC, although it has contributed considerably to our understanding of the requirements and difficulties of building such a database.

The ICRC in 1997 published a report written by Dr. Robin Coupland, a prominent surgeon with extensive experience in treating people wounded in war. The report, *Assistance for Victims of Anti-personnel Mines: Needs, Constraints and Strategy,* proposed a "Mines Information System" that uses data collected via a standardized data collection form. This publication provides very useful information on the challenges to providing adequate medical and rehabilitative care to persons injured by landmines, one of which is the paucity of accurate data. The ICRC's efforts have helped stimulate the interest of other prominent organizations in the field to work together to devise a standardized collection form.

The World Health Organization (WHO): By the year 2000, the Injuries and Violence Prevention Department of the WHO had drafted its own detailed report on methods for gathering the required data to allow medical personnel to adequately respond to the needs of landmine survivors. The publication, *Guidance on Surveillance of Injuries due to Landmines and Unexploded Ordnance*, included a standardized form for collecting casualty data: "Minimal Recommended Dataset for Surveillance on Landmine/UXO Injuries." This form became the foundation for the IMSMA version 2.1 incident victim functionality enhancement, which emerged from a collaborative effort, spearheaded by the WHO and involving the ICRC, UNICEF, GICHD and several NGOs engaged in victim assistance, such as Handicap International.[10]

Physicians for Human Rights (PHR): In 2000, the Physicians for Human Rights also published a document providing guidance on gathering information pertinent to programs assisting persons injured by landmines, *Measuring Landmine Incidents & Injuries and the Capacity to Provide Care.* This publication is more comprehensive than the previous ones discussed, in that it sets forth several surveillance tools to address different aspects of treating landmine/UXO casualties. It includes a tool for collecting data at the community level that supplements the ICRC's and WHO's earlier development of a hospital-based tool (although it, too, includes a hospital surveillance tool). The PHR guide goes beyond the collection of data on injuries to include tools for planning rehabilitation and reintegration programs and assessing health system capabilities. It also discusses the methods for conducting reliable surveys in mine-affected countries.

Although the PHR publication is quite comprehensive in addressing surveillance tools and the methods to employ them, it does not offer a suggested common core of data that could be collected and shared globally.

[10] See e-mail communication from Reto Haeni, IMSMA Project Coordinator, ETHZ, to Florence Ferguson, MAIC, on 9 August 2001 and from Laurence Desvignes, ICRC Coordinator of Mines Awareness Programme, to Suzanne Fiederlein, MAIC, on 2 October 2001.

Handicap International (HI): The final publication that requires discussion here is the *Victim Assistance: Thematic Report 2000* released by HI in September 2000. As mentioned above, this report provides country-by-country information on landmine casualties, disability law and policy, and health and social services systems. It is a great resource for tracking down the sources of landmine casualties available in the different countries and was a key source of information for the MAIC study. However, its content also profoundly demonstrates the unevenness of casualty data across the globe.

Attempt to Harmonize Mine Action Data in the Balkans

The South East Europe Harmonization Project is a collaborative effort by the mine action centers in the Balkans to harmonize terminology used by their management information systems and then to pool their data in order to produce reports that capture the reality of demining operations in the region and that compare the situations in the various countries. The project has received technical assistance from the European Union's Joint Research Center and involves the Mine Action Center of Bosnia-Herzegovina (BHMAC), the Mine Action Center of Croatia (CROMAC), the Mine Action Coordination Center for Kosovo (MACC Kosovo) and the Albanian Mine Action Executive (AMAE).

The participating MACs voluntarily transmit data they have collected to the project office, which then compiles it into reports. One type of data that is shared is information on incidents and victims. This sharing of data was preceded by meetings among the staff of the centers where they agreed on the harmonization of terminology so that their data could be pooled. The project represents the first concerted effort by mine action centers with different information management systems to develop the means to aggregate and compare data. The Kosovo MACC and the Albanian center both use IMSMA, with Kosovo being the site where considerable development of IMSMA took place. The AMAE is a newer user of IMSMA. The other two MACs have their own information management systems.

4. Comparison of Casualty Data Fields

Methodology Used for the Comparison

Appendix A contains the table produced to compare the data fields used by the nine different databases examined in the MAIC study. The table was constructed with IMSMA version 2.1 being the "standard" against which the others were compared. The data fields contained in the "Incident Victim" form of IMSMA 2.1 are listed in the left column. They are entered in regular type with their corresponding data field numbers. When the same data fields are included in the "Mine/UXO Incident Report" form, the same numbers are not always used. Therefore, only those from the "Incident Victim" form are included in the list. When the "Incident Report" form has a data field not included on the other form, then it is listed with the designation *IR.

The IMSMA screens are not exactly like the IMSMA forms in appearance, unlike the CMVIS screens and forms. The IMSMA forms do not include a space for geographic coordinates, but they can be entered on the screen instead of recording information on distance

and direction from the nearest town. It is also important to note that the IMSMA system can be customized by users to meet their particular needs. The study focused on the contents of the standard IMSMA forms and screens.

The table was completed by adding a column for each of the eight other databases examined. As the comparison was made between IMSMA and the other eight databases, when a data field was used that was not included on one of the standard IMSMA incident forms or screens, then it was added to the list, written in italics and identified with the database where it was first encountered. As the different databases were examined, the list of data fields in the left column grew longer.

The table used a simple code to indicate the presence of the various data fields in the different databases: Y=roughly similar information in included; L=less detailed information is included; M=more detailed information is included. The absence of a letter means nothing at all similar was included in the database. Brief notes were added as appropriate to indicate certain nuances of the systems.

The list of data fields was used to develop the survey instrument distributed to people involved in collecting, analyzing and managing landmine casualty data. Most but not all of the data fields in the list were incorporated into the survey and the wording was left unchanged as much as possible. Sometimes a few words had to be modified to make the intent of the question understandable. In a few cases, the wording still remained unclear and caused some confusion among the respondents. This indicates the difficulty in lifting such questions out of the instrument for which they were originally written. In a few instances, the questions just were not appropriate for all countries and so had less general appeal for the respondents.

Methodology for Analysis of the Survey

In the next section of the report, the results of the survey are analyzed and discussed. These results incorporate findings from the table about the prevalence of certain data fields, some of which are quite noteworthy in light of the survey responses. For example, all of the databases include details about the injuries suffered by the victim, and they all contain information about the place, time and date of the accident or incident, all of which the survey respondents strongly agreed should be included in a casualty database. The table also shows that all of the eight databases *except* IMSMA contain information on the "area type of the accident"; IMSMA includes information on area type on its "accident" form but not its "incident" form. The survey respondents strongly agreed that this data field should be included in a casualty database.

As the above examples illustrate, we found it more instructive to incorporate information on the prevalence of data fields into the analysis of the survey results rather than simply listing the data fields that appear most often among the nine databases (as indicated by the table in Appendix A). Appendix D contains a table that summarizes the survey results. The survey instrument and its results are the topic of the next section of this report.

5. Survey about Data Fields to Use in Mine Victim Databases

In an effort to benefit from the experience of experts with many years of experience in collecting, analyzing and managing victim data, the MAIC drafted a survey instrument to distribute to "field users" of mine/UXO casualty data. Building on the information collected during Phase I of the study, we drew up a contact list of persons working with mine action centers or national programs that collect victim data, intergovernmental or international organizations (IGOs) and non-governmental organizations (NGOs) involved in mine action programs (including clearance, mine awareness education and victim assistance), and consultants and academics engaged in research or other projects related to landmine victims. The list was as comprehensive as possible, both geographically and programmatically. If the goal is to develop a common core of data fields that users across the globe would find relevant, then feedback was needed from a broad cross-section of this group. See Appendix C for a copy of the list used to distribute surveys. In some cases several people working at one organization were included on the list and sent surveys in order to augment the chances of receiving a reply from the organization.

The survey instrument (see Appendix B) employed a five-point Likert scale to measure the extent to which the respondents felt a certain data field should be included in a landmine casualty database, with 1 indicating the strongest level of agreement for inclusion. As indicated above, the data fields included in the survey were drawn from the nine databases examined previously. Some additional questions were asked about some of the data fields in order to capture opinion on the desirability of wording questions on a data collection form a particular way. The survey opened with a question about the purpose or purposes for collecting data on mine incidents and victims. Three additional questions about the design of data report forms were included at the end of the survey. These questions emerged from communications the MAIC project staff had with people involved in landmine casualty information collection and management.

The MAIC received 23 completed surveys back and one partially completed survey from which limited information could be gleaned. The analysis of the data fields involved 23 sets of responses The questions on purposes for collecting data and the design of data report forms (sections I and III of the survey) included 24 surveys, although all respondents did not answer all the questions in these two sections.

The organizations represented in this pool of respondents can be classified as:

Type of organization	**Number**
• Mine Action Center (associated with national government)	3
• Mine Action Center (under direction of the United Nations)	3
• Non-governmental Organization (NGOs)	8
• International or Intergovernmental Organization (IGO)	7
• Non-profit Foundation	2
• Consultant/NGO or Educational Institution/NGO	2

This list indicates some overlap in the identification of the respondents, reflecting the fact that some collaboration exists among organizations and individuals administering mine action programs. However, the information indicates the variety of organizations and individuals responding. Many of the respondents identified themselves as working for a particular organization but indicated that their responses were their own views and not necessarily those of their organization. In other cases, one response was received from an organization that had been sent more than one survey, with the respondent indicating the answers were representative of the organization. The NGOs were asked to indicate whether they were engaged in victim assistance, mine awareness education or mine clearance; most reported they were involved in more than one area of activity, with almost all indicating involvement in victim assistance (and two not specifying).

Analysis of Results

Appendix D provides a table that sets forth details on the results of the survey. This section of the report will briefly summarize the results and highlight some of the more noteworthy findings.

Of the 113 data fields included in the survey, 57 had a high level of agreement for inclusion in a casualty database. "High level of agreement" was determined by having approximately three-quarters of the respondents giving the item a score of 1 or 2 (see below for the Likert scale used in the survey). Based on the numbers of responses included in the sample, the figure used was 73.9%, or 17 of 23 surveys analyzed. The table in Appendix D identifies the data fields that met this standard and provides the exact percentage of respondents marking them a 1 or a 2. In the "summary of results" below, the percentage of agreement is indicated for the data fields at the upper and lower ends of the "high level of agreement" designation.

1 = essential data--should always be included
2 = important to include this data if available
3 = neutral, no opinion on including or excluding this data
4 = low priority to include this data
5 = do not include this data

Summary of results:

The section on the **Location of the Incident/Accident** had the most agreement.
The section on **Medical Care** had no data fields where the 73.9% agreement standard was met.

Under **General Information**, these data fields had a high level of agreement:

1.1 Incident or accident ID
1.3 Date and Time of incident (100% agreement)
1.4 Data Gathered by (73.9%)
1.6 Information sources (73.9%)

1.8 Reported by: Organization address and telephone
1.10 Entry date
1.12 Date of report
1.15 Confirmation, Source & Reliability of Information (73.9%)

In section on **Location of Incident/Accident**:

- High level of agreement that information on *Province, District, Sub-district, Nearest City, Village, Municipality, Other local names,* and A*rea type of accident* should be included. These fields had percentages ranging from 91.7 [*Sub-district*] to 100 [*District, Other local names, Area type of accident*]
- Also high level of agreement, although lower than for those above, on inclusion of *Distance and direction from nearest town, Geographic coordinates, Town locator, Text description of locale,* and *Points of contact.*
- IMSMA 2.1 **Incident/Victim** forms do not include *Area type of accident,* although the **Accident** form does. However, 7 out of 8 of the other databases examined include this data field.

Section on **Individual Data of Victim**:

- Slight preference among respondents for specifying family and first names rather than asking generally for "name"
- Respondents split on preference for Date of Birth or Age: 7 Date of Birth, 5 Age, 3 Both (IMSMA 2.1 uses *Date of Birth*)

Section on **Injuries**:

- Respondents divided over necessity of having a diagram of human body but strong support for recording information on loss of limbs, sight and hearing and other injuries
- IMSMA 2.1 uses a diagram, which originated with the WHO *Minimal Recommended Dataset* (discussed in section 3 of this report). Of the other 8 databases, only the AMVIS uses a diagram.

Section on **Medical Care:**

No high level of agreement on whether to include any of the specific items. These items, with percentage of agreement indicated, include:

5.1 First medical facility reached (69.6%)
5.2 Time until 1st facility (60.7%)
5.3 Name of 1st hospital (65.2%)
5.4 Time until 1st hospital (60.7%)
5.5 What did victim do after accident for treatment? (69.6%)
5.6 Medical report reference (43.5%)
5.7 Type of medical treatment given (47.8%)
5.8 Received treatment for how long? (56.5%)

5.9.1 Was a transfusion necessary? (30.4%)
5.9.2 Was blood tested?(26.1%)

The results indicate disagreement on what information to ask and how, not whether this category of information (medical care) should be included in a casualty database.

Section on **Occupation of Victim**:

- Respondents strongly agreed on inclusion of information about whether the victim is the head of a household and how many dependents he or she has
- These data fields included in only one of the databases examined – and NOT included in IMSMA 2.1

Section on **Circumstances of Incident**:

- Respondents strongly agreed on need for both a check list to record *Activity at time of incident* as well as the option to provide a *text description of incident/accident*:
- Also high level of agreement for inclusion of:
    - 7.7 Did victim know area was dangerous?
    - 7.10 Do people continue to go into area?
    - 7.12 Did victim have mine awareness training?
    - 7.13 Was site marked?
    - 7.14 After the accident was the site: (*marked, demined, unknown)* (73.9%)
    - 7.15 Mine/UXO clearance at site?
    - 7.17.1 Were mines reported in area? (73.9%)
    - 7.17.2 Any mine accidents before?

Section on **Other Persons Involved**:

- Division over whether to include list of other casualties; some felt it better to have a separate form for each victim
- It appears that there is strong agreement for a list of number killed or injured with ages and sex, if not include specific names

Section on **Rehabilitation**:

- Respondents divided on need to include detailed rehabilitation information
- Strong support for some limited information:
    - 10.1 Does victim have: (check box from list that includes prostheses, wheelchair, crutches or received rehabilitation/physical therapy?) (73.9%)

Results of survey question on purposes for collecting data on victims:

The first question on the survey was:

Why do you collect data on mine incidents and victims? Check as many as apply. Please add any additional purposes not included on this list.

	Results
1. It is a government requirement in the country/area in which the incident occurred.	6
2. My agency/donor requires mine incident and victim data.	9
3. The information is used to plan demining operations.	15
4. The information is used to plan mine awareness education programs.	16
5. The information is used as part of a needs assessment for rehabilitation services.	15
6. The information is used to obtain additional funding.	10
7. The data collection is part of a research project.	5
8. Other_(specify)	3
[used to set up the village land mine impact; we use the collected data – do not collect it; (unspecified)]	

One respondent did not answer this question.

The results indicate that casualty data is most often used for program planning purposes, and is used for planning all categories of mine action. Advocacy on global landmine policy was not included in the list but was mentioned in the comments of at least one respondent as a purpose of data collection (along with several other purposes – not the sole purpose).

Results of Section III of Survey:

Section III of the survey asked three questions about other considerations when designing data report forms. These questions were not answered at all by several of the respondents and only in a cursory fashion by others, so they did not produce robust results. Based on responses that were submitted, there is no consensus on desired length of a casualty data collection form. The respondents indicated a preference for wording questions so that they can be answered by "checking" a response versus writing out the answer in text. The major concern expressed relating to question three (about use of additional forms to obtain supplemental information about each victim and the treatment they received) is that data collectors guard against repeated surveying of the victims.

6. Next Phase of the Project: Reaching Agreement on a Common Core of Data

Phase III: Casualty Database Working Group. The third phase of the project will use the results of the survey as a starting point for developing a common core of data that can be used in the creation a framework for the systematic management of mine casualty data. The contact list drawn up for use in distributing the survey will be used to develop a list of experts to invite to a working group session on the casualty data project. About 10-15 key players in the

field of casualty data collection and management will be asked to participate in the working group meeting hosted by the MAIC at JMU.

The group will be tasked to agree on a common core of casualty data fields and to make recommendations on other features of a framework for a global casualty data collection and management system. The meeting also will give these experts in the field an opportunity to share lessons learned and to pool their knowledge and experience. Often the people engaged in information management and program planning for mine action do not effectively communicate with one another, especially when they are operating in different regions of the world. The working group session would offer them the opportunity to brain storm and compare notes. The working group would be asked to make recommendation to be incorporated into a report on the project. The report then would be disseminated among those organizations developing and using mine action information systems.

Recommendation: Incorporate Identified Enhancements into Future Versions of IMSMA

A key recipient of the report will be the developers of IMSMA at the GICHD and ETHZ, with the expectation that the recommendations would help inform the process of revising future versions of IMSMA. It is clear the IMSMA has become the "standard" for mine information management systems, as its use has steadily expanded over the past two years and certain major organizations that had used other systems before have announced their transition over to IMSMA[11] However, there are also users of other systems who are less eager to convert to IMSMA because they believe their systems serve their needs more effectively. IMSMA's future versions will have to win them over if the goal of implementing a global system is to be achieved. The MAIC study can help identify features to incorporate into future versions of IMSMA.

An alternative goal is to at least be able to develop the means for the different systems to share data so that comparisons can be made and global data aggregated. This issue was the motivation behind the *Interoperability Workshop* in June 2001 and the purpose for developing the Extensible Markup Language (XML). The MAIC study has benefits for this initiative as well.

[11] The Mine Action Center for Afghanistan (MACA) reported at the GICHD's *Interoperability Workshop* held at JMU in June 2001 that it was in the process of converting to IMSMA, with an anticipated 18 months time table for completing the project. See the proceedings for the *Mine Action Information Systems Interoperability Workshop*, James Madison University, June 14-15, 2001, available at: maic.jmu.edu/conferences/MAIS%20workshop/index-3.htm. In 2001, the ICRC also announced that it is in the process of converting to IMSMA. See e-mail communication from Laurence Desvignes, ICRC, to Joe Lokey, MAIC Deputy Director, 29 May 2001.

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Appendix A: Comparison of Databases

Comparison of IMSMA Incident Victim Data Fields to Data Fields Used by Other Databases[1]

IMSMA (v.2.1)	Cambodia[2] (CMVIS)	Afghanistan[3] (AMVIS)	No. Iraq[4] (UNOPS)	Bosnia[5] (BHMAC/ ICRC)	Croatia[6] (CROMAC)	Angola[7] (INAROEE)	Guatemala[8] (ASCATED-UNICEF)	Nagorno Karabakh[9] (ICRC)
1. General Information								
1.1 Incident ID	Y			Y		Y (accident number)	Y (registration number)	
Accident already been registered? By institution or individual? Name? (INAROEE)						Y		
1.2 Date & time of incident	Y	L (date only)	L (date only)	Y	Y	L (date only)	L (date only)	L (date only)
1.3 Data gathered by				Y (investi-gating officer)				
Informant type – victim, relative, hospital staff, etc [6 options] (CMVIS)	Y	L	Y (text)			L		
More details about interview through which data gathered (CMVIS)	Y		Y					
Information sources (check box from list of 7, e.g., media, Ministry of Interior, etc.) (CROMAC)					Y			
1.4 Reported by	Y	Y	Y	Y	Y	Y	Y	Y
1.5 Organization (Address & Tel)	L(organ. name only)	L(organ. name only)		Y (police station)		L (organ. name only)		L (organ. name only)
1.6 Entry date								
1.7 Entered by	Y							
1.8 Date of report	Y	Y	Y	L	Y		Y	Y
1.9 Date of report received	Y							
Registration number entered by data entry person (INAROEE)						Y		
*IR: Confirmation, source & reliability information								

Nearest city from accident								
1.10 Province	Y (Khet)	Y				Y	Y (departamento)	Y (region)
1.11 District	Y (Srok)	Y	Y		Y (County)		Y (municipio)	
1.12 Subdistrict	Y (Khum)		Y				Y (aldea & caserio))	
1.13 Nearest city	Y(Phum)	Y (village)	Y (village)	Y (village & nearest town)	Y (nearest settlement)	Y (Communa/ Bairro)	Y (comunidad)	Y (village/city)
1.14 Municipality				Y	Y	Y	Y (municipio)	
*IR: Distance & direction from nearest town	Y		M (sketch option)					
Option to use coordinates (on screen but not form)	Y (GPS)		Y (Grid ID)	Y (Grid ref.)	Y (GK)		Y (GPS)	
Town locator	Y	Y (codes)						
Other local names for site (CMVIS)	Y							
Area type of accident – in village, path, field, forest, etc.(CMVIS)	Y (8 options plus "other" with text)	Y (13 options)	Y (10 options)	M (detailed – 22 options)	Y (7 options)	Y (9 options plus "other" with text)		Y (8 options plus text)
Text description of locale or area where accident occurred (BHMAC/ICRC)				Y (site sketch option)	Y			Y (text description & map sketch)
Types of vehicles (CROMAC)					Y			
Points of contact about incident/accident (CROMAC)					Y			
2. Individual Data								
2.1 Casualty report ID			Y (victim no.)		Y (personal ID no.)			
2.2 Owner MAC								
2.3 Family name		Y (Father)			Y		Y (2 apellidos)	
2.4 First Name		Y (victim)			Y		Y	
Name (no specification of first/family)	Y		Y	Y		Y		Y
2.5 Sex (check box)	Y	Y	Y	Y	Y	Y	Y	Y
2.6 Date of birth	Y (age)	Y (age)	Y	Y (age)	M	Y (age)	Y (age)	Y
Age at time of accident (Guatemala)							Y	

2.7 Address	Y	Y	Y		Y			Y
Family status (single, married, no. of children) (CMVIS)	Y		Y				Y	
Nationality (CROMAC)					Y			
3. Injuries								
3.1 Person injured or killed (check box)	Y		Y					Y(no injury/death)
Degree of injury (death, lightly injured, heavily injured, unharmed) (CROMAC)					Y			
Osteosynthesis (CROMAC)					Y			
3.2 If killed, manner of death [*where*] (check box, 4 choices)	M	Y	M					
Loss of: (check box on diagram)	Y (no diagram)	Y	Y (no diagram)	Y ("Type of injury"/ no diagram)	Y ("Type of injury"/ no diagram)	Y ("Type of injury"/ no diagram)	Y ("Type of injury"/ detailed list/no diagram)	Y (no diagram)
Arm/hand/finger/right/left	Y	Y	Y	L	L	L	M	L
Leg/above knee/below knee/foot/toes/right/left	Y	Y	Y	L	L	L	M	L
Eyesight (right/left)	Y	Y	Y	L	L	L	M	L
Hearing (right/left)	M	Y	Y			L	M	
Other injuries: (check box on diagram)	M (no diagram)	M	M (no diagram)	L (text description/ seriousness/ no diagram)	L (text description/ few boxes/no diagram)	L (check box if other injuries/no diagram)	L (Y/N with "specify"[text] /no diagram)	Y (no diagram)
4. Other Information: [*Medical Care*]								
4.1 First medical facility reached (check box, 3 choices)	M	Y			Y	Y (where received treatment?)		Y
4.2 Time until 1st facility	Y	Y						Y
4.3 Name of 1st hospital	Y	Y		L	L			Y
4.4 Time until 1st hospital	Y	Y						Y
What did victim do after accident for treatment? (check box from list of 9, including go to health center, hospital, etc.) (UNOPS)			Y					

4.11 Medical report reference								
Type of medical treatment given? (AMVIS)		Y	L (surgery?)			L (received treatment?	L	
Received treatment for how long? (entered based on 6 categories) (INAROEE)						Y		
Was a transfusion necessary? Was blood tested? (INAROEE)						Y		
4.13 Occupation (check box in list: 8 choices with limited sub-choices)	L (civilian/military)	L (civilian/ combatant/ IDP/Kuchi/ returnee)	M (text)	L (civilian/ soldier)	Y	L (civilian/ military/ UN or NGO)	Y (at time of incident)	
4.14 Occupation *prior* to accident (check box from same list)			Y (text)					
How is victim supported now? (UNOPS)			Y				Y	
Is the victim the head of a household? (Guatemala)							Y	
*How many dependants? (*check box from list of 8 that includes *spouse, minor children, etc)* (Guatemala)							Y	
4.5 Activity at time of incident (check box from list of 14)	M	M	M	Y (text & sketch option)	Y	L (6 options plus "other" with text)	Y (detailed plus "other" with text)	Y (plus "additional info" & text description options)
Who activated mine/UXO? (CMVIS)	Y	Y						
What made it explode? (check box from list of 9) (AMVIS)		Y						
4.6 How often went there? (check box, 4 choices)	Y	Y		Y				Y
4.7 Did victim know area was dangerous? (Y/N/U)	Y	Y	Y	Y				Y
Did other people know? (UNOPS)			Y					

4.8 If knew, why went? (check box, 4 choices)	Y	Y						
Do people continue to go into area? Why? (Bosnia)				Y				
4.9 Did victim see object? (check box, 4 choices)		M						
4.10 Had mine awareness training? (Y/N/U)	M	M	M			L (mine awareness training in zone?)		
4.12 Was site marked? (Y/N)	M	M		M				
After the accident was the site: marked, demined, unknown? (INAROEE)						Y		
Mine/UXO clearance at site? By whom? (CMVIS)	Y	Y	Y			L (demining in zone?)		
Was the victim attending school? (CMVIS)	Y							
Were mines reported? Any mine accidents before? (AMVIS)		Y		Y				
Victim live in area for more than 1 year? (AMVIS)		Y						
Were there demining or mine awareness NGOs in zone? Name? (INAROEE)						Y		
5. Other Persons Involved (check box)	Y	Y	Y	Y		Y		Y
How many killed?	Y	Y	Y	Y		Y		Y
How many injured?	Y	Y	Y	Y		Y		Y
List of other Casualties (Table with space for names)	Y	Y	Y	Y				
5.1 First Name		Y(victim)						
5.2 Name	Y	Y(Father)	Y	Y				Y
5.3 Status (check box, killed/injured)		M (age)	M (gender +)	M (age +)				
Animals injured/killed? (CMVIS)	Y							

6. Device causing incident (Check box, 8 choices)	Y	L	L	L	Y (5 options & space for name)	L	L	Y
Model number, if known (Bosnia)				Y				
Detailed info on device/ammunition & risk (with sketch option) (ICRC-Afghanistan [AMVIS attachment])		Y						
[Rehabilitation Information]	Y		Y		Y		Y	Y
Does victim have prostheses/wheelchair/ crutches or received therapy? (CMVIS)	Y		M				Y	M
Has victim been visited by community dev. worker? What did worker do? (CMVIS)	Y							
Recreational/psycho-social/economic reintegration (check boxes & text description) (CROMAC)					Y		Y	

Legend: Y= similar information (considering country differences)
M= more detailed information
L= less detailed information

*IR= information collected on the Mine/UXO Incident Report form rather than the Incident Victim form of IMSMA.

[1] The chart compares the data fields included in the mine/UXO incident reporting functionality of Version 2.1 of IMSMA to data fields used by other databases that collect and manage landmine/UXO casualty data in 8 mine-affected countries. IMSMA 2.1 separates data on demining accidents from data on mine/UXO incidents. This study focuses on casualty data primarily involving persons not involved in demining operations when injured, i.e, on IMSMA 2.1 mine/UXO incident victim functionality. IMSMA's "Mine/UXO Incident Report" form and "Incident Victim" form are used together when reporting on incidents. When entering the information into the computer, the victim screens are accessed from the incident report screen.

The left column of the table lists the data fields (recorded in regular type) contained in the "Incident Victim" form, which is the most detailed of the two forms. The numbers used in the list are the data field numbers included on this form. When the same information is collected on the "Incident Report" form, the same data field numbers are not necessarily used. Therefore, only those from the "Incident Victim" form are used. When the "Incident Report" form has a data field not included on the other form, then it is listed with the designation *IR.

As the comparison was made between IMSMA and the other eight databases, when a data field was used that is not included on one of the standard IMSMA incident forms or screens, then it was added to the list, written in italics and with the database where it was first encountered identified in parentheses. As the

different databases were examined, the list of databases in the left-hand column grew longer. This list of data fields was then used to develop the survey instrument distributed to people involved in collecting, analyzing and managing landmine casualty data.

[2] "Mine/UXO Casualty Report" form of the CMVIS. The Cambodia Mine Victim Information System was developed by Handicap International and is operated by HI and the Cambodian Red Cross.
[3] The Afghanistan Mine Victim Information System (AMVIS) "Mine/UXO Incident Report" (Part A) and "Additional Information" (Part B) are used to collect victim data by the ICRC in health care facilities and by Handicap International and MCPA in communities. (See *Terms of Reference for the Coordination of AMVIS*, Draft 1, February 12, 2000).
[4] "Incident Form" -- UNOPS /Survey Level One Form – For Mine/UXO victims or other disabled in Northern Iraq. UNOPS also uses two additional data collection forms in Northern Iraq: 1) "Emergency Surgical Form" that gathers detailed data on injury and treatment and some additional information on mine incident (e.g., "Marked minefield?"); it is used in two hospitals and 14 first aid posts in No. Iraq; and 2) "Orthopedic/Rehabilitation Database Form" used for patients receiving treatment at three prosthetic centers funded by UNOPS.
[5] "Initial Report of a Mine Incident/Accident" (XIII-1-5, January 18, 2000) used by the Mine Action Center Bosnia and Herzegovina (BHMAC). It asks for text information on all those injured in incident. The ICRC gathers victim data for its mine awareness programs in Bosnia and Herzegovina using its own form which focuses on individual victims rather than incidents. The column identifies data fields used in one or the other form.
[6] "Mine incident/accident report" form of the HCR (Croatian Mine Action Center – CROMAC in English). Like the mine action center in Bosnia Herzegovina, CROMAC has devised its own forms and database for collecting and storing mine/UXO casualty data.
[7] "Mine Accident Report" used by the National Institute for Removal of Explosive Ordnance (INAROEE – Instituto Nacional de Remocao de Objectos E Engenhos Explosivos). The Humanitarian Mine Action Database in Angola also collects data via Humanitarian Land Mine Field Survey Reports.
[8] "Boleta Individual" form used by the Estudio Inicial para Identificación de Areas Geográficas, Proyecto de Atención Integral a la Niñez con Discapacidad como Secuela de las Minas Antipersonales. ASCATED-UNICEF, Guatemala 2001.
[9] ICRC "Mine Accidents Information" form, used to gather mine incident/accident data for the ICRC's mine awareness education programs. This is an example of a form devised by the ICRC for use in a particular place (Nagorno Karabakh). The ICRC is gradually switching over to use the IMSMA system for all its databases but still uses some of its own forms in a number of countries where it has programs.

Appendix B: Survey Instrument

Survey about Data Fields toUse in Mine Victim Databases

The Mine Action Information Center (MAIC) at James Madison University is conducting a survey about the fields that should be included in a database designed to collect and analyze information about victims of landmine incidents. This survey is being distributed to mine action center personnel responsible for collecting mine victim data, persons working for victim assistance organizations, and other persons involved in mine action who make decisions that involve the use of mine victim information.

The survey asks you to rate the desirability of including certain data fields in a landmine casualty or victim database. Which items do you think are most important for including in a landmine victim database? Because the purpose(s) for collecting the information influences which data are important, the survey begins by asking about your purposes for collecting and using victim data. At the very end of the survey we ask for information about the respondent. This information will be separated from your responses to the survey questions. Your responses will be kept anonymous.

Please return your completed survey by **November 26, 2001** by one of the following methods:

1. by E-mail: **fiedersl@jmu.edu**
2. by FAX: 1.540.568.8176
3. by post or courier: Dr. Suzanne Fiederlein
   Mine Action Information Center
   MSC 8504, James Madison University
   One Court Square, Room 314
   Harrisonburg, VA 22807 USA

Please contact Suzanne Fiederlein (e-mail: **fiedersl@jmu.edu** , telephone: 1.540.568-2332) if you have any questions about the survey.

We appreciate your participation in this survey.

Dr. Terry Wessel, Faculty Associate, Mine Action Information Center, JMU
Dr. Suzanne Fiederlein, Research Associate, Mine Action Information Center, JMU

Survey about Data Fields to Use in Mine Victim Databases

I. Purpose(s) of data collection on mine incidents and victims:

Why do you collect data on mine incidents and victims? Check as many as apply. Please add any additional purposes not included on this list.

_____1. It is a government requirement in the country/area in which the incident occurred.
_____2. My agency/donor requires mine incident and victim data
_____3. The information is used to plan demining operations
_____4. The information is used to plan mine awareness education programs
_____5. The information is used as part of a needs assessment for rehabilitation services
_____6. The information is used to obtain additional funding
_____7. The data collection is part of a research project
_____8. Other _____

II. Data fields to be included on mine incidents and victims

The following have been included in one or more databases currently in use around the world. The survey retains the wording used by the databases as much as possible, with some changes made to improve clarity. Rate the desirability of including each data field according to the following scale. Write the number of your response in the box beside the data field. You may include any comments in the space beside the box. This space also is used in some cases to request additional information about a data field.

1 = essential data-should always be included
2 = important to include this data if it is available
3 = neutral, no opinion on including or excluding this data
4 = low priority to include this data
5 = Do not include this data

	Data fields	Number	Comments on data fields
1.0	**GENERAL INFORMATION**		
1.1	Incident or accident ID		Prefer use of ***incident*** _____ or ***accident*** _____?
1.2.1	Has the accident already been registered?		
1.2.2	By an institution or an individual?		
1.2.3	Name?		
1.3	Date & time of incident		
1.4	Data gathered by		
1.5	Informant type (check box from list that includes *victim, relative, government, military, community member, hospital staff*)		This is just one of various descriptions of informant type used by different databases. Your recommendation for categories?

1.6	Information sources (check box from list that includes *media, Mine Victims Association, Ministry of Interior, Disaster Management Centre, medical establishment, local community, others*)		This is an alternative to "informant type" listed above. Which data field is preferable? Your recommendation for categories?
1.7.1	More details about interview through which data gathered:		
1.7.2	Date & place of interview?		
1.7.3	How many persons attended interview?		
1.7.4	How many spoke?		
1.7.5	Language spoken?		
1.7.6	Duration of interview?		
1.8.1	Reported by:		
1.8.2	Organization address & telephone		
1.10	Entry date		
1.11	Entered by		
1.12	Date of report		
1.13	Date of report received		
1.14	Registration number entered by data entry person		
1.15	Confirmation, source & reliability of Information		
2.0	**LOCATION OF INCIDENT/ ACCIDENT**		
2.1	Province		
2.2	District		
2.3	Sub-district		
2.4	Nearest city		
2.5	Village		
2.6	Municipality		
2.7	Distance & direction from nearest town		
2.8	Geographic coordinates		
2.9	Town locator (or code)		
2.10	Other local names for site		

2.11	Area type of accident (check box from list that includes *in village, on path/road, ice field, grazing field, in forest, near river, on mountain/hill, near military position, other [specify])*		This is just one of various descriptions of incident locale used by different databases. Your recommendation for area types or locale descriptions to include in list?
2.12	Text description of locale or area where accident occurred		
2.13	Types of vehicles (choose from list: *tractor, truck, car, horse-drawn wagon, other*)		
2.14	Points of contact about incident/accident (Names of people with contact information)		
3.0	**INDIVIDUAL DATA (OF VICTIM)**		
3.1	Casualty report ID		
3.2	Owner MAC		
3.3.1	Name (no specification of first/family)		Is it necessary to specifically ask for first name and family name, or is "name" sufficient?
3.3.2	First Name		
3.3.3	Family Name		
3.6	Sex		
3.7	Date of birth/Age		Prefer use of ***date of birth***_____ or ***age***_____?
3.8	Age at time of accident		
3.9	Address		
3.10	Family status (choose from list: *single, married, number of children*)		Your recommendation for categories to include in list?
3.11	Nationality		
4.0	**INJURIES**		
4.1	Was person injured or killed (check box)		
4.2	Degree of injury (choose from list: *death, lightly injured, heavily injured, unharmed*)		Your recommendation for descriptions of injuries to include in list?
4.3	If killed, manner of death (check box from list that includes: *In site, at health care facility, during transport to health care facility, other*)		Your recommendation for categories of "manner of death" to include in list?

4.4.1	**Loss of: (check box on diagram of human body)**		Not all data forms use diagram of human body. Importance of using diagram of human body? (1=definitely omit diagram, 2=not important, 3=neutral/no opinion, 4=important, 5=essential)_____
4.4.2	Arm/hand/finger/right/left		
4.4.3	Leg/above knee/below knee/ foot/toes/right/left		
4.4.4	Eyesight (right/left)		
4.4.5	Hearing (right/left)		
4.5.1	Other injuries: (check box on separate diagram of human body) Types of injuries with check box: *Head/Neck, Back, Chest, Abdomen, Pelvis/Buttocks, Upper limbs, Lower limbs*		Do you prefer a diagram of a human body to "check" or simply a list of injuries to check? **Diagram___List___** Your recommendation for types of other injuries to include in list?
4.5.2	Other injuries: (check box specifying details of injuries [location]) – [no diagram of human body used] Types of injuries in list: *wounds, burns, paralysis*		
4.6	Text description of injuries		
5.0	**MEDICAL CARE**		
5.1	First medical facility reached		
5.2	Time until 1st facility		
5.3	Name of 1st hospital		
5.4	Time until 1st hospital		
5.5	What did victim do after accident for treatment? (check box from list of 9 that includes *nothing, treat self, went to village health center, went to district hospital,* etc.)		Your recommendation for types of actions to include in list?
5.6	Medical report reference		
5.7	Type of medical treatment given? (check boxes that apply; list includes *dressing, IV fluid, blood, antibiotics, debridement, amputation, painkillers, unknown)*		Your recommendation for types of treatment to include in list?
5.8	Received treatment for how long?		
5.9.1	Was a transfusion necessary?		
5.9.2	Was blood tested?		
6.0	**OCCUPATION OF VICTIM**		
6.1	Occupation (check box from list of 8 with limited sub-choices: *Mine action personnel, Military, Aid worker, Civilian, Government official, International observer, Other, Unknown*)		Some data forms only ask to distinguish between civilian & military. Some include *IDP* (internally displaced person)*, returnee,* or *personnel of United Nations/NGO.* Your recommendation for categories of occupation to include in list?

6.2	Occupation *prior* to accident		
6.3	How is the victim supported now?		
6.4.1	Is the victim the head of a household?		
6.4.2	How many dependents? (check box from list that includes *spouse, minor children, older children, parents, siblings, grandchildren, grandparents, others)*		Your recommendation for categories of dependents to include in list?
7.0	**CIRCUMSTANCES OF INCIDENT**		
7.1	Activity at time of incident (check box from list of 14, including *tending animals, collecting wood/food/water, passing/standing nearby, traveling in vehicle, playing/recreation, tampering, demining, police, unknown, other)*		Some data forms have included more and different types of activities than this sample. Your recommendation for types of activity to include in list?
7.2	Text description of incident/accident		
7.3	Sketch of incident/accident site		
7.4	Who activated mine/UXO?		
7.5	What made it explode?		
7.6	How often did victim go there?		
7.7	Did victim know area was dangerous?		
7.8	Did other people know?		
7.9	If knew, why went?		
7.10.1	Do people continue to go into area?		
7.10.2	Why?		
7.11	Did victim see object?		
7.12	Did victim have mine awareness training?		Some data forms asked for agency that provided the training and/or date of training. How important to include such information? (1=definitely omit, 2=not important, 3=neutral/no opinion, 4=important, 5=essential) _____
7.13	Was site marked?		
7.14	After the accident was the site: (check box from list that includes *marked, demined,*		Your recommendation for items to include in list?

	unknown?)		
7.15.1	Mine/UXO clearance at site?		
7.15.2	By whom?		
7.16	Was the victim attending school?		
7.17.1	Were mines reported in area?		
7.17.2	Any mine accidents before?		
7.18	Victim lived in area for more than 1 year?		
7.19.1	Were there demining or mine awareness NGOs in zone?		
7.19.2	Name?		
8.0	**OTHER PERSONS INVOLVED** (check box, Y/N)		
8.1	How many killed?		
8.2	How many injured?		
8.3.1	List of other Casualties		
8.3.2	First Name		
8.3.3	Name (unspecified first/family)		
8.3.4	Age		
8.3.5	Sex		
8.3.6	Status (injured/killed)		
8.4	Animals injured/killed?		
9.0	**DEVICE CAUSING INCIDENT**		
9.1	Type of device (check box from list that includes *anti-personnel mine, anti-tank mine, cluster munition, other UXO, booby trap, fuse, other, unknown)*		Your recommendation for types of devices to include in list?
9.2	Name of device		
9.3	Model number, if known		
9.4	Detailed information on device/ammunition & risk in area of incident (text description with sketch option)		
10.0	**REHABILITATION**		
10.1	Does victim have: (check box from list that includes *prostheses, wheelchair, crutches or received rehabilitation/physical therapy?)*		Some data forms are more detailed about rehabilitation services provided. Your recommendation for types of rehabilitation services to include in list? (Also see data fields 10.2 and 10.3 below)

10.2	Has victim had recreational/psycho-social/economic reintegration rehabilitation? (check box with space for text description)		
10.3.1	Has victim been visited by community development worker?		
10.3.2	What did worker do? (check box from list that includes *refer victim to disability rehabilitation centre, refer victim to vocational training center, provide monetary or other support, other [specify])*		Your recommendation for actions to include in list?

III. Other considerations when designing data report forms.

1. Is the length of the data report or collection form an important consideration? If yes, what should be its maximum length?

2. What is your preference for using specific questions that can be answered by "checking" a response from a list versus questions that require answers be written out in the interviewer's or victim's own words?

3. What is your opinion of using a mine incident form to collect certain basic data about the incident with the option of completing additional forms as needed to provide information about the injuries of each victim (one form each) and the treatment they received (an additional form each)?

IV. Information about the Respondent

1. Your organization: Name_____

2. Category of organization: _____
   Choose from the following (you may choose more than one):
   1. Government
   2. Mine action center
   3. NGO (engaged in victim assistance)
   4. NGO (engaged in mine awareness education)
   5. NGO (other)
   6. Intergovernmental Organization (IGO)
   7. Consultant
   8. Other (please specify) _____

3. In completing this survey, is your response: _____
   Choose from the following (you may choose more than one):
   1. the official view of your organization
   2. a representative view based on broad consultation
   3. your individual views and comments

4. Please provide your contact information:

   Name:_____

   Telephone:_____

   Fax: _____

   E-mail: _____

Appendix C: Contact List for Survey Distribution

Name	Organization	E-mail or Fax number
Surveys sent Nov. 6:		
*Ahmed, Mohamed (Mr)	UN MACC, South Lebanon	UNIFIL-MACC@un.org
*Aoun, Habbouba (Ms)	Landmine Resource Center – Lebanon	habbouba@balamand.edu.lb
*Arevalo, Fidel (Dr)	ASCATED-UNICEF, Guatemala	fidlau@terra.com.gt
*Armitt, Dave (Mr)	MACC UN/Ethiopia-Eritrea	armitt@un.org
*Asem, Habib (Mr)	Mine Action Center for Afghanistan	asem@undpafg.org.pk
Boyce, William (Dr)	CALMS – Queens Univ. (Tripartite)	calms@post.queensu.ca
*Braha, Arben (Mr)	Albanian Mine Action Center	amaealbania@hotmail.com
Casanova, Hector (Mr)	Center for International Rehabilitation	h-casanova@nwu.edu
*Conley, Charles (Mr)	Survey Action Center	chuck@vi.org
Craig, John (Mr)	Inter. Society for Prosthetics & Orth. (ISPO)	jgcraig@flash.net
*Desvignes, Laurence (Ms)	ICRC, Mines Awareness Programme	ldesvignes.GVA@icrc.org
Dunne, Judith (Ms)	UNOPS- No. Iraq	dunne@un.org
*Eriksson, Daniel (Mr)	UNMIK MACC (Kosovo)	erikssond@un.org
Gago, Maria Teresa (Ms)	PAHO – Tripartite Initiative	gagomari@paho.org
*Gordon, Patrick (Mr)	UNDP MAAT (Ethiopia)	gordon2@un.org
*Grujic, Zoran (Mr)	BHMAC (Bosnia)	Zoran_g@bhmac.org
Gutierrez, Beatriz Elena (Dra)	Program of Prevention of Accidents, Colombia	bgutierr@presidencia.gov.co
Krug, Etienne (Dr)	WHO – Injuries & Violence Prevention Dept.	kruge@who.int
Mathiesen, Henrik F. (Mr)	Norwegian People's Aid - Angola	npa.ang.dbase@ebonet.net
McCarthy, Reuben (Mr)	Handicap International-BE, CMVIS (Cambodia)	reuben@bigpond.com.kh
Nightingale, James (Mr)	IND – Mozambique (TA-Information)	info@ind.gov.mz
*Orozco, Carlos (Sr)	OAS-PADCA, Nicaragua	oea_dmdo@ibw.com.ni
Romer, Claude (Dr)	WHO – Afghan/Ethiopia/Somalia	romerc@who.org
*Saban, Sandi (Mr)	CROMAC (Croatia)	sandi.saban@hcr.hr
*Shepherd, Iain (Mr)	EU-JRC (Harmonization SEE)	iain.shepherd@jrc.it
Talbott, Marlene (Amb.)	OAS-UPD	talbott@oas.org
Toso, Jaime (Sr)	OAS-UPD	toso@oas.org
*Van der Merwe, J.J. (Mr)	UNOPS	JohanM@unops.org
*Worner, Ray (Mr)	Handicap International-CMVIS (Cambodia)	hi.cmvis@bigpond.com.kh

**Attended one of the MAIC workshops on information management in 2000 or 2001*

Surveys sent Nov. 7:

Baltimore, Perry (Mr)	Marshall Legacy Institute	pbaltimore@marshall-legacy.org
Hodge, Sarah (Ms)	POWER, Internat'l Limb Project	power4limbs@lineone.net
Hublet, Pierre (Mr)	Handicap Inter.– Belgium (Afghan program)	Pierre.hublet@handicap.be
Kendellen, Mike (Mr)	VVAF -- Dept. Humanitarian Affairs	kendellen@vi.org
Leigh, Andy (Mr)	World Vision Cambodia	andy_leigh@wvi.org
Santiago, Castellón (Mr)	Polus Centre – Walking Unidos	wuniorg@tmx.com.ni
Victor, Jack (Dr)	World Rehabilitation Fund	mail@worldrehabfund.org

Surveys sent Nov. 8:

Brennan, Polly (Ms)	UNICEF	pbrennan@unicef.org
Diamond, Mike (Mr)	Rotary Club Chicago, Operation LMS	mdiamond@globalchicago.org
Eitel, Sue (Ms)	Landmine Survivors Network	LSN@landminesurvivors.org
Filippino, Eric (Mr)	GICHD	e.filippino@gichd.ch
Jordan, Becky (Ms)	Landmine Survivors Network	LSN@landminesurvivors.org
MacPherson, Bob (Mr)	CARE (USA)	macpherson@care.org
McCracken, Dave (Mr)	Thailand MAC	ubique@loxinfo.co.th
Nabris, Khalid (Mr)	Disabled Peoples International	dpi@dpi.org
Danke, Winfried (Mr)	Prosthetic Outreach Foundation	pofsea@aol.com
Schlyter, Jens (Ms)	UNICEF	jschlyter@unicef.org
Smith, Andy (Mr)	AVS Consultants Ltd.	avs@landmines.demon.co.uk
Smith, William Kennedy (Dr)	CIR/PALM	wsm460@nwu.edu
Vermeulen, Paul (Mr)	Handicap Inter. – Switzerland	paulhi@compuserve.com

Surveys sent Nov. 9:

Bean, Phil (Mr)	UXO LAO	uxolao@pan-laos.net.la
Bjorsvik, Geir (Mr)	Norwegian People's Aid – Namibia	npaid@npaid.org
Carstairs, Tim (Mr)	Mines Advisory Group (MAG)	tim.carstairs@mag.org.uk
Cimpersek, Jernej (Mr)	Internat'l Trust Fund (Slovenia)	ljubljana@itf-fund.si
H. Wahdat	Comprehensive Disabled Afghans Program	uncdap@brain.net.pk
Coupland, Robin (Dr)	ICRC	rcoupland.gva@icrc.org
Undesignated	Doctors w/o Border/MSF	doctors@newyork.msf.org
Edwards, Dave (Mr)	Azerbaijan – ANAMA	anama@azeri.com

Fayyaz, Faiz Muhammad	Human Survival & Development	hsdpsh@yahoo.com
Feinberg, Lloyd (Mr)	Patrick J. Leahy War Victims Fund	Lfeinberg@usaid.gov
Horvath, Rob	Patrick J. Leahy War Victims Fund	Rob@dcofwvf.org
Ikeda, Akiko (Ms)	UNMAS, VA Officer	ikeda@un.org

Surveys sent Nov. 12-14:

Dingley, John	Somali Civil Protection Programme	som-mac@online.no
Grayson, Judy	UNDP (Azerbaijan & Somalia)	judy.grayson@undp.org
Reynolds, Simon	ADP/UNDP – Mozambique	kiwi@virconn.com
Shegog, Kerry	UXO LAO, UNDP	kerry.shegog@undp.org
Undesignated	Physicians for Human Rights	phrusa@phrusa.org

APPENDIX D: ANALYSIS OF SURVEY RESULTS

RESULTS OF MAIC VICTIM DATABASE SURVEY
(Results as of December 12, 2001)

1. Purposes of data collection on mine incidents and victims:

The first question on the survey was:

> Why do you collect data on mine incidents and victims? Check as many as apply. Please add any additional purposes not included on this list.

	Results:
1. It is a government requirement in the country/area in which the incident occurred.	6
2. My agency/donor requires mine incident and victim data.	9
3. The information is used to plan demining operations.	15
4. The information is used to plan mine awareness education programs.	16
5. The information is used as part of a needs assessment for rehabilitation services.	15
6. The information is used to obtain additional funding.	10
7. The data collection is part of a research project.	5
8. Other__	3

used to set up the village land mine impact; we use the collected data – do not collect it; (unspecified)

One respondent did not answer this question.

2. Percentage of Respondents Agreeing on Importance of Including a Data Field

The following table lists the Data Fields on the survey with 73.9% or higher (approximately three-quarters) agreement that they should be included in a casualty database (i.e., received response of 1 or 2 in at least 17 of 23 completed surveys).

1= essential data – should always be included
2=important to include this data if it is available

The 73.9% (approximately three-quarters) agreement standard was chosen to insure a high level of agreement that these data fields have support from a wide range of organizations and programs that collect and use casualty data for program planning purposes. While they may have different purposes for collecting the data (see results of question 1 above), most of the respondents agree that

these data fields are important.

The table below lists the item number and wording used in the survey (see Appendix ?? for complete text of survey), the actual percent agreement the item received, and comments about the item drawn from the analysis of the results. The comments section notes those data fields that do not appear in the mine/UXO incident victim functionality of IMSMA version 2.1, that is, they are not included in either the "Mine/UXO Incident Report" or the "Incident Victim" forms (or screens). One could also identify those IMSMA data fields that did **not** have strong agreement for inclusion in a database, but the analysis here only focuses on those fields that had strong agreement for inclusion by the respondents. The analysis also indicates data fields that did or did not appear in many of the eight other databases examined and compared to IMSMA. The survey included a few supplemental questions in addition to gauging level of support for inclusion of the items. The results of these questions also are discussed here.

Survey Question		**% Agreement**	**Comments/Analysis**
1.0	**GENERAL INFORMATION**		
1.1	Incident or accident ID	87.0	*15 of 23 responded to question about use of* **incident** vs. **accident** – *7 preferred* **incident**, *5 preferred* **accident**, *3 thought both terms should be used (distinguished between the two terms)*
1.3	Date & time of incident	100	
1.4	Data gathered by	73.9	
1.6	Information sources (check box from list that includes *media, Mine Victims Association, Ministry of Interior, Disaster Management Centre, medical establishment, local community, others*)	73.9	*Not included in IMSMA 2.1*
1.8.1	Reported by:	60.9	*Respondents agreed on need to include information on the reporting organization, along with its telephone number. Less agreement on need to include name of a specific person.*
1.8.2	Organization address & telephone	78.3	
1.10	Entry date	82.6	
1.12	Date of report	87.0	
1.15	Confirmation, source & reliability of Information	73.9	
2.0	**LOCATION OF INCIDENT/ ACCIDENT**		
2.1	Province	95.7	
2.2	District	100	
2.3	Sub-district	91.3	
2.4	Nearest city	95.7	

2.5	Village	95.7	*Not included in IMSMA 2.1 Village or equivalent term included in 7 of 8 other databases examined.*
2.6	Municipality	95.7	
2.7	Distance & direction from nearest town	87.0	
2.8	Geographic coordinates	82.6	
2.9	Town locator (or code)	78.3	
2.10	Other local names for site	100	*Not included in IMSMA 2.1*
2.11	Area type of accident (check box from list that includes *in village, on path/road, rice field, grazing field, in forest, near river, on mountain/hill, near military position, other [specify])*	100	*Not included in IMSMA 2.1. However, item is included on IMSMA 2.1 Mine/UXO **Accident** Report form and in 7 of 8 other databases examined.*
2.12	Text description of locale or area where accident occurred	87.0	*Not included in IMSMA 2.1 (but included in IMSMA 2.1 Mine/UXO **Accident** Report form). Limited or more extensive text option included in 5 of 8 other databases examined.*
2.14	Points of contact about incident/accident (Names of people with contact information)	87.0	*Not included in IMSMA 2.1 Only 1 of 8 other databases examined included this field.*
3.0	**INDIVIDUAL DATA (OF VICTIM)**		
3.1	Casualty report ID	91.3	
3.3.1	Name (no specification of first/family)	69.6	*Specifying first and family names was preferred over just asking for "name".*
3.3.2	First Name	87.0	*(IMSMA 2.1 asks for first and family names)*
3.3.3	Family Name	91.3	
3.6	Sex	100	
3.7	Date of birth/Age	91.3	*15 of 23 responded to question about which term preferred – 7 DoB, 5 age, 3 both (IMSMA 2.1 uses DoB)*
3.8	Age at time of accident	91.3	*Not included in IMSMA 2.1*
3.9	Address	82.6	
3.10	Family status (choose from list: *single, married, number of children)*	73.9	*Not included in IMSMA 2.1 Only 3 of 8 other databases included this item.*
4.0	**INJURIES**		
4.1	Was person injured or killed (check box)	95.7	

4.2	Degree of injury (choose from list: *death, lightly injured, heavily injured, unharmed*)	82.6	*Not included in IMSMA 2.1 Specification of degree or seriousness of injury only appears in 3 of 8 other databases*
4.3	If killed, manner of death (check box from list that includes: *In site, at health care facility, during transport to health care facility, other*)	78.3	
4.4.1	**Loss of: (check box on diagram of human body)**		*Respondents divided over necessity of having diagram of human body to use for recording loss of limbs or sight/hearing, but strong agreement on need to record such information.*
4.4.2	Arm/hand/finger/right/left	82.6	
4.4.3	Leg/above knee/below knee/ foot/toes/right/left	87.0	
4.4.4	Eyesight (right/left)	87.0	
4.4.5	Hearing (right/left)	87.0	
4.5.1	Other injuries: (check box on separate diagram of human body) Types of injuries with check box: *Head/Neck, Back, Chest, Abdomen, Pelvis/Buttocks, Upper limbs, Lower limbs*	69.6	*A list or table without diagram slightly preferred over diagram of human body. Overall, more support for including information on other injuries in check box format than for including text description of injuries.* *(IMSMA 2.1 uses diagrams)*
4.5.2	Other injuries: (check box specifying details of injuries [location]) – [no diagram of human body used] Types of injuries in list: *wounds, burns, paralysis*	73.9	
5.0	**MEDICAL CARE**		*MUCH DIFFERENCE OF OPINION IN THIS SECTION. NONE OF THE DATA FIELDS HAD AGREEMENT AT 73.9% LEVEL OR HIGHER*
6.0	**OCCUPATION Of VICTIM**		
6.1	Occupation (check box from list of 8 with limited sub-choices: *Mine action personnel, Military, Aid worker, Civilian, Government official, International observer, Other, Unknown*)	87.0	*IMSMA 2.1 asks two questions about occupation with one making reference to occupation* **prior** *to accident. This question (6.2) had 65.2% agreement. Results indicate agreement that occupation should be included as data field with preference for more general statement. Comments from respondents also indicate relationship between this question and number 7.1,* Activity at time of incident.
6.4.1	Is the victim the head of a household?	87.0	*Only one of the data collection systems examined included this information but survey found considerable support for including this information. (IMSMA 2.1 does* ***not*** *include these questions.)*

6.4.2	How many dependents? (check box from list that includes *spouse, minor children, older children, parents, siblings, grandchildren, grandparents, others)*	82.6	
7.0	**CIRCUMSTANCES OF INCIDENT**		
7.1	Activity at time of incident (check box from list of 14, including *tending animals, collecting wood/food/water, passing/standing nearby, traveling in vehicle, playing/ recreation, tampering, demining, police, unknown, other)*	95.7	*Support for both a check list of activities at time of incident* ***and*** *a text description of the incident* *(IMSMA 2.1 includes a check box for "other" with option to explain but no other text description option. IMSMA 2.1 does provide for text description on Mine/UXO A****ccident*** *Report.)*
7.2	Text description of incident/accident	78.3	
7.7	Did victim know area was dangerous?	82.6	
7.10.1	Do people continue to go into area?	78.3	*Not included in IMSMA 2.1. Included in 1 of 8 other databases examined.*
7.12	Did victim have mine awareness training?	78.3	
7.13	Was site marked?	87.0	
7.14	After the accident was the site: (check box from list that includes *marked, demined, unknown?*)	73.9	*Not included in IMSMA 2.1. Included in 1 of 8 other databases examined.*
7.15.1	Mine/UXO clearance at site?	87.0	*Not included in IMSMA 2.1. Included in 4 of 8 other databases examined.*
7.17.1	Were mines reported in area?	73.9	*Not included in IMSMA 2.1. Included in 2 of 8 other databases examined.*
7.17.2	Any mine accidents before?	78.3	*Not included in IMSMA 2.1. Included in 2 of 8 other databases examined.*
8.0	**OTHER PERSONS INVOLVED**		
8.1	How many killed?	82.6	
8.2	How many injured?	82.6	
8.3.1	List of other Casualties	65.2	*Division over whether to include a list of other casualties. Some felt it is better to have a separate form for each victim. It appears that there is agreement to include at least a list of the number of killed and injured with ages, sex and status, if not include a list of specific names.* *(IMSMA 2.1 includes table for "list of other casualties" with names and status [killed/injured])*
8.3.4	Age	78.3	*Not included in IMSMA 2.1*

8.3.5	Sex	73.9	*Not included in IMSMA 2.1*
8.3.6	Status (injured/killed)	82.6	
9.0	**DEVICE CAUSING INCIDENT**		
9.1	Type of device (check box from list that includes *anti-personnel mine, anti-tank mine, cluster munition, other UXO, booby trap, fuse, other, unknown)*	87.0	*All nine databases examined included this item in some form.*
10.0	**REHABILITATION**		
10.1	Does victim have: (check box from list that includes *prostheses, wheelchair, crutches or received rehabilitation/physical therapy?)*	73.9	*Overall, divided responses on the need to include rehabilitation information, although there was agreement to include some limited information. IMSMA 2.1 does **not** include information on rehabilitation. 5 of 8 other databases examined included some items on rehabilitation.*

Mine/UXO Incident Report

Locator code: .../.../.../...

[1]General information:

[1.1]ID:	[1.9]**Confirmed:** ☐ Yes ☐ No
[1.2]Owner MAC:	[1.10]Reliability:Information: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐6
[1.3]Data gathered by:	[1.11]Source: ☐ A ☐ B ☐ C ☐ D ☐ E ☐F
[1.4]Reported by:	
[1.5]Organisation (Address & Tel):	
[1.6]Entry date:	[1.12]Date of report:
[1.7]Entered by:	[1.13]Date of report received:
[1.8]Date and time of incident:	

[1.14] Was area marked? ☐ Yes ☐ No ☐ Unknown

Nearest city from incident

[1.15]Province:	[1.16]District:
[1.17]Subdistrict:	[1.18]Nearest city:
[1.19]Municipality:	

Location of incident

[1.20]Distance from nearest town: ☐ Less than 500m ☐ 500 m – 5 km ☐ More than 5 km

[1.21]Direction from nearest town: ☐ North ☐ South ☐ North – East ☐ South – East
☐ East ☐ West ☐ North – West ☐ South - West ☐ Unknown

[2]Device that caused the incident

☐ [2.1]Unknown ☐ [2.2]Anti-personnel mine ☐ [2.3]Anti-tank mine ☐ [2.4]Cluster munition
☐ [2.5]other UXO ☐ [2.6]Booby trap ☐ [2.7]Fuse

☐ [2.8]Other device:

List of Casualties

FirstName	Name	Status
		☒ Killed ☒ Injured
		☐ Killed ☐ Injured
		☐ Killed ☐ Injured

Incident Victim

Locator code: …/…/…/…

[1]General information:

[1.1]Incident ID:	[1.6]Entry date:
[1.2]Date and time of incident:	[1.7]Entered by:
[1.3]Data gathered by:	[1.8]Date of report:
[1.4]Reported by:	[1.9]Date of report received:
[1.5]Organisation (Address & Tel):	

Nearest city from accident

[1.10]Province:	[1.12]Subdistrict:
[1.11]District:	[1.13]Nearest city:
	[1.14]Municipality:

[2]Individual data

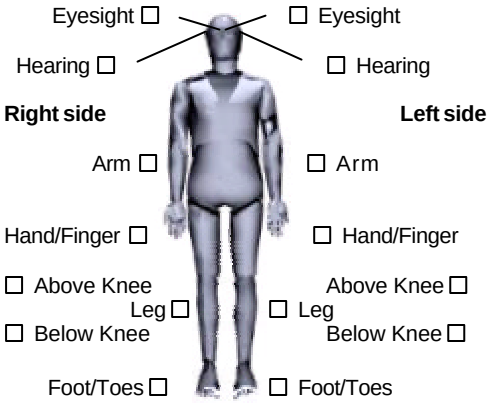
[2.1]Casualty report ID:	[2.2]Owner MAC:	
[2.3]Family name:	[2.5]Sex: ☐ Male ☐ Female	[2.7]Address:
[2.4]First name:	[2.6]Date of Birth:	

[3]Injuries:

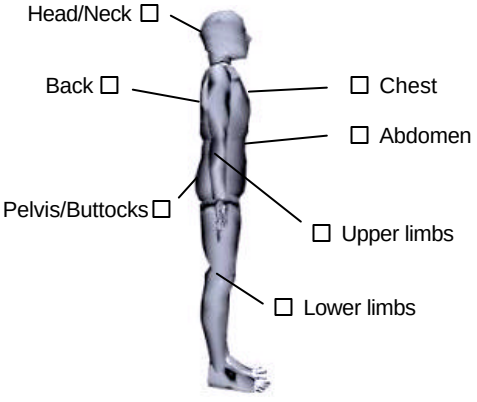
[3.1]Was the person injured or killed: ☐ Killed ☐ Injured

[3.2]If killed, manner of death:
☐ In site ☐ at health care facility
☐ During transport to health care facility
☐ other: _____

Loss of:



Other Injuries:



[4]Other Information:

[4.1]First medical facility reached: ☐ Dispensary ☐ Health centre ☐ Hospital

[4.2]Time until first facility reached: _____h

[4.3]Name of first hospital reached: _____

[4.4]Time until first hospital reached: _____h

4.13 Occupation:

- ☐ Mine action personnel ?
  - ☐ Contractor
  - ☐ Government
  - ☐ MAC
  - ☐ NGO
  - ☐ UN
- ☐ Military ?
  - ☐ Int. peacekeeper
  - ☐ National
- ☐ Aid worker
- ☐ Civilian
- ☐ Government official
- ☐ International observer
- ☐ Other
- ☐ Unknown

4.14 Occupation *prior* to accident

- ☐ Mine action personnel ?
  - ☐ Contractor
  - ☐ Government
  - ☐ MAC
  - ☐ NGO
  - ☐ UN
- ☐ Military ?
  - ☐ Int. peacekeeper
  - ☐ National
- ☐ Aid worker
- ☐ Civilian
- ☐ Government official
- ☐ International observer
- ☐ Other
- ☐ Unknown

4.5 Activity at time of incident:

☐ Tending animals/livestock ☐ Passing/standing nearby ☐ Collecting wood/food / water ☐ Hunting/fishing
☐ Demining ☐ Military ☐ Police ☐ Playing/recreation ☐ Tampering
☐ Farming ☐ Unknown ☐ Travelling in vehicle ☐ Travelling on foot
☐ Other _____

4.6 How often did the person go there?
☐ More than once a day ☐ Once a day
☐ Several times a week or less ☐ Never before

4.7 Did the person know that area was dangerous? ☐ Yes ☐ No ☐ Unknown

4.8 If they knew area was dangerous, why did they go there? ☐ no other access ☐ economic necessity ☐ peer pressure ☐ other _____

4.9 Did the person see the object before the accident? ☐ No ☐ Yes, did not touch ☐ Yes, touched it ☐ Unknown

4.10 Did the person receive mine awareness training? ☐ Yes ☐ No ☐ Unknown

4.11 Medical report reference (if available):

4.12 Was area marked? ☐ Yes ☐ No

5 Other persons involved ☐
How many others were killed ?
How many others were injured?

List of other Casualties

5.1 FirstName	5.2 Name	5.3 Status
		☐ Killed ☐ Injured
		☐ Killed ☐ Injured
		☐ Killed ☐ Injured

6 Device that caused the incident

☐ Unknown ☐ Anti-personnel mine ☐ Anti-tank mine ☐ Cluster munition
☐ other UXO ☐ Booby trap ☐ Fuse

☐ Other device:

IMSMA

Mine/UXO Accident Report

Locator code: .../.../.../...

[1]General information:

[1.1]ID:	[1.9]**Confirmed:** ☐ Yes ☐ No
[1.2]Owner MAC:	[1.10]Reliability:Information: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐6
[1.3]Reported by:	[1.11]Source: ☐ A ☐ B ☐ C ☐ D ☐ E ☐F
[1.4]Position:	
[1.5]Organisation (Address & Tel):	
[1.6]Duty officer:	
[1.7]Entry date:	[1.12]Date of report:
[1.8]Entered by:	[1.13]Date report received:

[1.14]Date and time of incident:

[1.15]Known dangerous area? ☐ Yes ☐ No

[1.16]If yes: dangerous area ID: _____

[1.17]Clearance in progress? ☐ Yes ☐ No

[1.18]Was area marked? ☐ Yes ☐ No

[1.19]Was mine/UXO marked? ☐ Yes ☐ No

[1.20]Number of persons involved: _____

[1.21]Number of casualties:

[1.22]Accident occurred as part of a tasked mine action activity: ☐ Yes ☐ No

If yes: ☐ Impact survey ☐ Technical survey ☐ Clearance ☐ Completion survey ☐ Quality control ☐ Other: _____ ID: _____

[2]Coordinates of accident

[2.1]Province:	[2.6]Latitude[1]: ° ' "☐N / ☐S	[2.14]Map name:
[2.2]District:	[2.7]Longitude: ° ' "☐E / ☐W	[2.15]Map series:
[2.3]Subdistrict:	[2.8]Altern. map coord. system:	[2.16]Map edition:
[2.4]Nearest city:	[2.9] Zone number:	[2.17]Map sheet:
[2.5]Municipality:	[2.10]Map east[2]:	[2.18]Map scale: **1 :**
	[2.11] Map north[3]:	
	[2.12]MGRS Coord.:	
	[2.13]Coord. fixed by: ☐ GPS ☐ Resection	

[2.19]Accident coordinates description:

[3]Location of accident

[3.1]Distance from nearest town: ☐ Less than 500m ☐ 500 m – 5 km ☐ More than 5 km

[3.2]Direction from nearest town: ☐ North ☐ South ☐ North – East ☐ South – East ☐ East ☐ West ☐ North – West ☐ South - West ☐ Unknown

[1] Indicate longitude and latitude in degrees, minutes and seconds.
[2] Indicate map east in 4 digits.
[3] Indicate map north in 5 digits.

[3.3]Type of area

☐ City ☐ Field ☐ Pasture land ☐ On/near coastal line ☐ Forest ☐ In/Near governmental building
☐ Near military installation ☐ In/Near residential building ☐ On/Near riverbank
☐ Roadside ☐ Road for vehicles ☐ Path ☐ Unknown ☐ Other

[4]Accident details:

[4.1]Cause of accident: ☐ Incorrect procedure ☐ Booby trap ☐ Mine/UXO malfunction
☐ Anti-lift device ☐ Equipment malfunction ☐ Unknown
☐ Other: _____

[4.2]Property damage in US$: _____$ [4.3]Equipment damage in US$: _____$

[4.4]Reference to inquiry report:

[4.5]Accident description.

[5]Device that caused the accident

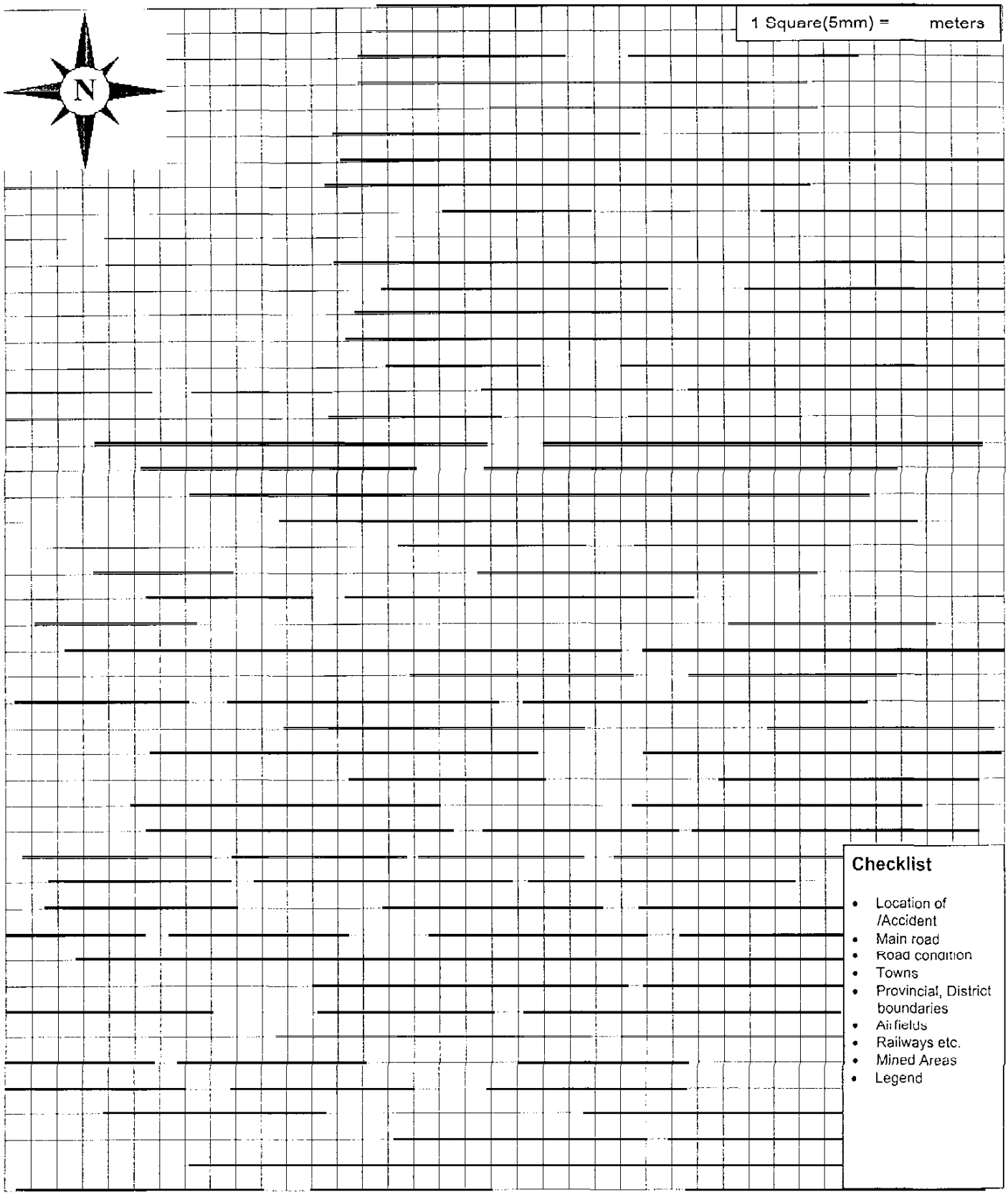
☐ [5.1]Unknown

[5.2]Device category (Landmines, bombs...)	[5.3]Device type (AP, AT etc.)	[5.4]Model	[5.5]Qty	[5.6]Anti-lift fitted	[5.7]Booby trapped
				☐ Yes ☐ No	☐ Yes ☐ No
				☐ Yes ☐ No	☐ Yes ☐ No
				☐ Yes ☐ No	☐ Yes ☐ No

[6]Attach explanatory map and/or sketch:

Mine/UXO Accident Report

Locator code: .../.../.../...



Drawn by: Date: Checked by: Date:

IMSMA

Casualty

Locator code: .../.../.../...

[1]General information:

[1.1]Accident ID:	[1.5]Entry date:
[1.2]Date and time of accident:	[1.6]Entered by:
[1.3]Reported by:	[1.7]Date of report:
[1.4]Organisation (Address & Tel):	[1.8]Date of report received:

Nearest city from accident

[1.9]Province:	[1.11]Subdistrict:
[1.10]District:	[1.12]Nearest city:
	[1.13]Municipality:

[2]Individual data

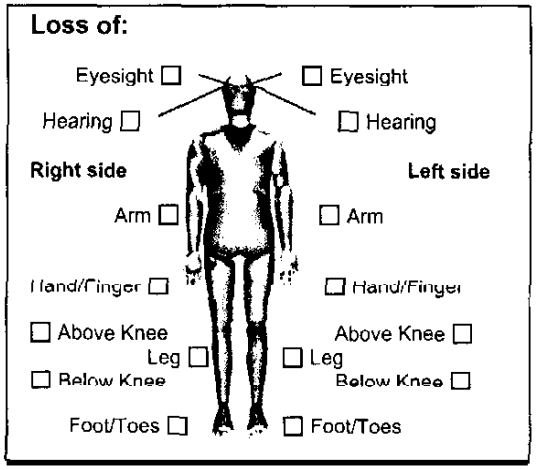
[2.1]Casualty report ID:	[2.2]Owner MAC:	
[2.3]Family name:	[2.5]Sex: ☐ Male ☐ Female	[2.7]Address:
[2.4]First name:	[2.6]Date of Birth:	
[2.8]Nationality:	[2.10]Organisation:	
[2.9]Rank:	[2.11]Status: ☐ Civilian ☐ Military	

[3]Injuries:

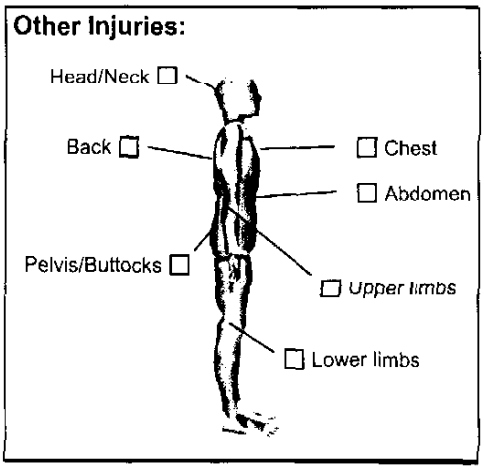
[3.1]Was the person injured or killed: ☐ Killed ☐ Injured

[3.2]If killed, manner of death:
☐ In site ☐ at health care facility
☐ During transport to health care facility
☐ other: _____

Loss of:



Other Injuries:



[4]Other Information:

[4.1]First medical facility reached: ☐ Dispensary ☐ Health Care ☐ Hospital

[4.2]*Time until first facility reached:* _____h

[4.3]Name of first hospital reached: _____

[4.4]Time until first hospital reached: _____h

[4.13]Occupation:

☐ Mine action personnel	☐ Contractor ☐ Government ☐ MAC ☐ NGO ☐ UN
☐ Military	☐ Int. peacekeeper ☐ National
☐ Aid worker	
☐ Civilian	
☐ Government official	
☐ International observer	
☐ Other	
☐ Unknown	

[4.7]Did the person wear protective equipment? ☐ Yes ☐ No ☐ Unknown

[4.8]Was the equipment effective? ☐ Yes ☐ No ☐ Unknown

[4.11]Medical report reference (if available):

[5]List of other Casualties

[5.1]FirstName	[5.2]Name	[5.3]Status
		☐ Killed ☐ Injured
		☐ Killed ☐ Injured
		☐ Killed ☐ Injured

[6]Device that caused the accident

☐ [6.1]Unknown

[6.2]Device category (Landmines, bombs...)	[6.3]Device type (AP, AT etc.)	[6.4]Model	[6.5]Qty	[6.6]Anti-lift fitted	[6.7]Booby trapped
				☐ Yes ☐ No	☐ Yes ☐ No
				☐ Yes ☐ No	☐ Yes ☐ No
				☐ Yes ☐ No	☐ Yes ☐ No

Appendix F: Other Casualty Data Collection Forms

MINE / UXO CASUALTY REPORT

GPS ☐

Serial No. ____ - ____ (Fill in one report for each Mine/UXO victim)

1 Interviewer: | Agency:

Date of Interview? dd/MM/YY | Province/Office

Place of Interview: | Informant type:

☐ Prov Hospital ☐ Private Clinic ☐ Other (specify)
☐ District Hospital ☐ Village/Town
☐ Commune Health-centre ☐ Army Camp/ Hospital

☐ Victim ☐ Government ☐ Community Member
☐ Family/ Relative ☐ Military ☐ Hospital Staff

Name:

Address:

2 WHERE did the accident take place? PHUMCODE

VILLAGE NAME:
KHUM:
SROK:
KHET:

Other Local Names for Accident site:

GPS Information
GPS GR:
Meter:
Compass Bearing:
Describe

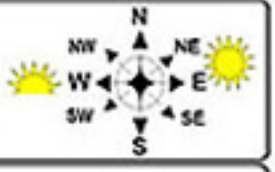
3 Area Type of Accident

☐ in Village ☐ Rice Field ☐ in Forest ☐ on Mountain/Hill ☐ Other (specify)
☐ on Path / Road ☐ Grazing Field ☐ near River ☐ near Military Position (Camp Base Checkpoint etc.)

4 Distance of Accident Site from Center of the Village?

☐ in Village ☐ Near: <500m ☐ Not Far: 500m-2kms ☐ Far: 2-5km ☐ Very Far >5km

What direction from village? (make a mark)



5 WHEN was the Date of Accident? Day/Month/Year

6 Victim Information

Full Name:
Other Name:
Current Address Home Address Phumcode

Age: | Sex: ☐ Male ☐ Female

Occupation: ☐ Civilian ☐ Military

Family Status: ☐ Single ☐ Widowed/Divorced ☐ Married | If Children, how many?

PHUM:	KHUM:	SROK:	KHET:

7 What type of DEVICE caused the accident?

☐ Mine — Anti-tank, Anti-personnel
☐ UXO — Cluster Munitions, Other UXO
☐ Fuse
☐ Improvised Explosive Device
☐ Unknown
☐ Other (specify)

Did the victim know there was a MINE/UXO at the site of the accident? ☐ Yes ☐ No ☐ Unknown

If they knew there was a mine/UXO, WHY did they go to the area? ☐ Economic necessity ☐ No other access ☐ Other (specify)

How often did the victim go to the area? ☐ First time ☐ a Few times ☐ Often ☐ Unknown

Has there ever been any Mine/UXO clearance at the accident site? ☐ Yes ☐ No ☐ Unknown
○ CMAC ○ NGO ○ Army ○ Villagers ← Who cleared the area?

Was the accident site marked as dangerous at the time of the incident? ☐ Yes ☐ No ☐ Unknown
○ Unofficial ○ Official ← What kind of marking?

Did victim attend Mine Awareness prior to the accident? ☐ Yes → Month/Year? ____ ☐ No ☐ Unknown

Was the victim attending school? ☐ Yes ☐ No ☐ Unknown

8 Injury Details

a. From the mine/UXO explosion, was the victim a. ☐ Killed b. ☐ Injured

c. If the victim died, how long after the accident did they die? ☐ Immediately

hours	days	weeks	months

d. WHERE did the casualty die?
- a. ☐ At site of accident
- b. ☐ On the way to health facility/hospital
- c. ☐ In health facility/ hospital
- d. ☐ After leaving health facility/hospital
- e. ☐ Unknown
- f. ☐ Other (specify)

Complete this section for all victims who were killed or injured

e. Amputation?

	Arm	Fore Arm	Hand	Finger	Above Knee	Below Knee	Foot	Toe
Right	☐	☐	☐	☐	☐	☐	☐	☐
Left	☐	☐	☐	☐	☐	☐	☐	☐

f. Wounds? ☐ Face ☐ Upper Limb ☐ Upper Body ☐ Lower Limb ☐ Lower Body ☐ Entire Body

g. Burns? ☐ Face ☐ Upper Limb ☐ Upper Body ☐ Lower Limb ☐ Lower Body ☐ Entire Body

h. Blind? ☐ 1 eye ☐ 2 eyes

i. Deaf? ☐ Very Slight ☐ Slight ☐ Serious ☐ Very Serious

j. Paralysis? ☐ Face ☐ Upper Limb ☐ Upper Body ☐ Lower Limb ☐ Lower Body ☐ Entire Body

9

a. What MEDICAL care did the victim receive FIRST?

☐ None ☐ District Hospital ☐ Army camp/ hospital ☐ Red Cross Volunteer ☐ Unknown
☐ Treated Self ☐ Provincial Hospital ☐ Commune health centre ☐ Private Clinic ☐ Other (specify) _____

b. How long before the victim received this first medical care?
☐ <30min ☐ <60min ☐ Unknown ☐ Not Applicable
☐ < 2 hrs ☐ > 2 hrs

c. How long before the victim reached hospital?
☐ <30min ☐ <60min ☐ < 2 hrs ☐ > 2 hrs ☐ Not applicable ☐ Unknown

d. Hospital name: _____

10

a. -Does the victim have a prosthesis? ☐ YES ☐ NO
b. -Does the victim have a wheelchair? ☐ YES ☐ NO
c. -Does the victim have crutches? ☐ YES ☐ NO
d. -Has the victim received any rehabilitation/physical therapy? ☐ YES ☐ NO
e. -Has the victim been visited by a community development worker? ☐ YES ☐ NO

f. -What did the worker do?
- ○ Refer victim to a disability rehabilitation centre
- ○ Refer victim to a vocational training centre
- ○ Provide monetary or other support (rice, etc)
- ○ Other (specify) _____

11

a. What was the victim doing when the accident occurred ?

- a. ☐ Cutting/Collecting Wood
- b. ☐ Collecting Food
- c. ☐ Fishing
- d. ☐ Herding
- e. ☐ Farming
- f. ☐ Travelling
  - ○ By vehicle
  - ○ On foot/bicycle
  - ○ By animal/Ox cart
  - ○ Other
- g. ☐ Military Activity
- h. ☐ Tampering with Mine/UXO
  - To sell it ○
  - To fish with it ○
  - To play with it ○
  - To demine ○
  - Other ○
  - ○ To move it
  - ○ To dismantle it
  - ○ To destroy it
  - ○ To use it again as a mine/UXO
- i. ☐ Playing (Not with mine/UXO)
- j. ☐ Nothing-exploded beside victim
- k. ☐ Clearing new land for farming/settlement
- l. ☐ Other (specify) _____

b. Who activated the mine/UXO? ☐ The Casualty ☐ Someone else ☐ Other (specify) _____

12

a. Were others injured/killed? ☐ YES → How many? Killed? _____ Injured? _____ ☐ NO

b. What are the names of the other casualties?

1.	3.	5.	7.
2.	4.	6.	8.

13

Were any ANIMALS injured/ killed? ☐ YES → How many?

Cow:	Horse:	Pig:	Buffalo:	Other:

Return this form to: CAMBODIAN RED CROSS, 17 RED CROSS STREET, PHNOM PENH

OFFICE USE ONLY	Receipt date:	Form checked by:	Computer entry by:	Entry checked by:

PART A *Afghanistan Mine Victim Information System (AMVIS)*
Mine/UXO Incident Report

Please return this form to **ICRC Kabul** through: .....

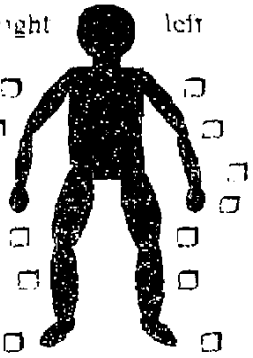
Name and function of person completing the form: ...../.....

Agency: ..... **Date** (Day/Month/Year): ...../...../.....

1. **Person giving information:** ☐ Victim ☐ Relative ☐ Other:.....
2. **Name of victim:** ..... **Father name:** .....
3. **Address:** Village: ..... District: ..... Province: .....
   Code: ..... Code: ..... Code: .....
4. **Age:** ..... 5. Sex. ☐ Male ☐ Female
6. **Group:** ☐ Civilian ☐ Combatant ☐ IDP ☐ Kuchi ☐ Returnees (less than one year)
7. **Date of incident** (Day/Month/Year): ...../...../.....
8. **Location of incident:** Village: ..... District: ..... Province: .....
   Code: ..... Code: ..... Code: .....
9. **Activity: What was the victim doing just before the incident?**
   ☐ Tending animals ☐ Collecting fruit / plants ☐ Collecting wood ☐ Collecting water
   ☐ Farming ☐ Collecting metal ☐ Hunting ☐ Fishing
   ☐ Cleaning house ☐ Washing clothes ☐ Cooking/Heating
   ☐ Repairing roads ☐ House reconstruction ☐ Working on Well / Karez / Canal
   ☐ Travelling by foot ☐ Travelling by riding ☐ Travelling by vehicle
   ☐ Transporting goods ☐ Helping mine victim ☐ Playing (not with mines/UXO)
   ☐ Aid work ☐ Going to toilet ☐ Washing for praying / bathing
   ☐ Helping fighters ☐ Military activity / fighting ☐ Local demining (not with UN / NGO)
   ☐ Unknown ☐ Other: .....
10. **Type of injuries:** **If killed, where?** ☐ On the spot ☐ Transport to clinic/hosp. ☐ Clinic/hosp.

Amputations:

	right	left
Arm above elbow	☐	☐
Arm below elbow	☐	☐
Hand	☐	☐
Fingers	☐	☐
Leg above knee	☐	☐
Leg below knee	☐	☐
Foot	☐	☐



Other wounds:

☐ Face ☐ Head ☐ Chest ☐ Neck ☐ Arm ☐ Back ☐ Hand ☐ Abdomen ☐ Buttocks ☐ Pelvis ☐ Genitals ☐ Leg ☐ Foot

Blindness: ☐ one eye ☐ both eyes **Deafness:** ☐ one ear ☐ both ears

11. **Other persons involved:** ☐ No ☐ Yes --> Number of injured: ....., Number of deaths: .....
12. **Mine awareness training?** ☐ Yes (Agency: .....) ☐ No ☐ Unknown
13. **Was there any demining in the area?** ☐ Yes ☐ No ☐ Unknown
    If yes, who did it? ☐ UN (which Agency?): ..... ☐ Military ☐ Local people ☐ Unknown
    Were **mines/UXO** ever **reported** to a demining agency? ☐ Yes ☐ No ☐ Unknown
14. **Was the area marked?** ☐ Red ☐ Blue ☐ White ☐ Local signs ☐ Not marked ☐ Unknown
15. **Type of device?** ☐ Mine ☐ Unexploded Ordnance (UXO) ☐ Other:..... ☐ Unknown
16. **What made it explode?** ☐ Stepped on it ☐ Hit it ☐ Picked it up ☐ Threw a stone/shot at it
    ☐ Put into a fire ☐ Tried to open it ☐ Somebody else touched it ☐ Unknown
    ☐ Other: .....

PART B - Additionnal Information

17. **Use of land:** ☐ Agriculture ☐ Grazing ☐ Canal/Karez/Well ☐ Graveyard
☐ Road ☐ Roadside ☐ Path ☐ River / Riverbank
☐ Used building ☐ Ruined building ☐ Mountain ☐ Military base ☐ Unknown

18. **How often did the victim go there (to the place of incident)?**
☐ First time ☐ Several times per year ☐ Several times per week ☐ Once a day or more

19. **Did the victim know it was a dangerous area?** ☐ Yes ☐ No ☐ Unknown
If yes, why did he/she go there? .....
Were there any mine/UXO accidents before? ☐ Yes ☐ No ☐ Unknown
If yes, when was the last accident? ☐ Less than 1 year ago ☐ 1-5 years ☐ More than 5 years

20. **Did the victim live in the area more than 1 year?** ☐ Yes ☐ No ☐ Unknown
If no, did the victim: ☐ return to this area less than one year ago (returnee)
☐ come to this area less than 1 year ago as a person displaced by war (IDP)
☐ come to this area as a visitor / pass or travel through the area

21. **If the victim did see the mine/UXO: Why did the victim touch/handle the mine/UXO?**
☐ To use explosive ☐ To get metal out ☐ To make it safe to move/to sell ☐ Curiosity
☐ To make it explode ☐ Unknown ☐ other: .....

22. **Penetrating wounds:** ☐ Head ☐ Chest ☐ Abdomen ☐ No ☐ Unknown

23. **How long did it take for the victim to get first aid?** ☐ went directly to hospital -> Question 24
☐ less than 1 hour ☐ 1 - 2 hours ☐ 2 - 6 hours ☐ 6 - 12 hours ☐ more than 12 hours
Name of **first aid post/clinic:** ..... Village: ..... District: .....
What medical treatment was given? (several answers possible) ☐ Dressing ☐ IV fluid
☐ Blood ☐ Antibiotics ☐ Debridement ☐ Amputation ☐ Painkillers ☐ Unknown
What happened to the victim? ☐ Sent home ☐ Died ☐ Referred to hospital: .....

24. **How long did it take for the victim to reach a hospital (directly or from first aid post/clinic)?**
☐ less than 1 hour ☐ 1 - 2 hours ☐ 2 - 6 hours ☐ 6 - 12 hours ☐ more than 12 hours
Name of **hospital:** ..... Town: ..... District: .....
What medical treatment was given? (several answers possible) ☐ Dressing ☐ IV fluid
☐ Blood ☐ Antibiotics ☐ Debridement ☐ Amputation ☐ Painkillers ☐ Unknown

25. **Other persons involved:**
Name: ..... Father name: .....Age: ..... ☐ Injured ☐ Killed
Name: ..... Father name: .....Age: ..... ☐ Injured ☐ Killed
Name: ..... Father name: .....Age: ..... ☐ Injured ☐ Killed
Name: ..... Father name: .....Age: ..... ☐ Injured ☐ Killed
Name: ..... Father name: .....Age: ..... ☐ Injured ☐ Killed
Name: ..... Father name: .....Age: ..... ☐ Injured ☐ Killed

26. **Additional information; Description of incident; Why did it happen:**
.....
.....
.....
.....
.....
.....

Thank you very much for completing this form and helping to reduce the suffering of Afghan people!

UNOPS United Nations Office for Project Services Mine Action Programme, Northern Iraq Head Office : Erbil	MAP	Team Code

INCIDENT FORM

DISTRICT NAME	SUB DISTRICT NAME	VILLAGE NAME
VICTIM NUMBER	**DATA COLLECTOR**	**SIGNATURE**

1 *Personnel Information*

1.1 Victims Name:_____

1.2 What is/was the victims gender? ☐ Male ☐ Female

1.3 Date of birth? _____ DD/MM/YY

1.4 Are you the victim? ☐ Yes ☐ No

(If no) What relationship are you with the victim?_____

1.5 Did the victim die?

☐ Yes ⟹ ☐ *Immediately*

☐ After some time? How long after? Duration:

Year	Month	Days	Hours

☐ No ⟹ Where is the victim now? (Location Name): _____

1.6 How was the incident caused ? ☐ Mine ☐ UXO

☐ Others,Explain:_____

1.7 When did the incident happen? _____ DD/MM/YY

1.8 Was the victim living in this village when the accident occurred? ☐ Yes ☐ No

If No : Where was the victim from?

District	Sub District	Village

1.9 Was the victim married at the time of the accident? ☐ Yes ☐ No

(If No & Not dead) Is the victim married now? ☐ Yes ☐ No

1.10 Did the victim have any children at time of the accident? ☐ Yes ☐ No

If Yes, How many? _____

1.11 What was the main occupation of the victim before the accident? _____

(If not dead) What is the main occupation of the victim now? _____

(If he has no job)Does he have any skills or experience?_____

How is the victim supported now?_____

2 *Amputation And Prosthesis Information*

(To be asked if the victim did not die from the injury sustained in the incident)

2.1 Did the victim have to undergo amputation as a result of the Incident? ☐ Yes ☐ No

If Yes, Which part of his body?

Limb	Arm	Forearm	Hand	Finger	Hip	Above Knee	Below Knee	Foot	Toe
Right									
Left									

2.2 Does the victim have prosthesis? ☐ Yes ☐ No

If Yes,how many?_____ and from where?(centers):-_____,_____,_____

2.3 Does the prosthesis function adequately? _____

2.4 Does the victim have a crutch? ☐ Yes ☐ No

2.5 Does the victim have another walking aid? ☐ Yes ☐ No

If Yes what type _____

2.6 Does the victim have an orthouses? ☐ Yes ☐ No If Yes, What type _____

2.7 Does the victim have a wheel chair? ☐ Yes ☐ NO If Yes Where from _____

2.8 If the answer to (2.2) and (2.7) is No Is the victim on the waiting list? ☐ Yes ☐ No

If Yes Which center _____

2.9 What other type of injuries were sustained as a result of accident? **(This is to be answered by all victims whether or not they have undergone amputation).**

Paralysis ☐ Yes ☐ No Of what? ☐ 1 Arm ☐ 2Arms ☐ 1 Leg ☐ 2Legs ☐ Para ☐ Quad. ☐ Other: _____

Burn ☐ Yes ☐ No Where? ☐ Face ☐ Upper Limb ☐ Chest ☐ Lower Limb ☐ All the body

Wounds ☐ Yes ☐ No Where? ☐ Face ☐ Upper Limb ☐ Chest ☐ Lower Limb ☐ All the body

Blind ☐ Yes ☐ No Where? ☐ 1 Eye ☐ 2 Eyes ☐ Partial

Deaf ☐ Yes ☐ No How? ☐ V. Slight ☐ Slight ☐ Serious ☐ Very serious

2.10 What did the victim do after the accident for treatment?

☐ Nothing ☐ Went to village health volunteer ☐ Went to the district Hospital

☐ Treated him/her self ☐ Went to village health center ☐ Went to the provincial Hospital

☐ Went to traditional Doctor ☐ Went to other villagers

☐ Others,explain _____

2.11 Any surgery done for the victim? ☐ Yes ☐ No If yes,Where? _____

3 *Area Information*

3.1 Did the incident happen in the area of this village? ☐ Yes ☐ No If No,

3.2 In what other village/town was it? Village/town name: _____

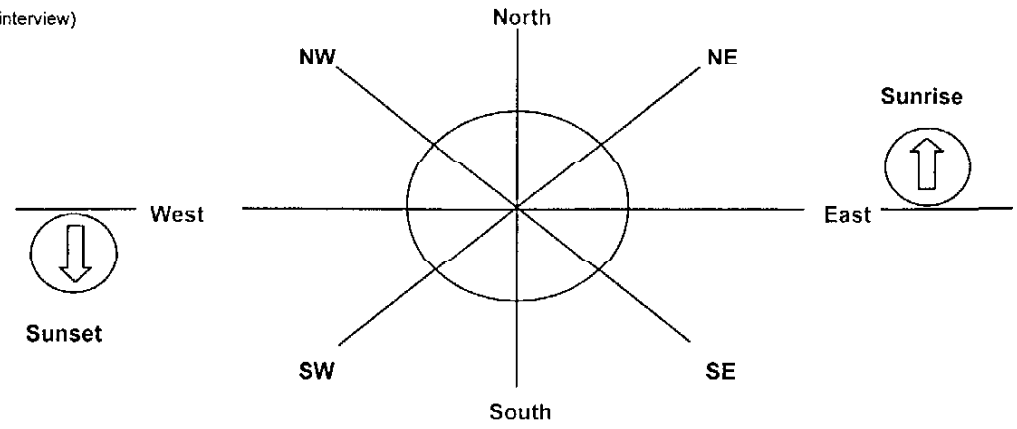
3.3 Is the village in the same district? ☐ Yes ☐ No If No,

3.4 Which district and sub district is this village in? _____

3.5 In what type of area did the accident occur?

In the village	Path or Road	Irrigated field	low Ground	High Ground	Grazing Forest	Sparse Forest	Dense Forest	Do not know	Other
☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

3.6 From here, Grid ID ☐ Where did the accident happened? Distance in (km) ☐



3.7 Does the area have a name? _____

(Ask the direction and the estimated distance in (km), Ask where the sunsets and the sunrises Locate the direction on the graph and put mark it with a spot. (Write the distance to the mark)

3.8 Has this area ever been cleared before? ☐ Yes ☐ No ☐ DNK If Yes,
Who cleared it? ☐ Individuals from your village ☐ Private company
☐ Individuals from other villages ☐ NGO ☐ Do not know

Others, specify:_____

3.9 What was the victim doing when the incident happened?

☐ **Digging the ground for**	☐ **Making a fire for**	☐ **Collecting**
☐ Plowing	☐ Cleaning a field	☐ Wood/Thatch/Straw
☐ Sowing	☐ Cooking	☐ Herbal Medicines
☐ Weeding	☐ Destroying garbage	☐ Fruits/Nuts/Food
☐ Making a fence	☐ Destroying Mine/UXO	☐ **Touching Mine/UXO for**
☐ Making a canal or a ditch	☐ **Cutting**	☐ Removing it from a field
☐ Making a well	☐ Trees	☐ Defusing it
☐ Making a path or a road	☐ Bamboo	☐ Opening it
☐ Making a house	☐ Grass/bush	☐ Playing
☐ Catching animals	☐ **Keeping/grazing animals**	☐ Fishing
☐ Collecting tubers/roots	☐ **Staking or tying animal**	☐ Hunting
☐ **Just walking/running along**	☐ **Nothing, It just exploded**	
☐ **Others, specify:**		

3.10 Did the person know that there was Mine/UXO in the area? ☐ Yes ☐ No ☐ DNK

3.11 If no, Did other people know that there are Mines/UXO in the area? ☐ Yes ☐ No ☐ DNK

3.12 Did the person know the danger of Mine/UXO? ☐ Yes ☐ No ☐ DNK

3.13 Had the victim had any mine awareness training? If Yes, When/By who? _____

3.14 Was there any one-else injured or killed during the same incident? ☐ Yes ☐ No

If Yes : How many people?

☐ **Men killed**		☐ **Men injured**	
☐ **Women killed**		☐ **Women injured**	
☐ **Boy killed**		☐ **Boy injured**	
☐ **Girl killed**		☐ **Girl injured**	
Total		**Total**	

If any, What is/are the name (s) of the victim(s)

ser.	Name	Gender	Village
1			
2			
3			
4			
5			
6			

After this interview, ask to visit all these families and fill out individual incident forms

To be completed by the data collector at the end of the interview

1. How many persons in all attended the meeting? ☐
2. How many persons were speaking during the interview? ☐
3. Did these people speak **Kurdish** or **Arabic** during the interview? (Circle One)
4. Date: / /
5. Duration of interview(min)? ☐

Annex A
Chapter XIII

INICIJALNI IZVJEŠTAJ O INCIDENTU/NESRECI OD MINA
ИНИЦИЈАЛНИ ИЗВЕШТАЈ О ИНЦИДЕНТУ/НЕСРЕЋИ ОД МИНА
INITIAL REPORT OF A MINE INCIDENT/ACCIDENT

Izvještaj poslati u roku od 6 sati u BH MAC na faks 071 (0) 667 311
Извештај послати у року од 6 часова у БХ МАЦ на факс 071 (0) 667 311
Send this report – within 6 hours – to BH Mine Action Centre, Sarajevo, Fax. 071 (0) 667 311

Izvještaj popunio
Извештај попунио
Report made by _____

Datum inc.idenata/nesreće.
Датум инцидента./несреће .
Date of incident/accident _____

Vrijeme inc./nes.
Време инц./нес.
Time of inc./acc. _____

Tel/faks broj
Тел/факс број
Phone/Fax number _____

Policijska stanica Полицијска станица Police Station	Istražitelj Истражител Investigating Officer	Šifra incidenta Шифра инцидента Case No

Lokacija/Selo
Локација/Село
Location/Village _____

Najbliži grad
Најближи град
Nearest town _____

Koordinate
Координате
Grid Reference

Ι-И-Е Y=	S-C-N X=

❑ UTM - УТМ ❑ Gauss Kruger (JNA – ЈНА)

Da li ljudi i dalje ulaze u ovo podrucje? ❑ *Da* –Да –*Yes*
Да ли људи и даље улазе у ово подручје? ❑ *Ne* – Не – *No*
Do people continue to go into this area?

Ako da, zašto? – Ако да, зашто? – If yes, why?
❑ *Zbog zemljoradnje* – Због земљорадње– *For farming*
❑ *Zbog putovanja* – Због путовања –*For travelling*
❑*Zbog sakupljanja drva* – Због сакупљања дрва – *To gather wood*
❑*Zbog lova/ribolova* – Због лова/риболова – *For hunting/fishing*
❑ *Zbog igre* – Због игре –*For playing*
❑*Ostalo* – Остало – *Other*

Da li je zona oznacena? – Да, ли је зона означена? – Is the area marked
❑ *Da, priručnim sredstvima* – Да, приручним средствима – *Yes, local signs*
❑ *Da, službenim znacima* – Да, службеним знацима–*Yes, official signs*

Da li je do sada bilo incidenata/nesreca u ovoj zoni?
Да ли је до сада било инцидената/несрећа у овој зони?
Have incidents/accidents occurred in this area before?
❑ *Da* – Да –*Yes* ❑ *Ne* – Не –*No*

VRSTA EKSPLOZIVNIH SREDSTAVA – ВРСТА ЕКСПЛОЗИВНИХ СРЕДСТАВА– TYPE OF EXPLOSIVE

❑ Protivpješad. mina – Противпешад. мина –Anti-Personnel Mine
❑ Protivtenkovska mina – Противтенковска мина –Anti-Tank Mine
❑NUS – НЕС – UXO
❑Nepoznato – Непознато – Unknown

Ako je poznato, koji tip i količina ? Ако је познато, који тип и количина?
If known, what model, number

_____
_____

OZLJEDE – ОЗЛЕДЕ– INJURIES

❑*Bez povreda* Без повреда *None*	*Broj* – Број– *Number of* *Odraslih* Одраслих *Adults*	 *Djece* Деце *Children*	*Ime(na) ozlijedenog(ih)* Име(на) озлеђеног(их) *Name(s) of victim(s)*	*Dob* Год. *Age*	*Detalji/Opaske* Детаљи/Примедбе *Details/Remarks*
Manje ozljede Мање озледе *Minor injuries*					
Ozbiljne ozljede Озбиљне озледе *Seriously injured*					
Ubijeno osoba Убијено особа *Killed person(s)*					

LOKACIJA INCIDENTA/NESRECE – ЛОКАЦИЈА ИНЦИДЕНТА/НЕСРЕЋЕ –LOCATION OF INCIDENT/ACCIDENT

❑ *Urbano podrucje* – Урбано подручје –*Urban area*
❑ *U prirodi* – У природи –*Country side*
❑ *Fabrika* – Фабрика– *Factor y*
❑ *Škola* – ? кола –*School*
❑ *Bolnica* – Болница– *Hospital*
❑ *Kasarna* –Касарна –*Barracks*
❑ *Kuca* – Кућа– *House*
❑ *Ulica* – Улица– *Street*
❑ *Put* – Пут–*Road*
❑ *Željeznica* – Железница– *Railways*
❑ *Most* - Мост – *Bridge*
❑ *Staza* – Стаза– *Path*
❑ *Rijeka* – Peka –*River*

❑ *Šuma* – Шума– *Forest* ❑ *Poljopriv. Zemljište* – Пољоприв. земљиште– *Agricultural land* ❑ *Mocvara* – Мочвара– *Swamp*
❑ *Ravnica* – Равница –*Flat land* ❑ *Kamenito zemljište* – Каменито земљиште –*Stony land* ❑ *Brdo* – Брдо –*Hill*
❑ *Grad. otpad* – Грађ. отпад– *Rubbl* ❑ *Visoka trava* – Висока трава –*High grass* ❑ *Ostalo* – Остало– *Other*

Kratak opis radnji koje su uzrokovale incident / nesrecu

Кратак опис радњи које су узроковале /инцидентнесрећу

Brief description of activities that caused the incident/accident. accident/incident

↓ ↓ ↓ Skica lokacije – Скица локације –Site Sketch ↓↓↓

1 cm/цм=

Sjever – Север– North

ICRC (Bosnia)

MEDJUNARODNI KOMITET CRVENOG KRIZA

IZVJESCE O ZRTVAMA NAGAZNIH MINA, IMPROVIZIRANIH EKSPLOZIVNIH SREDSTAVA I NEEKSPLODIRANIH UBOJNIH SREDSTAVA

LANDMINE, IMPROVISED EXPLOSIVE DEVICE (IED) & UNEXPLODED ORDNANCE (UXO) VICTIM DATA FORM

MJESEC (MONTH)_____

Bolnica (Hospital):.....

Ime pacijenta (Name of the patient): .....

Mjesto stanovanja i opcina (Home Village & Municipality): .....

Spol (Sex): zenski (female).....muski (male) ..... Dob (Age) .....

U trenutku povrede je li bio/la — civil (civilian) .....
At time of Injury was she/he — vojnik (soldier) .....

Vrsta povrede: (Type of Injury):

Traumatska amputacija (Traumatic Amputation)
- stopalo (foot) .....
- potkoljena (below knee) .....
- natkoljena (above knee) .....
- ruke (upper limbs) .....

Dodatne rane (Fragmentation Wounds)
- oko (eye) .....
- trup i ruke (upper body + arms).....
- ispod trupa i noge(lower body+legs).....

Vrijeme i mjesto prilikom povredjivanja (Time and Location of Injury):
Datum:dne/mj/god (Date: DD/MM/YY) ...../...../.....
Selo (Village).....Opcina (Municipality).....

Sto je radio/la u trenutku povredjivanja: .....
(Activity at the time of injury)

Kako cesto on/ona tamo ide (How often does he/she go there):
Prvi put (First Time) ..... Vise puta (Few times).....
Svakodnevno (Daily) .....

Je li znao/la da je podrucje minirano/nesigurno prije ulaska u njega: Da (Yes).....
(Did the person know that the area was mined/unsafe before entering it) Ne (No).....

Ostale zrtve eksplozije
(Other Persons Victim of the Explosion)
Br. povr. (No of others injured):.....
Br. pogin. (No of others killed):.....

Prenesen gdje? (Transferred to where?):.....

Je li se radilo o(Was the device a): mini (mine).....,improviziranom eksplozivnom sredstvu (IED).....neeksplodiranom ubojnom sredstvu (UXO).....ili nepoznatom sredstvu (or unknown).....

CROMAC Form (Croatia)

(2 pages)

Mine incident/accident report

Date of incident/accident:				Time of incident/accident:		
County:				Municipality:		
Nearest settlement:						
GK coordinates:	Zone:		E:		N:	
Description of location:						
Location category:	field; forest; house yard; road/path; river/lake; shore; other					
Device name:				Device type:	APM; ATM; Booby trap; UXO; other	
Types of vehicles:	tractor, truck; car; horse-drawn wagon; other					
Circumstances:						

Information sources:

☐ media	☐ Ministry of Interior	☐ medical establishments
☐ Mine Victims Association	☐ Disaster Management Centre	☐ local community
☐ others _____		

Notes:

Points of contact:

Family name, first name, position, company	Address, town	Telephone	Information source	Mine victim
				Yes; No

		Report made by:	
Date:		Signature	

(CROMAC Form)

Information about a mine victim

Family name:		First name:	
Personal ID number:		Nationality:	

Year of birth:		How old was he/she when the accident happened:		Sex:	M, F,

Residence			
Address	Place	Municipality	County

Telephone:	

Group:

☐	civilian	☐	Police officer	☐	Special Police member
☐	deminer	☐	soldier	☐	UN employee
☐	SFOR member	☐	Foreign organisation member		_____

Activity during which the accident happened:	demining; agricultural works; firewood gathering; works in house yards; hunting/fishing; mounting/climbing; play; country roads usage; fire preventing lanes usage; fire fighting; others

Degree of injury.	death; heavily injured; lightly injured; unharmed	Osteosynthesis:	Yes; No

Type of injury

☐	arm amputation	☐	leg amputation	☐	blindness
☐	head injury	☐	abdomen injury	☐	spinal injury
☐	other types	_____			

Description of injury	
Diagnosis	

Establishment that provided initial treatment		Further treatment:	Yes; No
Sent to hospital:		Established invalidity:	

Rehabilitation:

☐ recreational _____

☐ psycho-social _____

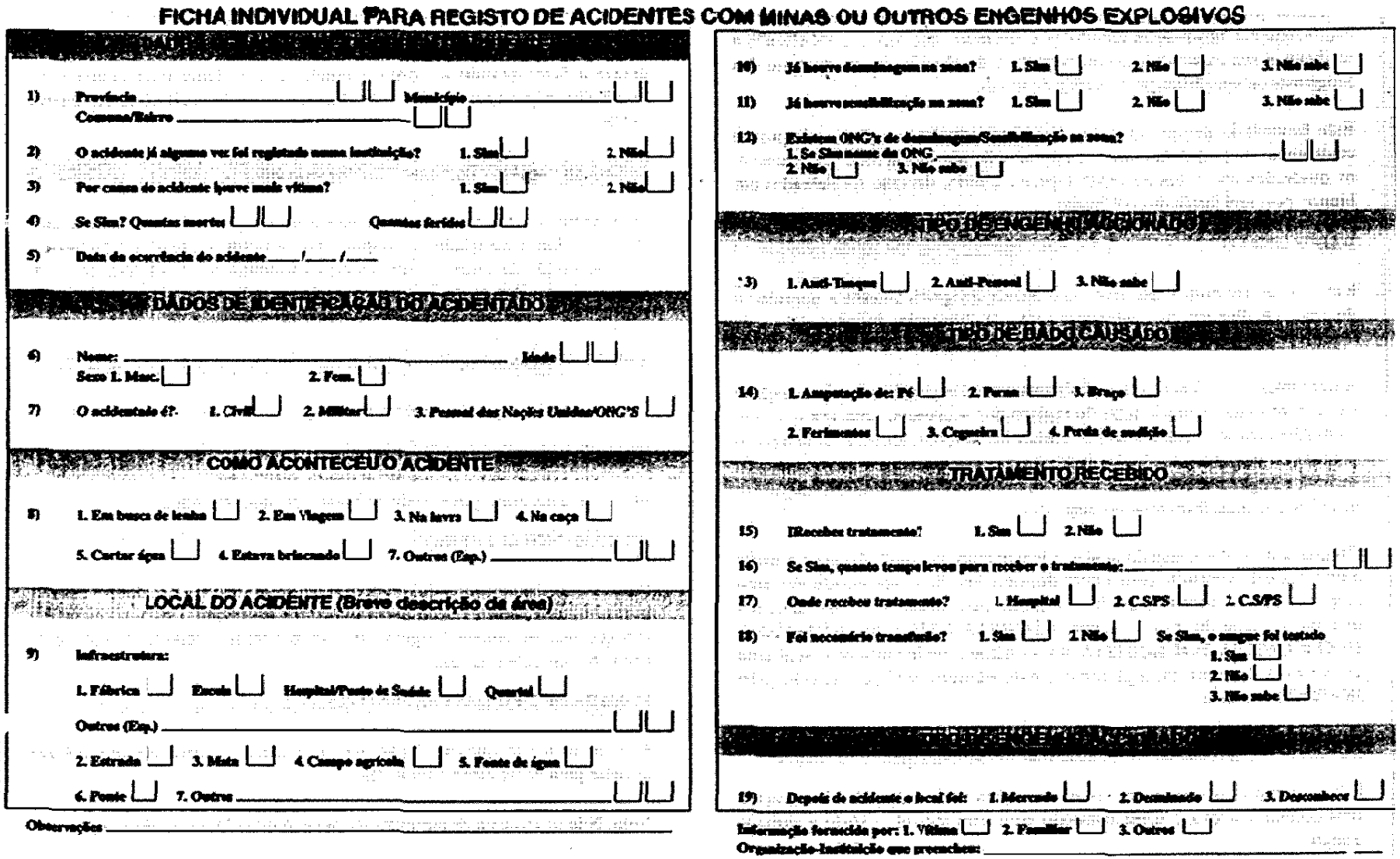
☐ economic reintegration _____

Points of contact:

Family name, first name, position, company	Address, town	Telephone	Source of information	Mine victim
				Yes; No

"Mine Accident Report" used by Angola's INAROEE (National Institute for Removal Of Explosive Ordnance)

(Instructions for use on next page)



FICHA INDIVIDUAL PARA REGISTO DE ACIDENTES COM MINAS OU OUTROS ENGENHOS EXPLOSIVOS

1) Província ____ Município ____
Comuna/Bairro ____

2) O acidente já alguma vez foi registado numa instituição? 1. Sim ☐ 2. Não ☐

3) Por causa do acidente houve mais vítima? 1. Sim ☐ 2. Não ☐

4) Se Sim? Quantas mortes ☐☐ Quantas feridas ☐☐

5) Data da ocorrência do acidente ___/___/___

DADOS DE IDENTIFICAÇÃO DO ACIDENTADO

6) Nome: ____ Idade ☐☐
Sexo 1. Masc. ☐ 2. Fem. ☐

7) O acidentado é?- 1. Civil ☐ 2. Militar ☐ 3. Pessoal das Nações Unidas/ONG'S ☐

COMO ACONTECEU O ACIDENTE

8) 1. Em busca de lenha ☐ 2. Em Viagem ☐ 3. Na lavra ☐ 4. Na caça ☐
5. Cortar água ☐ 6. Estava brincando ☐ 7. Outros (Esp.) ____ ☐☐

LOCAL DO ACIDENTE (Breve descrição da área)

9) Infraestrutura:
1. Fábrica ☐ Escola ☐ Hospital/Posto de Saúde ☐ Quartel ☐
Outros (Esp.) ____ ☐☐
2. Estrada ☐ 3. Mata ☐ 4. Campo agrícola ☐ 5. Fonte de água ☐
6. Ponte ☐ 7. Outro ____ ☐☐

Observações ____

10) Já houve desminagem na zona? 1. Sim ☐ 2. Não ☐ 3. Não sabe ☐

11) Já houve sensibilização na zona? 1. Sim ☐ 2. Não ☐ 3. Não sabe ☐

12) Existem ONG'x de desminagem/Sensibilização na zona? ☐☐
1. Se Sim nome da ONG ____
2. Não ☐ 3. Não sabe ☐

TIPO DE ENGENHO ACCIONADO

13) 1. Anti-Tanque ☐ 2. Anti-Pessoal ☐ 3. Não sabe ☐

TIPO DE DANO CAUSADO

14) 1. Amputação de: Pé ☐ 2. Perna ☐ 3. Braço ☐
2. Ferimentos ☐ 3. Cegueira ☐ 4. Perda de audição ☐

TRATAMENTO RECEBIDO

15) 1Recebeu tratamento? 1. Sim ☐ 2. Não ☐

16) Se Sim, quanto tempo levou para receber o tratamento: ____ ☐☐

17) Onde recebeu tratamento? 1. Hospital ☐ 2. C.S/PS ☐ 2. C.S/PS ☐

18) Foi necessário transfusão? 1. Sim ☐ 2. Não ☐ Se Sim, o sangue foi testado
1. Sim ☐
2. Não ☐
3. Não sabe ☐

INFORMAÇÕES GERAIS

19) Depois do acidente o local foi: 1. Marcado ☐ 2. Dominado ☐ 3. Desconhece ☐

Informação fornecida por: 1. Vítima ☐ 2. Familiar ☐ 3. Outros ☐
Organização-Instituição que preencheu: ____

INSTRUÇÕES PARA O PREENCHIMENTO DO FORMULÁRIO

Objectivos do formulário: Contribuir para um melhor conhecimento dos acidentes provocados pelo accionamento de minas ou outros engenhos explosivos. As informações recolhidas e recebidas irão ajudar o INAROEE a melhorar a sua capacidade de intervenção e de planificação no domínio dos programas de sensibilização do perigo de minas.

Este formulário deverá ser preenchido individualmente para cada pessoa acidentada. As perguntas com espaço deverão ser preenchidas por extenso, os quadrados colocados no canto superior direito, deverão ser deixados em branco, pois será tarefa do codificador.

DADOS GERAIS

Referem-se aos dados que irão caracterizar geograficamente a ocorrência do acidente. Por extenso indique o nome da Província, do município e da Comuna ou bairro.

A pergunta 2 — (O acidentado já alguma vez foi registado numa instituição?) serve para evitar a duplicação do registo dos acidentes, uma vez que este formulário irá ser preenchido por várias instituições. Deverá ter sempre o cuidado de perguntar se alguém já fez as mesmas perguntas. Talvez antes da pessoa chegar ao centro de saúde, uma ONG's de sensibilização ou desminagem tenha feito algumas perguntas.

Pergunta 3 — Por causa do acidente houve mais vítimas? Há que ter muita atenção a esta pergunta para evitar duplicações. Se o acidentado der uma resposta, não há necessidade de se registar para todos os outros membros que fazem parte do mesmo grupo, **ESCREVA UMA OBSERVAÇÃO A DIZER QUE JÁ FOI REGISTADO.** O número de identificação será uma chave para detectar as duplicações, este número será preenchido pelo INAROEE - Luanda.

DADOS DE

É bom sempre informar que as informações recolhidas são de caracter confidencial. Escreva o nome completo com letra legível, a idade e assinale o sexo.

Descreva as circunstâncias em que ocorreu o acidente ou seja o que a pessoa estava a fazer quando accionou a mina. Se o acidente tiver ocorrido em condições não expressas no formulário, deverá especificá-lo no espaço outros

O acidente poderá ter ocorrido numa escola ou posto de saúde, neste caso deverá assinalar no quadro correspondente. As outras questões referem-se a uma descrição da zona em termos de campanhas de sensibilização ou de *desminagem. Por outro lado, é importante saber se existem ONG's de* desminagem ou sensibilização a trabalharem na referida zora.

TIPO DE ENGENHO ACCIONADO

Caso o engenho explosivo tendo sido uma granada ou obus assinale UXO.

Marque o dano mais grave. Pode assinalar mais que uma opção.

TRATAMENTO RECEBIDO

Refere-se ao tratamento médico recebido, mesmo que tenha sido em casa de um enfermeiro, neste caso escreva outro. Há casos que a pessoa acidentada tem que receber sangue. Pergunte sé o sangue transfundido foi testado, caso não saiba, assinale não sabe.

TOMADA DE MEDIDAS PREVENTIVAS

A resposta a esta questão é para dar uma ideia das medidas preventivas tomadas para evitar futuros acidentes.

Nota: Não se esqueça de assinalar de quem é que obteve a informação

ASCATED - UNICEF
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COMO SECUELA DE LAS MINAS ANTIPERSONALES

NÚMERO DE REGISTRO

BOLETA INDIVIDUAL

NOMBRE COMPLETO ENCUESTADOR(A):

FECHA:

NOMBRE DIRECTOR DE CAMPO:

INSTRUCCIONES GENERALES:

- Al llegar a una vivienda informe al jefe de familia o a una persona adulta que usted se encuentra recolectando información sobre las personas que tienen algún tipo de discapacidad por lesiones causadas durante o como consecuencia del conflicto armado.
- Es **muy importante** explicar que la información recolectada será utilizada para proporcionar algún tipo de ayuda a estas personas; pero que servirá principalmente para que haya un lugar cercano a donde puedan acudir para capacitarse y/o rehabilitarse.
- Pregunte si en la casa que está visitando vive alguna persona que tenga algún tipo de discapacidad por alguna lesión causada durante o como consecuencia del conflicto armado.
- Pregunte si es posible entrevistar a la persona o personas que le señalen. Si en ese momento no se encuentra(n) en la casa, pregunte en qué momento puede entrevistarla(s) o en dónde puede encontrarla(s).
- Es muy importante **entrevistar a la persona directamente,** pero si ella no **puede** contestar deberá entrevistar a algún familiar cercano que conozca los datos que se requieren.
- Si la(s) persona(s) con discapacidad y/o sus familiares no desea(n) dar información, despídase amablemente y llene los datos de las **primeras 5 preguntas**.
- Utilice y llene un instrumento para cada persona entrevistada.
- Al terminar la entrevista despídase amablemente y dé las gracias por la información proporcionada.

1. UBICACIÓN GEOGRÁFICA: ¿En dónde vive la víctima?

DEPARTAMENTO:		DEP1
MUNICIPIO:		MUN1
ALDEA:		ALD1
CASERÍO:		CAS1
COMUNIDAD:		COM1

2. GPS: Lectura de geo-referencia.

WAYPOINT

ELEVATION

LOCATION COORDINATES

N / S	°	'
E / W	°	'

3. ¿Cuál es el nombre de la víctima?

NOMBRES:

PRIMER APELLIDO:

SEGUNDO APELLIDO:

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DESCRIPCIÓN DE LA VÍCTIMA:

4. ¿La víctima es hombre o mujer?

HOMBRE [ ] 1 MUJER [ ] 2 SEXO4 [ ]

5. ¿Cuántos años tiene la víctima?

EDAD EN AÑOS CUMPLIDOS [ ] EDAD5 [ ]

6. ¿Recuerda la *fecha exacta* del incidente?

SI [ ] 1 NO [ ] 2 RECFE6 [ ]

* PASE A LA PREGUNTA 8

7. ¿Cuál fue la *fecha exacta* en que ocurrió el incidente?

FECHA7: [ ] [ ] [ ]

FECHA: [ ] [ ] [ ]

* PASE A LA PREGUNTA 9

8. Si no recuerda la fecha exacta, podría decirme ¿hace más o menos cuánto tiempo ocurrió el incidente? (Si ya le dijo la fecha exacta pase a la pregunta 9)

SÓLO RECUERDA EL AÑO: [ ] ** Escriba el año en que ocurrió el incidente. RECANO8 [ ]

1 MENOS DE 2 AÑOS
2 ENTRE 2 Y 5 AÑOS
3 ENTRE 5 Y 10 AÑOS
4 MÁS DE 10 AÑOS

88 NO SABE / NO RECUERDA
99 NO RESPONDE

NOREC8 [ ]

MARQUE SÓLO UNA CASILLA

9. ¿Más o menos qué edad tenía la víctima cuando ocurrió el incidente?

1 ENTRE 0 – 4 AÑOS
2 ENTRE 5 – 14 AÑOS
3 ENTRE 15 – 24 ANOS
4 ENTRE 24 – 29 AÑOS
5 ENTRE 30 – 44 AÑOS
6 ENTRE 45 – 59 AÑOS
7 MÁS DE 60 AÑOS

88 NO SABE / NO RECUERDA
99 NO RESPONDE

EDACC9 [ ]

MARQUE SÓLO UNA CASILLA

10. ¿En qué trabajaba o a qué se dedicaba principalmente la víctima durante la época en que ocurrió el incidente?

1	OFICIOS DOMÉSTICOS	88	NO SABE / NO RECUERDA	TRAB10	
2	AGRICULTURA	99	NO RESPONDE		
3	CUIDAR GANADO			MARQUE SÓLO UNA CASILLA	
4	COMERCIO				
5	ARTESANO(A)				
6	MILITAR				
7	ESTUDIANTE				
8	NO TRABAJABA				
9	OTRO				

EL INCIDENTE Y SUS CONSECUENCIAS:

11. UBICACIÓN GEOGRÁFICA: ¿En dónde ocurrió el incidente?

DEPARTAMENTO:		DEP11
MUNICIPIO:		MUN11
ALDEA:		ALD11
CASERÍO:		CAS11
COMUNIDAD:		COM11

12. Cuando ocurrió el incidente, ¿qué estaba haciendo la víctima?

1	ACTIVIDADES MILITARES	* PASE A LA PREGUNTA 14	ACTIV12	
2	ACTIVIDADES CIVILES			
88	NO SABE / NO RECUERDA	MARQUE SÓLO UNA CASILLA		
99	NO RESPONDE			

13. De la siguiente la siguiente lista de actividades, escoja cuál estaba la víctima realizando en el momento del incidente: (léale a la persona entrevistada los incisos del 1 al 7)

1	SEMBRANDO / CULTIVANDO	8	OTRO	ACTIV13	
2	CUIDANDO ANIMALES (GANADO)	88	NO SABE / NO RECUERDA		
3	RECOGIENDO ALGO FUERA DE LA CASA	99	NO RESPONDE		
4	TRABAJANDO DENTRO DE LA CASA				
5	VIAJANDO				
6	JUGANDO		MARQUE SÓLO UNA CASILLA		
7	MANIPULANDO EL ARTEFACTO				

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14. ¿Qué tipo de lesión tuvo él o ella a consecuencia del incidente? **(Asegurese de marcar el o los incisos que describan más exactamente cada lesión).**

EJEMPLO: Si a alguien le falta el brazo derecho arriba del codo, debe marcar **NO** en todos los incisos relacionados con el brazo derecho hasta llegar al que dice: **BRAZO DERECHO ARRIBA DEL CODO**, y éste es el único inciso que debe marcar **SI**.

AMPUTACIÓN

MANO DERECHA PARCIAL	SI 1	NO 2	PUEDE MARCAR MÁS DE UNA CASILLA	MDP14
MANO DERECHA COMPLETA	SI 1	NO 2		MDC14
BRAZO DERECHO DEBAJO DEL CODO	SI 1	NO 2		BDD14
BRAZO DEREHO ARRIBA DEL CODO	SI 1	NO 2		BDA14
MANO IZQUIERDA PARCIAL	SI 1	NO 2		MIP14
MANO IZQUIERDA COMPLETA	SI 1	NO 2		MIC14
BRAZO IZQUIERDO DEBAJO DEL CODO	SI 1	NO 2		BID14
BRAZO IZQUIERDO ARRIBA DEL CODO	SI 1	NO 2		BIA14

AMPUTACIÓN

PIE DERECHO PARCIAL	SI 1	NO 2	PUEDE MARCAR MÁS DE UNA CASILLA	PDP14
PIE DERECHO COMPLETO	SI 1	NO 2		PDC14
PIERNA DERECHA DEBAJO DE LA RODILLA	SI 1	NO 2		PDD14
PIERNA DERECHA ARRIBA DE LA RODILLA	SI 1	NO 2		PDA14
PIE IZQUIERDO PARCIAL	SI 1	NO 2		PIP14
PIE IZQUIERDO COMPLETO	SI 1	NO 2		PIC14
PIERNA IZQUIERDA DEBAJO DE LA RODILLA	SI 1	NO 2		PID14
PIERNA IZQUIERDA ARRIBA DE LA RODILLA	SI 1	NO 2		PIA14

CEGUERA

PÉRDIDA DE LA VISTA PARCIAL OJO DERECHO	SI 1	NO 2	CDP14
PÉRDIDA DE LA VISTA TOTAL OJO DERECHO	SI 1	NO 2	CDT14
PÉRDIDA DE LA VISTA PARCIAL OJO IZQUIERDO	SI 1	NO 2	CIP14
PÉRDIDA DE LA VISTA TOTAL OJO IZQUIERDO	SI 1	NO 2	CIT14

SORDERA

SORDERA PARCIAL OIDO DERECHO	SI 1	NO 2	SDP14
SORDERA TOTAL OIDO DERECHO	SI 1	NO 2	SDT14
SORDERA PARCIAL OIDO IZQUIERDO	SI 1	NO 2	SIP14
SORDERA TOTAL OIDO IZQUIERDO	SI 1	NO 2	SIT14

OTRO TIPO DE LESIÓN SI 1 NO 2 — OTR14

ESPECIFIQUE: — CUAL14

LESIONES MÚLTIPLES SI 1 NO 2 — MARQUE 1 EN ESTA CASILLA SI MARCÓ VARIAS DE LAS ANTERIORES — MUL14

NO SABE / NO RESPONDE "SI" 1 NO 2 — ** si marca 1 en esta casilla no puede haber marcado ninguna otra en esta pregunta — NOSA14

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15. ¿Qué tipo de cuidado / atención ha recibido él o ella?

PUEDE MARCAR MÁS DE UNA CASILLA

ATENCIÓN MÉDICA DE EMERGENCIA	SI 1	NO 2	MED15	
REHABILITACIÓN FÍSICA	SI 1	NO 2	FIS15	
REHABILITACIÓN PSICOLÓGICA	SI 1	NO 2	PSI15	
CAPACITACIÓN VOCACIONAL	SI 1	NO 2	VOC15	
PRÓTESIS	SI 1	NO 2	PRO15	
ÓRTESIS	SI 1	NO 2	ORT15	
AYUDA ECONÓMICA PERIÓDICA	SI 1	NO 2	ECOP15	
AYUDA ECONÓMICA ÚNICA	SI 1	NO 2	ECOU15	
OTRO TIPO DE CUIDADO / ATENCIÓN	SI 1	NO 2	OTR15	
ESPECIFIQUE:			CUAL15	

NINGUNA	*SI* 1	NO 2	** si marca 1 en esta casilla no puede haber marcado ninguna otra en esta pregunta.	NIN15
NO SABE / NO RESPONDE	*SI* 1	NO 2	** si marca 1 en esta casilla no puede haber marcado ninguna otra en esta pregunta	NOSA15

16. Las lesiones que le *provocaron discapacidad* a él o ella fueron causadas por:

MARQUE SÓLO UNA CASILLA

- 1 EXPLOSIÓN DE ALGÚN ARTEFACTO
- 2 PROYECTILES DE ARMA DE FUEGO (BALAS)
- 3 OTROS:
- 88 NO SABE / NO RECUERDA
- 99 NO RESPONDE

CAU16

INFORMACIÓN SOCIOECONÓMICA:

17. ¿En qué trabaja o a qué se dedica la persona con discapacidad en la actualidad?

PUEDE MARCAR MÁS DE UNA CASILLA

OFICIOS DOMÉSTICOS	SI 1	NO 2	OFI17	
AGRICULTURA	SI 1	NO 2	AGR17	
CUIDAR GANADO	SI 1	NO 2	CUI17	
COMERCIO	SI 1	NO 2	COM17	
ARTESANO(A)	SI 1	NO 2	ART17	
MILITAR	SI 1	NO 2	MIL17	
ESTUDIANTE	SI 1	NO 2	EST17	
NO TRABAJA EN ESTE MOMENTO	SI 1	NO 2	NOT17	
OTRO	SI 1	NO 2	OTR17	
ESPECIFIQUE:			CUAL17	

NO PUEDE TRABAJAR POR DISCAPACIDAD	SI 1	NO 2	** si marca 1 en esta casilla no puede haber marcado ninguna otra en esta pregunta	DIS17
NO SABE / NO RESPONDE	*SI* 1	NO 2	** si marca 1 en esta casilla no puede haber marcado ninguna otra en esta pregunta	NOSA17

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**** Si la persona con discapacidad no realiza ninguna actividad productiva en este momento, pase a la pregunta 19.**

18. ¿Cuánto dinero gana la persona con discapacidad al mes?

Q. | GANA18

19. ¿Cuál es el estado civil de la persona con discapacidad?

1	CASADA / UNIDA	ECIV19
2	SOLTERA	
3	VIUDA	
4	SEPARADA / DIVORCIADA	
88	NO SABE / NO RECUERDA	
99	NO RESPONDE	

MARQUE SÓLO UNA CASILLA

20. ¿Es la persona con discapacidad jefe(a) de familia?, ¿Hay personas que dependen de su ingreso económico?

SI [1] NO [2] | JEFE20

Si la persona con discapacidad **NO** es jefe de familia, agradezca la información que le han proporcionado y **termine** la entrevista en este momento.

21. ¿Cuántas personas dependen del ingreso económico de la persona con discapacidad?

ESCRIBA UN NÚMERO EN CADA CASILLA SEGÚN CORRESPONDA

ESPOSO(A)		CONY21
HIJOS(AS) MENORES DE EDAD		HIMEN21
HIJOS(AS) MAYORES DE EDAD		HIMAY21
PADRES		PAD21
HERMANOS(AS)		HER21
NIETOS		NIE21
ABUELOS		ABUE21
OTROS		OTR21
ESPECIFIQUE:		CUAL21
TOTAL DE DEPENDIENTES		TOTAL21

EN ESTE MOMENTO AGRADEZCA LA INFORMACIÓN QUE LE HAN PROPORCIONADO Y TERMINE LA ENTREVISTA.

1

Form used in Nagorno Karabakh

COMITÉ INTERNATIONAL DE LA CROIX-ROUGE

INTERNATIONAL COMMITTEE OF THE RED CROSS

MINE ACCIDENTS INFORMATION

GENERAL INFORMATION

1. NAME _____

2. ADDRESS _____

3. SEX: MALE ☐ FEMALE ☐ DATE OF BIRTH _____

ACTIVITY

6. AT THAT TIME HE/SHE WAS

FARMING ☐ PASSING BY ☐ TRAVELLING ☐ PLAYING ☐ COLLECTING WOOD ☐

FISHING ☐ HERDING ☐ HUNTING ☐ UNKOWN ☐

ADDITIONAL INFO _____

LOCATION

7. DATE OF ACCIDENTS _____ 8. VILLAGE/CITY _____

8. REGION _____

10. TYPE OF AREA (Mark One or More):

VILLAGE ☐ RIVER BANK ☐

FOOT PATH ☐ FOREST ☐ FIELD ☐ ROADSIDE ☐

NEAR MILITARY BUILDING ☐ NEAR GOVERMENT BUILDING ☐

ADDITIONAL INFO _____

INJURY

11. INJURIES NO INJURY ☐ DEATH ☐

	TRAUMATIC AMPUTATION		OTHER WOUNDS	
	ONE LIMB	BOTH LIMBS		
LEG	☐	☐	HEAD/NECK ☐	PELVIS/ BUTTOCKS ☐
FOOT/TOES	☐	☐	EYES ☐	LOWER LIMBS ☐
ARM	☐	☐	CHEST ☐	UPPER LIMBS ☐
HAND/FINGERS	☐	☐		ABDOMEN ☐

ASSISTANCE

12. HOW LONG DID IT TAKE HIM/HER TO REACH MEDICAL TREATMENT? _____

13. WHAT WAS THE FIRST MEDICAL FACILTY REACHED?

HOSPITAL ☐ CLINIC/FIRST AID POST ☐

IF CLINIC OR FIRST AID POST HOW LONG UNTIL TRANFER TO AHOSPITAL?

NAME OF THE HOSPITAL: _____

14. ASSISTANCE RECEIVED:

PROTHESIS ☐ ORTHOSIS ☐

ADDITIONAL INFO _____

15. ASSISTING AGENCY _____

16.DATE OF LAST ASSISTANCE _____

19 AVENUE DE LA PAIX - CH-1202 GENÈVE - TÉLÉPHONE : +41(22) 734 60 01 - TÉLÉFAX : +41(22) 733 20 57 - TÉLEX : 414 226 CICR CH - http://www.icrc.org

ADDITIONAL INFORMATION

17. HOW OFTEN DID HE/SHE GO THERE?

FIRST TIME ☐ FEW TIMES ☐ DAILY ☐

18. DID THE VICTIM KNOW THE AREA WAS MINED/UNSAFE BEFORE ENTERING IT?

YES ☐ NO ☐

19. ARE THERE ANY OTHER VICTIMS OF THE ACCIDENT? YES ☐ NO ☐

NUMBER OF OTHER PEOPLE INJURED: ____ NAMES: _____

NUMBER OF OTHER PEOPLE KILLED: ____ NAMES: _____

20. TYPE OF DEVICE

MINE: INTITANK ☐ ANTIPERSONAL ☐

UXO: CLUSTER BOMB ☐ GRENADE ☐

IED: UNKNOWN ☐

DESCRIPTION OF ACCIDENT

PLEASE, DESCRIBE THE ACCIDENT IN YOUR OWN WORDS

LOCATION (2)

ADDITIONAL INFORMATION FOR DEMINERS, THAT COULD HELP THEM TO DEFINE EXACTLY LOCATION OF THE ACCIDENT (E. I. MAP OF THE MINEFIELD)

NAME OF THE PERSON COMPLETING FORM: _____ DATE: _____

ORGANISATION/AGENCY: _____

ICRC IMSMA-based Form Accident report ID :

Mine / UXO Victim Data Collection Form

Individual data sheet

Reporting Details

1.11 **Date of report** : 1.13 **Date of injury** :

1.4 **Organisation of Data gatherer** :

1.2 **Name of person reporting accident** :

Victim Characteristics

6.2 **Father Name** : 6.3 **First Name** :

6.9 **Address** : 6.8 **Date of Birth** (dd/mm/yyyy) : ___/___/_____

6.7 **Sex** : **Male** : ☐ **Female** : ☐ 9.5 **Status:** Military ☐ Civilian ☐ Kuchi ☐ IDP ☐ Returnee ☐

Accident Characteristics

Place of incident (Village/town) :

2.4 **Village/Street** : _____ 2.5 **District** : _____ **Province:** _____

6.10 **Was the person injured or killed?**
☐ Killed ☐ Injured

6.11 **Where did the death occur ?**
☐ On site ☐ At health care facility
☐ During transport to health care facility
☐ Other (specify) ----------

New **Were other persons involved ? :**
☐ Yes* ☐ No

***How many were killed** except victim ? _____

How many were injured *except victim* ? _____

4.5 **List names of others injured or killed in this incident.** Note: a casualty data sheets must be completed for **each person involved and indicate in the box whether killed(k) or injured(i) :** [k] **or** [i].

1. _____ ☐☐ 6. _____ ☐☐
2. _____ ☐☐ 7. _____ ☐☐
3. _____ ☐☐ 8. _____ ☐☐
4. _____ ☐☐ 9. _____ ☐☐
5. _____ ☐☐ 10. _____ ☐☐

Other Information

9.6 **Activity of the victim at the time of Accident:**

☐ Military Duty
☐ Demining
☐ Collecting metal
☐ Tampering with item
☐ Unknown
☐ Farming
☐ Tending animals/livestock
☐ Fishing/Hunting
☐ Collecting wood/food/water
☐ Other (please specify) :
☐ Incidental Passing/Standing near by
☐ Travelling **in Vehicle**
☐ Travelling **on Foot**
☐ Playing/Recreation

9.7 **How often did the person go there?**
☐ More than once a day ☐ Once a day ☐ Several times a week or less ☐ Never before

Did the person know that area was dangerous?
☐ Yes* ☐ No ☐ Unknown

***If they knew the area was dangerous, why did they go there?**
☐ No other access ☐ Economic necessity ☐ Peer pressure ☐ Other (please specify) _____

9.11 **Did the person receive mine awareness training?**
☐ Yes ☐ No ☐ Unknown

1.17 **Was area marked?**
☐ As safe (white) ☐ As dangerous (red) ☐ Not marked ☐ Unknown

5.2 **What type of device caused the accident?**
☐ Anti-personnel mine ☐ Anti-tank mine ☐ UXO ☐ Fuses ☐ Unknown
☐ Booby trap ☐ Other device, please specify : _____

Accident report ID : _____

[9] *Medical Information*

[9.1] **First medical facility or assistance reached:**

☐ First Aid Post ☐ Clinic ☐ Hospital

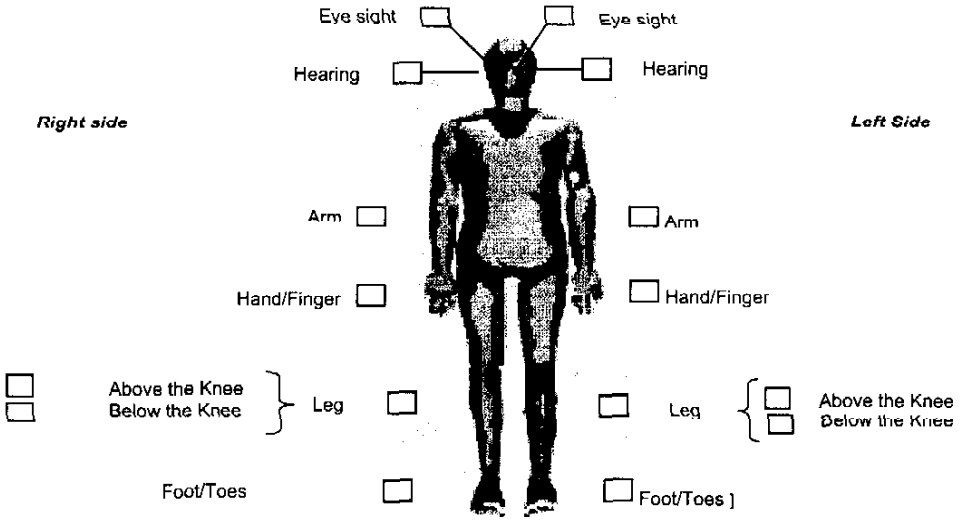
Time until first facility reached : _____ h

[9.3] **Name of first hospital reached : _____**

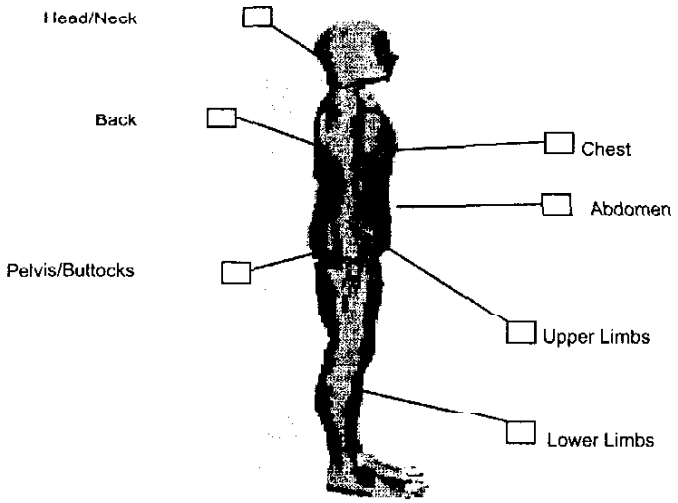
Time until first HOSPITAL reached : _____ h

[7] Injuries

[7.1] Loss of



[7.2] Other injuries / fragmentations :



[4.4] **Medical report reference (if available) :** _____

Please return this form to : _____

_____

Thank you for carefully completing this form !

Appendix G: The Database of Demining Incidents

Andrew (Andy) V. Smith of AVS Mine Action Consultants developed the Database of Demining Incidents (DDI). This appendix contains a brief description of the database and a description of the data fields included in the database. Mr. Smith supplied the MAIC with these documents. For more information on the DDI, or to obtain a copy of the database, contact Mr. Smith directly.

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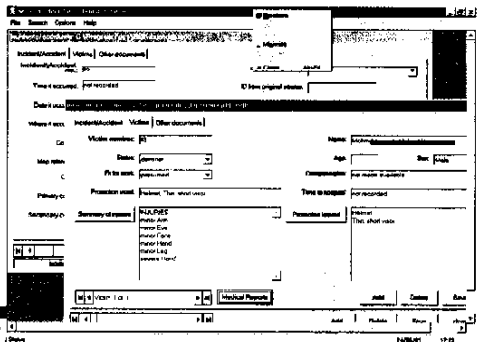
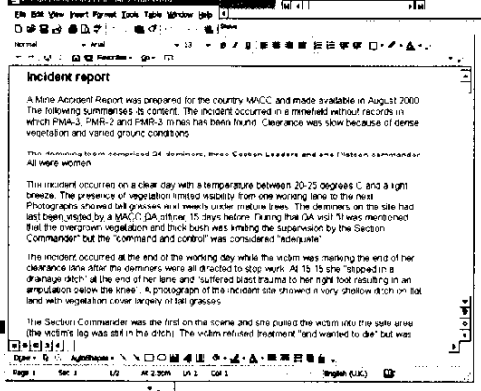
Database of Demining Incidents (DDI)

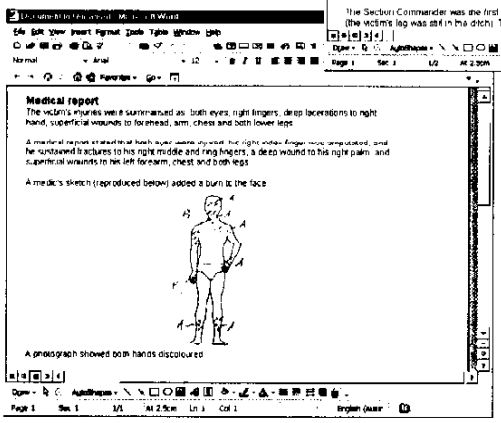
Formerly known as the DDIV, the DDI is a record of all explosive incidents that have occurred during Humanitarian Demining around the world. It is a relational database that runs under Microsoft Windows. Released on CD and offered at no cost to demining professionals, over 300 copies are currently in circulation.

Records of incidents are gathered by visiting mined countries and approaching their Mine Action Centres, by approaching demining NGOs and commercial companies direct, and by interviewing witnesses and victims.



The DDI has been used to identify dangerous activities and adjust working practices.
For example, it provides conclusive evidence that a deminer's eyes and hands are at most risk or severe injury – and
that the most dangerous activity is uncovering a mine that has already been located.
This proof has led to appropriate tools being added to the Personal Protective Equipment (PPE) listed in the UN's standards for humanitarian demining.





The DDI is making demining safer by giving managers a tool with which they can identify areas of high risk and enough detail to develop new risk-reduction strategies.

The current version was redesigned to be IMSMA (Integrated Management System for Mine Action) compatible and allow the entry of existing documents as held by the various Mine Action Centres around the world.

With records of over 400 victims, the DDI is as comprehensive as possible and the conclusions that can be drawn from it are compelling. However, to remain useful it must be constantly updated as new incidents occur.

Database of Demining Incidents (DDI)

INCIDENT REPORT FOR (enter own name or name Investigation Authority)

1. GENERAL

Incident number: *(enter the unique Incident number assigned by any Investigating authority)*
Incident date: *(enter the date of the incident)*
Date of report: *(enter the date of the submission of the report)*
Members of the Investigating Team: *(list the members of any Investigating Team and the Organisation each represents)*
Date of site visit: *(enter the date of any visit to the incident site by the Investigating Team)*

1.1 Place of incident: *(give details identifying the physical address of the Clearance site where the incident occurred. Include a map number and grid reference (8 figures) and/or GPS reading whenever possible.)*

1.2 Time of incident: *(state the time of day that the incident occurred)*

1.3 Names and job titles of those injured: *(list the names and job titles of all those injured in the incident, including any personnel with apparently minor injuries)*

1.4 Length of time each injured had been employed: *(give the length of time and positions held for each of the injured)*

1.5 Detailed description of the injuries: *(for each of the injured in turn, list all of the areas of the limbs, head and body that were known to have suffered, including all minor injuries. A medic's sketch is sometimes available and should be copied)*

1.6 PPE used by each injured person at the time of the incident: *(for each of the injured, list the personal protective equipment in use and state whether it was used appropriately: also list any PPE equipment issued and not in use)*

1.7 Damage to equipment in the incident: *(list details of all equipment, including PPE, that was damaged in the incident. Examine and describe the damage and take photographs when possible.)*

1.8 Length of time since last training/refresher course for each injured person: *(ask the Clearance Organization for details of this)*

1.9 Length of time since last rest-break for each injured person: *(ask the witnesses for details of this)*

1.10 Device involved in the incident: *(identify the explosive device involved in the incident with as much certainty as is possible, and indicate its apparent depth in the ground when buried)*

2 DESCRIPTION OF INCIDENT

The description of the incident should include all of the topics mentioned below. It may do this within a text statement or as answers to each point in turn.

2.1 Description of work area: *(give a detailed description of the area being cleared: include a note of the ground condition – rocky, sandy, hard, wet, etc)*

2.2 Summary of clearance methods used at the site at the time of the incident: *(summarize the activities taking place at the site at the time of the incident)*

2.3 Activity of each involved or injured person at the time of incident: *(describe the activity of each injured person at the time of the incident)*

2.4 Tools/equipment in use at the time of the incident: *(describe the tools/equipment in use at the time of the incident)*

2.5 Describe the day's events leading up the incident: *(summarize the work at the site on the day prior to the incident.)*

2.6 Describe the events following the incident: *(record the methods and the time taken for First Aid treatment and medevac of those injured)*

3 STATEMENT SUMMARIES *(full statements should be signed and dated by those interviewed and copies of originals attached to the Incident Report)*

3.1 Team Leader's statement describing events surrounding the incident: *(summarize the statement and mention any detail not included elsewhere in the report.)*

3.2 Site Commander's statement describing events surrounding the incident: *(summarize the statement and mention any detail not included elsewhere in the report.)*

3.3 Witness statement from all those involved in the events surrounding the incident: (summarize the statement and mention any detail not included elsewhere in the report.)

3.4 A statement from each of those injured in the incident about events surrounding the incident: *(these statements should be taken within seven days of the incident unless the condition of the injured makes this medically unwise)*

4 INVESTIGATION TEAM'S OBSERVATIONS AND OPINION

The Investigation Team should agree a statement of events that they believe most closely represents what really happened before, during and after the incident. If agreement is not possible, the various possible versions of the events should be recorded.

5 INVESTIGATION TEAM'S RECOMMENDATIONS

The Investigation Team should agree a statement of recommended actions that should be taken to reduce the likelihood of the incident being repeated and/or to reduce the severity of injuries in similar incidents. If agreement is not possible, the various opinions about recommendations should be recorded.

6. APPENDICES

Statements and photographs, sketch maps, site maps and any other documents of relevance should be appended to the report. The total number of pages in the complete document should be recorded on the cover.