

**Statement of Dirk Dijkerman
Acting Assistant Administrator, Bureau for Democracy, Conflict, and
Humanitarian Assistance
U.S. Agency for International Development**

Assistance for Civilian Victims of War

**Before the Committee on Appropriations
Subcommittee on State, Foreign Operations, and Related Programs
United States Senate
April 1, 2009**

Mr. Chairman and Members of the Committee, I appreciate the opportunity to testify before this Committee concerning assistance for civilian victims of war by the U.S. Agency for International Development. Twenty years after the creation of the Patrick Leahy War Victims Fund, we have an important story to tell of changed lives, hopeful livelihoods, and respect for the dignity of women and men who have endured severe physical and emotional trauma.

War and civil strife continue to cause death and destruction around the world. The consequences for civilians are devastating: families lose their breadwinner, and men, women, and children suffer physical injuries that dramatically changed their assumptions about how they will live and provide for themselves and their families. The statistics are alarming:

- In many of the world's conflict zones, 10 or more people succumb to war-exacerbated disease and malnutrition for every combat death.
- In times of war, entire populations may flee their homes and communities. If they find shelter, it is often in the form of refugee or internally displaced persons camps where access to basic health and education is limited or non-existent.
- The World Health Organization conservatively estimates that 10 percent of a population has some sort of disability. In conflict-affected countries, that number may be closer to 25 percent.

One direct consequence of war and conflict is the destruction of clinics and hospitals, schools, farm land, bridges, roads, and other critical infrastructure. With these losses, immunization campaigns are often interrupted, malnutrition and disease exacerbated, and further death and injuries result. A recent United Nations Assistance Mission in Afghanistan report notes, "In addition to fatalities as a direct result of armed hostilities, civilians have suffered from loss of livelihood, displacement, destruction of property, as well as disruption of access to education, healthcare and other essential services."

The toll of armed conflict, it is clear, continues to rise long after direct combatant casualties are tallied.

Through congressional vision and leadership, such as that shown by this committee, the U.S. Government continues to demonstrate a strong commitment to vulnerable populations, including civilian victims of war. USAID's social services and assistance programs, along with the Department of State's humanitarian assistance and mine clearance activities, play an important role in reducing vulnerability and offer targeted help to meet basic needs, reduce vulnerability, and increase self-reliance. I will focus my remarks today on USAID's programs.

The Patrick Leahy War Victims Fund, the Marla Ruzicka Iraqi War Victims Fund, and the Afghan Civilian Assistance Program are specific USAID programs working to mitigate the short- and long-term impact that conflict has on civilian victims. While the programs provide direct services to those most in need, the capacity of local governmental and nongovernmental service providers are strengthened to address the most critical needs and build capacity to provide continuing services.

Through these programs, USAID works on the ground, providing direct services to those left most vulnerable by war. In addition to critical rehabilitation care, the programs provide support to increase economic opportunities. They design and change the policies relating to people with disabilities. They improve the quality of care and life for civilian

victims of war. Through these programs, our partner organizations report that more than a quarter of a million civilian men, women, and children have received direct services. We can easily count the number of civilians receiving orthopedic devices, the number of individuals now employed, and the number of houses constructed. However, incalculable are the impacts these programs have had on rebuilding a sense of community and hope for the future. Millions of civilians now have access to health care, rehabilitation services, and education through program activities that have rebuilt hospitals, renovated orthopedic clinics, and reestablished schools.

These targeted funds have given USAID the resources to work closely with nongovernmental organizations (NGOs) and governments to strengthen laws, advocate for equal opportunities for persons with disabilities, provide jobs, and improve the quality and sustainability of rehabilitation efforts. With continued congressional support we look forward to continuing this work.

These two programs are complemented by four other USAID initiatives targeting especially vulnerable populations: the Displaced Children and Orphans Fund, the Victims of Torture Fund and two funds that address the needs of people with disabilities and those who require the use of a wheelchair.

I would welcome the opportunity to brief the committee on the work USAID is doing under all of our special initiatives. For today's hearing, however, I will focus my remarks on the Patrick Leahy War Victims Fund, the Marla Ruzicka Iraqi War Victims Fund, and the Afghan Civilian Assistance Program.

War Victims Fund

Since its creation in 1989, the Patrick Leahy War Victims Fund has been the foundation of USAID's efforts to respond to the needs of civilian victims of conflict in war-affected developing countries. Since its inception, just over 165 million dollars have been invested and over a quarter of a million civilians have received direct assistance in over 30 war-affected countries. This fund, at 12 million dollars in fiscal year 2008, provides a dedicated source of financial and technical assistance for people living with disabilities, particularly those who have sustained mobility-related injuries from unexploded ordnance, antipersonnel landmines, and other direct and indirect causes of disability-including polio and other preventable diseases that might result from interrupted immunization campaigns.

Initially, these programs were seen as one-time humanitarian responses to the overwhelming physical needs of civilian populations injured collaterally during or after conflicts. However, amputation and polio are lifelong conditions. Even the best prostheses need to be repaired frequently and replaced every few years. Children require two or more devices each year as they continue to grow and mature.

As we respond most appropriately to the needs of civilian populations, over time the fund has expanded its scope more strategically. Programs that deliver immediate care to those in need continue. We also work with partners to design and implement a range of development programs that not only accommodate the changing needs of the populations they serve, but establish the foundations in developing countries for sustainable services. We contribute to the design and enforcement of international standards to ensure that practitioners who provide care to survivors are competent. The programs ensure that the treatment and equipment used are appropriate and effective in increasing the mobility of people with disabilities who live in developing countries. Basing our work on international standards allows us to measure the quality and effectiveness of health care services being provided.

The Fund's work with the International Society for Prosthetics and Orthotics (ISPO) has led to the design and establishment of processes for accrediting schools in the developing world. The Fund's work with ISPO has led to the accreditation of schools in Cambodia, El Salvador, Pakistan, Sri Lanka, Tanzania, Togo, and Vietnam. Additional programs will soon be endorsed by ISPO in Colombia, Jordan, and Morocco.

Individuals studying at these institutions receive a Bachelor of Sciences degree or equivalent in prosthetics and orthotics. Each year approximately 70 people enroll in 3 to 4-year professional programs. As a result of direct support from USAID, 228 students from more than forty countries have or are in the process of receiving standardized training as rehabilitation professionals. Once trained, these specialists work in their home countries, increasing the local human resources capacity for service provision. This work is genuine capacity building that has a lasting impact on this and the next generation of practitioners.

Since 1995, the program has supported efforts to examine leading-edge technology and enable the use of sound, state-of-the-art practices in war-affected regions. Mobility-enhancing interventions are only as good as the equipment, fittings, and technology behind them. Hot climates, extended use, and scant access to maintenance can be especially damaging to prosthetic feet and knees.

Over the last 20 years, the fund has worked with partner organizations to test designs and production methods for prosthetic components that enhance their quality and durability. Initially, the fund emphasized local production and

assembly of prosthetic devices. The global economy has forced us and our partners to adapt our approach. Now, the fund supports the purchase of prosthetics and orthotics from countries, including the United States, that are the leading producers in the field. In this way, the program can better ensure that in-country workshops use sound components and that people in developing countries received high-quality, affordable prosthetic and orthotic devices.

At the same time, the fund continues to support and expand the capacity of local organizations and personnel to provide services and care for people with disabilities. Traditionally, international donors have invested largely in regional workshops and clinics. While these have the potential to serve many people, and handle complex cases, it has been difficult for ministries of health to commit to their long-term support. For this reason, we have begun to emphasize smaller-scale, targeted support to local and community-based organizations that provide services to survivors and people with disabilities.

In Africa, through the International Committee of the Red Cross (ICRC), USAID provides support to more than twenty-eight small-scale rehabilitation workshops. In most instances, these workshops are staffed by one to two people and are located in rural, often inaccessible, places. After training in both rehabilitation as well as workshop management, the ICRC provides these workshops with durable materials and mentoring on a rotating basis. This approach has increased access to rehabilitation services to those clients who often cannot make the journey to a provincial town center. Each year, these projects provide orthopedic devices and services to more than 10,000 people.

The provision of prosthetics/orthotics and equipment remains an important humanitarian goal of the Patrick Leahy War Victims Fund. Truly meaningful and sustainable intervention though requires a holistic approach that takes into consideration individual, family, and community context. With this in mind, the program has broadened its approach to increasing mobility and quality of life among victims of conflict. Among the innovative initiatives has been the support for social inclusion, employable skills, and the ability to advocate on their own behalf for effective legal protections against discrimination.

Full access to services and facilities and full community inclusion for people with disabilities are fundamental guiding principles of the Fund's programming. Programs support barrier-free accessibility to schools, work, and recreation, as well as opportunities for political engagement. Other components foster community awareness of the need for inclusion, recognizing the inherent challenges, and the capacity of people with disabilities to reintegrate.

Ensuring that people with disabilities are self-sufficient is a key goal of the Patrick Leahy War Victims Fund. The ability to generate an income and provide for oneself and one's family is an important component. Since 2000, we have supported the World Rehabilitation Fund's efforts to create a cooperative in Lebanon through which local villagers market and sell products such as poultry, eggs, dried herbs, and beeswax while learning critical life skills. The cooperative is well on its way to financial sustainability through its creative marketing and product lines, including the first Lebanese free-range chicken eggs. In 2008, 77 percent of its over 200 members were making a profit. For a majority of the members, their World Rehabilitation Fund-supported enterprises represent their family's major source of income.

Around the globe, people with disabilities often face segregation in the workplace. A Fund-supported initiative in Sri Lanka worked with employers to encourage them to hire people with disabilities into mainstream positions. Part of this work involved transforming traditional job fairs by dedicating additional days to which reasonable accommodations measures could be made for people with disabilities. In one case, 48 of 100 people with disabilities who attended these job fair days were offered positions immediately, and 33 more received second interviews.

Meaningful social and political integration is realized when people with disabilities have legal protections and the ability to advocate on their own behalf. USAID's 1997 disability policy advances a clear vision and framework for all of our efforts in the area of disability-related issues. This is reinforced through two policy directives and program funding to advance inclusive development practices.

USAID is the leading international agency engaged in disability policy work in Vietnam. Among the many accolades, two national laws have been achieved regarding disabilities and the establishment of building design codes and construction standards to ensure access for people with disabilities. Primarily through our partnership with Vietnam Assistance for the Handicapped, a "Blue Ribbon" employment council has been established, and we have worked with the Ministry of Home Affairs to establish a law allowing for the establishment of local NGOs. Notably the first organizations registered as local associations, a stepping-stone to becoming a legal NGO, have been disabled person's organizations.

Where possible, we promote partnership with governments, especially ministries of health. Because many countries emerging from post-conflict situations have tenuous governmental structures, we work primarily through well-respected and experienced NGOs such as World Rehabilitation Fund, Handicap International, the ICRC, ISPO, and Vietnam Assistance for the Handicapped.

These organizations, and others, have worked with USAID to provide more than 175,000 artificial limbs and orthoses, to create or support 201 workshops, and to train more than 1,500 people to provide appropriate rehabilitation services to those in need. Coupled with support provided for related interventions such as surgeries, fostering of economic self-sufficiency and social inclusion, the fund has provided support for services to over one-quarter of a million people in more than thirty war-torn countries.

The impact of these programs is measured not only in terms of beneficiaries serviced, but also, and more importantly, in terms of the human and institutional resources that are developed and able to continue without external support.

Marla Ruzicka Iraqi War Victims Fund

In addition to the provision of immediate on-the-ground care to victims, today I want to emphasize that our programming is designed to help establish sustainable rehabilitation services that can become core components of the larger healthcare systems of developing countries.

USAID also supports programs that address the needs of war victims in countries where war is a recent occurrence. Through a program established by Congress in 2003 through the initiative of Senator Patrick J. Leahy to help Iraqi civilians injured in the conflict, and renamed the Marla Ruzicka Iraqi War Victims Fund in 2005, we have been given the mandate to assist Iraqi civilians, families, communities, and organizations that have been directly affected by coalition military operations. This Fund was named in remembrance of Marla Ruzicka, a passionate humanitarian who worked on behalf of civilian victims of war in Iraq. On the day in 2005 when she was tragically killed, Ruzicka had been visiting Iraqi families who had lost relatives to violence.

The Marla Fund is implemented through four nongovernmental agencies that cover different regions of the country. It is separate from a Pentagon-run program that provides compensation for deaths, injuries, or property damage as a result of activities by coalition forces. The U.S. military plays no direct role in the Marla Fund.

To date, USAID has received approximately 40 million dollars in appropriations for assisting Iraqi war victims, of which 15 million dollars have been obligated under the Marla Fund since September 2006. A recent USAID audit report notes that since 2003, more than 350,000 Iraqis have directly benefited from the program, an additional 1.5 million have benefited indirectly from the more than 630 completed projects. The Marla Fund has supported more than 1,700 individual and community projects.

Direct medical help is provided to individuals. Hospitals and health clinics have been rebuilt and supplies provided. Damaged property and municipal structures have been repaired. War victims have received assistance to establish businesses so they can support themselves and their families.

Injured civilians, many of them amputees who require prosthetics, have secured medical care and rehabilitative services. One such case involved a young Iraqi girl who lost part of her right hand and suffered facial disfigurement as a result of conflict violence. The Marla Fund was used to pay for her travel to the United States for reconstructive surgery not available in Iraq.

In one Baghdad community where the local health clinic was destroyed by violence, the Marla Fund rebuilt the health clinic and restocked it with much-needed medical supplies. Now that the local health clinic is again operational, community residents no longer have to travel long distances for their regular healthcare needs.

One of the Marla Fund's successful income-generating projects is the opening of a bakery in Salah ad Din governorate. The establishment of that bakery has been the joint effort of thirty families, each having a family member injured or killed in the war. After developing a sound business plan, the families worked with a USAID implementing partner to submit a viable funding application. Today, the bakery thrives, boosting the incomes of these families and generating employment opportunities to others in the community.

We have assisted widows and families of war victims. One example is the story of Fadheela Ali Mohammed whose husband was accidentally shot and killed while driving pilgrims across the border from Iran to Iraq. Widowed Fadheela had three children and an ailing mother for which to care, but she did not have proper employment or housing.

In an effort to help Fadheela and her family recover from their loss and avoid poverty, monies from the Marla Fund helped build a new house. The security of having reliable housing allowed Fadheela to gain confidence and focus her attention on starting her own business. She turned a portion of her new house into a successful shop that sells household goods.

Like the Patrick Leahy War Victims Fund, the Marla Fund is successfully reaching some of the most vulnerable people who are civilian victims of war and conflict.

The Afghan Civilian Assistance Program (ACAP) - The Leahy Initiative

USAID also provides assistance to civilian victims of war in Afghanistan. Much like the Marla Ruzicka Iraqi War Victims Fund, the Afghan Civilian Assistance Program (ACAP) provides direct assistance to those who have suffered losses as a direct or indirect result of military operations in Afghanistan.

In 2003, at the urging of Senator Patrick J. Leahy, USAID's Afghanistan Transition Initiative was established to build or repair shelters, roads, and bridges. The implementing organization, International Organization for Migration (IOM), worked primarily in Afghanistan's southeastern region, a region that saw extensive military operations against insurgents and the Taliban beginning in 2001. That first initiative ended in 2005. Subsequently, USAID developed the ACAP.

Through ACAP, USAID now provides an estimated 9 million dollars per year to assist families or communities that suffer losses from specific military incidents. Civilian victims are assisted when they sustain injuries or lose family members. ACAP is not a compensation program, does not provide handouts of cash, nor is it intended to be used for condolence payments. Rather, ACAP provides assistance to those most in need through sustainable assistance packages, which IOM adjusts, to the specific needs of the beneficiaries.

ACAP provides timely medical assistance for injured civilians-working in-country or through an international referral system. ACAP programs work to aid entire communities by assisting local hospitals improve their responses in treating injuries. Communities receive assistance to rebuild vital infrastructure and municipal buildings, such as schools, clinics, and administration offices, which provide essential services for the entire community.

If a family loses its primary income provider, ACAP may assist surviving family members by providing vocational or business training; replacing of the family's source of income, such as its herd of livestock or its fruit orchard; or assisting in establishing a new small business. ACAP is flexible enough to provide this type of assistance, to fund the repair of a damaged home, or to ensure that children are able to continue their education when one or both parents are lost.

Through IOM, USAID works on international, national, and provincial levels, coordinating its operations with other U.S. Government agencies, NATO Forces, the Afghan Independent Human Rights Commission, the Government of Afghanistan, and the United Nations Assistance Mission in Afghanistan. ACAP programs have a no-blame nature; there is no focus on why or how the military forces have been involved in specific incidents. What the program does focus on is identifying the best ways to assist members of the Afghani population who have suffered often devastating losses as a result of war and providing them with tools to rebuild their lives.

Since 2003, over 2,000 families are now receiving, or have already received livelihood, education, or medical assistance. An additional 8,000 needy families have been identified as eligible for assistance. In total, 24 provinces have benefited from the project.

The Way Forward

Clearly foreign assistance can play a crucial role in building a more safe and secure world, with representative governments that foster economic growth and allow families to provide for their own needs as well as ensure transparent and accountable good governance. This is in the best interests of the United States.

Despite our best efforts to foster these ideas, some countries remain mired in war or have recently emerged from conflict. When people are at their most vulnerable, they are often in need of the most basic assistance. This is what the Patrick Leahy War Victims Fund, the Marla Ruzicka Iraqi War Victims Fund, and the Afghan Civilian Assistance Program were designed to do. They have an immediate impact as well as a sustainable development objective.

Much has been achieved under these initiatives for civilian victims of conflict: Over one-quarter of a million people have received direct assistance; hundreds of hospitals, schools, and rehabilitation centers have been either built or supported; and thousands of national staff have been trained. The programs contribute to stabilization efforts in countries in the midst of conflict, like Afghanistan and Iraq, and they help open doors in countries like Vietnam. The programs provide direct assistance to some of the most vulnerable populations in the world. They build good will and strengthen our country's alliances now and for the future.

In Iraq, USAID is looking at ways to increase support to vulnerable civilian populations such as war widows. The

State Department and USAID are analyzing their efforts in an effort to enhance support to war widows beyond what is already provided by the Marla Fund. Additionally, USAID will work to ensure that the needs of these vulnerable populations are addressed by the Government of Iraq as the Government of Iraq develops their Social Safety Net through the Ministry of Labor and Social Affairs in the near future and as newly elected Provincial Councils are formed. USAID will continue to build the capacity of the Government of Iraq do this through on-going programs such as our Local Government Project and National Capacity Development Project also known as Tatweer ("Development").

In addition to providing essential rehabilitation services to amputees and other people with disabilities, the Patrick Leahy War Victims Fund will continue to support the development of more durable and appropriate prosthetic, orthotic, and wheelchair technologies. It will strengthen host-country capabilities through the development of stronger laws and policies, and train vital technical staff. The Fund will continue to provide support for the strengthening of small-scale rehabilitation and advocacy efforts on behalf of people with disabilities.

Once an amputee has been fit with a quality limb or surgery has been performed, civilian victims often lack the skills necessary to return to meaningful employment. To that end, the Fund will put more technical and financial emphasis on providing increased economic opportunities. This may include job skill training, strengthening vocational rehabilitation efforts, further development of public-private sector partnerships, and employment mentoring.

With continued strong congressional leadership and support, USAID will continue providing critical services and increasing opportunities for civilian victims of conflict throughout the world so that they may return to meaningful employment and active participation in their communities.