
Chapter 7

Seminar held on 14th November 2001

Following up on the UN Small Arms Conference: Some Examples of Action

Speakers: Elizabeth Clegg, Etienne Krug and
Thomas Markram

Thomas Markram presented a summary of the events related to small arms that had taken place during the 56th Session of the First Committee (Disarmament and International Security) of the United Nations General Assembly (UNGA). Elizabeth Clegg then spoke about regional initiatives on small arms, focusing on South Eastern Europe, Southern Africa, and the Horn of Africa and the Great Lakes region. Etienne Krug concluded the seminar by discussing how the World Health Organization (WHO) is working to improve data collection on the health impacts of small arms.

Presentation by Thomas Markram

During the 56th Session of the UNGA First Committee (Disarmament and International Security), held between

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September and November of this year, 51 resolutions and decisions were produced. There are four basic resolutions from this First Committee that are relevant to the subject of small arms.

First, the Mali resolution deals with assistance to states for purposes of curbing the illicit traffic in small arms, and for weapons collection programs. It takes a regional approach to small arms problems, addressing members of the Economic Community of West African States (ECOWAS). Next, a German resolution on practical disarmament measures is also relevant to the small arms agenda. Third, Japan presented a resolution on small arms that has been around for a couple of years. Lastly, South Africa offered a resolution on the illicit trafficking of small arms and light weapons, another resolution that has been around for a couple of years.

Following the success of the United Nations Conference on the Illicit Trade in Small Arms and Light Weapons in All Its Aspects (hereafter, the “UN 2001 Small Arms Conference”) in July, Japan, South Africa and Colombia decided to consolidate the two Japanese and South African resolutions into one and jointly sponsor a resolution in the First Committee, capturing the consensual aspects of the July Conference in a manner that facilitates implementation. South Africa and Japan, under the leadership of Ambassador Reyes (Colombia), presented the resolution as a combination of the components agreed to at the UN 2001 Small Arms Conference, working primarily around the Programme of Action (POA) on the illicit trade in small arms and light weapons. The POA, agreed to by consensus at the UN 2001 Small Arms Conference, was an essential first step, placing the small arms issue on the international agenda for the future. The POA needs to be constantly supported and monitored; implementation is a crucial aspect.

By introducing the joint resolution to the First Committee, Japan, South Africa and Colombia were attempting to get the bureaucratic mechanisms started, in support of implementation of the POA. As diplomats, we leave the primary implementation

duties to states and non-governmental organizations (NGOs); the joint resolution aims to encourage the UN Department for Disarmament Affairs (DDA) to give us support and encourage states to fulfill their obligations under the Programme of Action. As my other two colleagues will concentrate on implementation-oriented issues later, I would like to take a few moments to address the specific procedural components of the joint resolution.

The preamble of the joint resolution recalls the two previous resolutions by South Africa and Japan. It points out the decision to hold the UN 2001 Small Arms Conference, and welcomes the adoption of the Programme of Action by consensus. The operational part deals with the convening of the 2006 Conference.

Paragraph 2 of the resolution describes a meeting to be held in 2003, where implementation at the national, regional and international levels will be discussed. Paragraph 3 calls for the implementation of the Programme of Action.

Paragraphs 4, 5 and 6 of the resolution deal with the United Nations, other international organizations (IOs), NGOs and states, calling on these entities to do what is required to implement the POA.

Paragraph 7, following from last year's South African resolution, addresses weapons destruction and subsequent reporting. It brings up the situation where state authorities desire to use collected weapons themselves because the weapons are more advanced than those possessed by the states.

Paragraphs 8, 9 and 10 of the joint resolution request the Secretary General to mobilize resources in support of the POA, and give him the authority to undertake a study on tracing weapons.

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Finally, the closing sections of the resolution attempt broad reviews of state opinions,¹ and try to enhance international cooperation, encouraging DDA to provide resources, for example, in circulating reports.

This resolution is a procedural one, but is very important in capturing the outcome of the UN 2001 Small Arms Conference. The resolution, like the POA in the 2001 Conference, was approved by consensus at the First Committee. This was necessary to preserve the unanimous spirit that characterized support of the POA in the UN 2001 Small Arms Conference. The resolution tries to encourage implementation of the POA by IOs and states. Many UN agencies, including DDA, have work to do in this regard. NGOs will also be involved.

At one point in the First Committee, my delegation (the South African delegation) delayed the proceedings because it disagreed with any linkage between the language of this and other resolutions. But, at the end of the day, we managed to work out the differences and adopt the resolution by consensus. I think the main sponsors, Japan, South Africa and Colombia, worked very well together on the resolution. Colombia led the coordination of the resolution this year; Japan will do so next year, and South Africa the following year.

Many tasks flow from this resolution, and will have to be carried out. For one, the 2003 Conference looms quite near, and preparatory work will have to be done for it. This preparatory work may be incorporated into next year's resolution in the First Committee. Some of the work may be done here in Geneva; we already have a forum that meets prior to the Conference, under the chairmanship of Norway, Switzerland and South Africa, and I think a similar setting might be used to begin circulating ideas about how the 2003 Conference should be run, where and for

¹ For example, Cuba, at the First Committee, expressed the view that states should have input into the tracing study as it was being conducted, so that states' views could be incorporated along the way.

how long it should be held, who should chair it, and what should be the topics of discussion. The South African delegation believes that the 2003 Conference will comprise states, regional and international organizations, and NGOs, with primarily states and regions reporting on their implementation of the program.

Another task needing attention relates to the issue of brokering, left unresolved at the UN 2001 Small Arms Conference. The process dealing with control of arms brokering must be initiated. Japan plans to host a couple of meetings on the subject, but states need to consult each other more about how to drive this process forward. If such consultations produce any results, then the issue could potentially be taken up through next year's resolution in the First Committee.

In the end, though, the First Committee can provide only a framework for implementation of the Programme of Action. The essential operationalizing of the agenda takes place outside of bureaucratic international structures. Here, the burden is on states to follow through on their commitments, and to move forward the Programme of Action and other work arising out of the UN 2001 Small Arms Conference.

Questions and Comments

Q: Towards the end of the UN 2001 Small Arms Conference, the US delegation demonstrated opposition to a potential review conference. Was there any sign, during the First Committee, that the US position on a review conference had softened?

A: The US delegation expressed concerns over the financial implications of future conferences. They maintained budgetary concerns, but went along with the consensus. My impression was that the US delegation felt that the review conference was an issue that could be taken up at a later stage, because it would fall

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into a future UN budgetary cycle. The US practices careful scrutiny of the spending implications for many resolutions; I do not believe that their concerns detracted from any of the agreements that were concluded.

Q: I would like to say that the French delegation welcomed the adoption of this resolution, and we thank South Africa, as well as Japan and Colombia, for their sponsorship of the resolution in the First Committee. We believe that its adoption by consensus was very important. In particular, we feel, together with the Swiss delegation, that the paragraph calling for an expert group to study the feasibility of arms tracing is an important contribution. I think that Cuba's suggestion, about states having input throughout the study, will only enhance the quality of the work of the group of experts. I also hope that others will work on, and think about, the issue of tracing, with other countries and civil society. The UN working group is a step in the right direction, and hopefully its work will feed the work of the 2003 Conference.

Q: Were the resolutions that you mentioned earlier the only ones dealing with small arms in the First Committee?

A: Actually, we could say that there were basically three resolutions dealing with small arms at this year's First Committee. The Mali resolution deals with regional aspects of small arms in the ECOWAS region. Second, the German resolution also has a small arms component. And the final resolution, which targets the outcome of the UN 2001 Small Arms Conference and forwards it internationally, is the resolution that I have been speaking about. It amalgamates the old Japanese resolution and the old South African resolution.

Presentation by Elizabeth Clegg

Saferworld is active on small arms issues in a number of regions in the world. In my presentation, I would like to highlight some of the recent developments that have occurred, in the field of small arms, in the regions of South Eastern Europe, Southern Africa and Eastern Africa.

The Szeged Small Arms Process

In South Eastern Europe, following the UN 2001 Small Arms Conference, NGOs and governments have been working productively together in conceptualizing and implementing regional small arms initiatives. The roots of this cooperation can be traced back to the inception of the Stability Pact for South Eastern Europe, which recognized the crucial implications of small arms proliferation and illicit arms trafficking from an early stage. However, although a series of seminars, held under the auspices of the Stability Pact, confronted these issues, progress in resolving the problems was initially *ad hoc* and uncoordinated.

Recognizing the need for more coordinated action, Saferworld, along with partner NGOs and governments in the region, sought to initiate a collaborative process to address the small arms problem in South Eastern Europe. The Szeged Small Arms Process, initiated at a pilot roundtable, co-hosted by Saferworld, the Hungarian Ministry of Foreign Affairs and the Szeged Centre for Security Policy in Szeged, Hungary in November 2000, was created to fulfill this purpose. The participants at this first seminar in Szeged, having identified the main elements of the small arms problem in South Eastern Europe, agreed that the next step should be to develop a comprehensive and coherent “Action Programme” for the region; the Szeged Small Arms Process was initiated at the roundtable in order to agree and move forward the elements of this Action Programme.

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In the months following the first roundtable seminar, Saferworld and partner organizations, including the European Institute for Risk, Security and Communication Management (EURISC) in Romania and the Slovak Foreign Policy Association, maintained dialogue with governments and regional institutions on the development of a regional Action Programme. A variety of additional projects were also commenced, including: a small arms assessment trip to Serbia in May 2001 (after invitation from the Serbian Interior Ministry), which was followed by a roundtable discussion of preliminary findings; a seminar on organized crime and illicit arms trafficking in June 2001; and an April 2001 meeting of the Central and East European NGO Network that dealt with the small arms issue.

In parallel with these projects, during the weeks preceding the second Szeged seminar of September 2001, the Office of the Special Co-ordinator of the Stability Pact produced a draft Regional Implementation Plan. This Implementation Plan seeks to enhance regional cooperation on small arms, and to create a framework, within which donors can work closely with South Eastern European countries to implement the Organization for Security and Co-operation in Europe (OSCE) document, the UN Programme of Action and other relevant commitments.

The Draft Regional Implementation Plan

The draft Regional Implementation Plan delineates action across a range of small arms-related concerns, including disarmament, demobilization and reintegration of combatants, enhancement of public awareness and collection and disposal of small arms. The Plan also provides for the establishment of a regional clearinghouse (the South Eastern Europe Clearinghouse for the Control of Small Arms and Light Weapons (SEESAC)), based in Belgrade under the supervision of the United Nations Development Programme (UNDP), that will offer advice on small arms projects and facilitate information sharing. A regional

steering group is also envisaged, consisting of national focal points that will be charged with monitoring the implementation of the Plan and reviewing priorities for action. To support these processes, a special fund will be established, and donors will be encouraged to contribute to it.

It was agreed, with the Office of the Special Co-ordinator of the Stability Pact, that Saferworld would present the Regional Implementation Plan to participants at the second Szeged seminar in September 2001, as part of an ongoing consultation process. At the seminar, the participants welcomed the opportunity to discuss the draft Plan in detail, and agreed upon a communiqué setting out a number of possible improvements to the Plan. However, overall support for the draft Plan was strong, and was marked by agreement that the Plan's commitments were realistic and feasible.

The Future of the Szeged Small Arms Process

Besides agreeing to provide continued support for the Stability Pact Implementation Plan, participants agreed that the Szeged Small Arms Process should play a complementary and reinforcing role in assisting the effective implementation of the Plan. This role should include reviewing and monitoring implementation, raising public awareness, mobilizing political will in support of the Plan and developing supplementary initiatives. The participants at the September seminar also agreed to hold a series of follow-up workshops, and to undertake other activities on specific issues, under the framework of the Szeged Small Arms Process. Initial priority areas within this framework include:

1. Dissemination of best practice and lessons learned in weapons collection and destruction;
2. Raising public awareness and generating public discussion on issues related to the reduction and control of small arms and light weapons;

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3. Development of linkages with the Szeged Small Arms Process, involving mayors and municipal authorities in efforts to control and reduce small arms and light weapons;
4. Development of shared understandings of contentious issues, such as criteria for identifying “surplus stocks” and “destabilizing accumulations of weapons”;
5. Further strengthening of training programs to promote police capacity, to maintain security and justice and to enhance police-community relations; and
6. Continued support and encouragement of full regional participation, including that of NGOs, in the Szeged Small Arms Process.

The commitment and involvement of civil society is crucial to the success of the Szeged Small Arms Process. A range of civil society actors are involved, including local NGOs, local branches of international NGOs (such as the Red Cross) and local institutes, such as the Szeged Centre for Security Policy. These members of civil society perform tasks ranging from research to public awareness activism. For example, the Yugoslav Red Cross is promoting public awareness by launching a campaign on small arms and light weapons entitled, “For Life - Without Weapons,” set to take place on the 10th and 11th of December in Belgrade.

Advancing Action to Tackle Small Arms in Southern Africa

Saferworld’s work in the Southern African Development Community (SADC) region has centered around development and implementation of the Southern African Action Programme on Light Arms and Illicit Trafficking. For the past three and a half years, this Action Programme has provided the framework for cooperation, on small arms issues, between the SADC region and the donor community (particularly the European Union (EU)).

More recently, action on small arms in Southern Africa has come through the agreement of the SADC Protocol on Control of

Firearms, Ammunition and Other related materials, signed in August of this year at the SADC Heads of Government Summit. Presently undergoing the ratification process, the SADC Firearms Protocol is a comprehensive agreement that reflects many of the priorities set out in the UN Firearms Protocol and the UN 2001 Small Arms Conference Programme of Action. These priorities include: (1) legislative measures for controlling manufacture, transfer, brokerage, use and possession of small arms and light weapons; (2) measures to enhance operational capacity and cooperation between customs, police and other related agencies, including the establishment of joint training exercises; (3) provisions for marking small arms; (4) provisions for disarmament and demobilization of combatants and for disposal of surplus, obsolete, or confiscated small arms; (5) measures to promote voluntary collection of small arms and light weapons, and to raise public awareness of their dangers; (6) measures to enhance transparency in firearms accumulations, flows and policies; and (7) measures to counter corruption.

Implementation of the SADC Firearms Protocol will require concerted effort by the SADC states, as well as support and assistance from other interested states, for a considerable period of time. Yet, the broad range of action on small arms in the SADC region should ultimately have a significant impact on the ground.

The Tanzanian National Action Plan

Within the context of efforts to mitigate small arms concerns, regional approaches to action are very important. Regional action to adopt common standards and cooperative measures, among the countries in a particular region or sub-region, serves to reinforce the local progress being made. It is also important to recognize that much of the implementation of international and regional agreements depends on work at the national level. Progress in a region or sub-region must not be allowed to be inhibited by those countries that are slowest to

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change; countries possessing the motivation to act need support in their endeavors.

In this regard, Saferworld and two partner organizations, the Security Research and Information Centre (SRIC) and SaferAfrica, have worked together in developing and implementing a groundbreaking initiative that entails a comprehensive mapping and analysis of the small arms problem in Tanzania. Along with this initiative, a five-year National Action Plan for Arms Management and Disarmament has been developed.

This initiative in Tanzania, driven on the ground by the national government, surveys the small arms problem throughout the country by employing national workshops for all relevant government departments as well as provincial workshops for district officials, police and community leaders in each principal town. Perceptions of the small arms problem are gathered by conducting surveys of 3,600 households within 20 different provinces in the country.

Furthermore, this process has also seen the creation of new local and national institutions and mechanisms to confront the small arms problem, including an Arms Management and Disarmament Committee, whose main role is to secure funding for, coordinate and monitor the National Action Plan. In addition, the newly formed National Focal Point on small arms, which brings together stakeholders from government and civil society organizations (such as the Tanzania Maritime Foundation and the Centre for Foreign Relations), creates a unified national response to small arms concerns. The creation of such institutions indicates a serious commitment by the Tanzanian government to support the National Action Plan over the next five years. Saferworld hopes to promote similar initiatives in the future, in Kenya, Uganda and Rwanda.

Implementing the Nairobi Declaration: The Horn of Africa and the Great Lakes Region

In March 2000, efforts to tackle the small arms problem in Eastern Africa were given renewed impetus and direction. The agreement of the Nairobi declaration by 10 heads of government from the Horn of Africa and the Great Lakes region, and the subsequent agreement by senior officials on an Agenda for Action and associated Implementation Plan in November 2000, has set out an ambitious course of action to combat small arms proliferation in this sub-region.

To facilitate implementation of the Nairobi Declaration, structures at the national and sub-regional levels are necessary to ensure coordination of efforts in both contexts. At the national level, the Nairobi Declaration has provided for the establishment of National Focal Points, which bring together all relevant government departments and agencies with a role or stake in responding to the small arms problem. In Kenya, the country's first inter-agency workshop on the issue, in May 2001, led to the establishment of a national focal point that includes 15 government agencies and is chaired by the Office of the President. In Tanzania, creation of a national focal point has occurred parallel to development of the National Action Plan for Arms Management and Disarmament, discussed above. The process of establishing a national focal point in Uganda is also underway, following an inter-agency meeting that took place last month.

At the sub-regional level, partner governments have given a mandate to the Kenyan government to establish a coordination and oversight capacity for the Nairobi Declaration. To this end, the Nairobi Secretariat has been established, within the Kenyan Ministry of Foreign Affairs, to coordinate activities and ensure a regular flow of information about small arms developments throughout the sub-region. Saferworld and its partners have prioritized capacity building support for the Secretariat, and have

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assisted in fundraising, as well as in the production of a tri-annual newsletter updating developments on small arms in Eastern Africa.

To raise the profile of small arms developments in Eastern Africa among the intergovernmental community, Saferworld, together with the Nairobi Secretariat, compiled and published the Nairobi Declaration, Agenda for Action, and Implementation Plan, along with a detailed budget and timetable for activities, in a new publication entitled, *Implementing the Nairobi Declaration*. At the July 2001 launch of the publication at the UN Small Arms Conference, the Kenyan Minister of State called for the creation of a new group named, “The Friends of the Nairobi Declaration.” An initial meeting of this group was held on the periphery of the UN Small Arms Conference in 2001, where governments discussed priorities for providing technical and financial support to implement the Declaration.

As a complement to efforts in support of the Nairobi Declaration, Saferworld, together with SRIC, SaferAfrica and the Inter-Governmental Authority for Development (IGAD), are holding seminars to promote the elaboration and implementation of sub-regional, regional and international commitments to control small arms. As of the present time, two seminars have been held: one seminar focused on strengthening legislative and regulatory controls on small arms in Eastern Africa, and the other dealt with enhancing relevant operational capacity. A third seminar is being planned for next month, to address weapons collection and stockpile management.

One salient by-product of the seminar program occurred after the February seminar on legislation, when the Nairobi Secretariat requested help from Saferworld and its partners in drafting a regional protocol on small arms control. An expert meeting in May discussed the draft, which was then discussed by the Eastern African Police Chiefs Committee (EAPCCO). The draft Firearms Protocol was presented to the annual General Meeting of Police Chiefs in September, and now awaits ministerial approval.

Aside from support for the Nairobi Declaration and the seminar program, Saferworld also conducts a variety of research-oriented activities that will feed into seminar deliberations and other activities. These research activities include a comparative study of national small arms legislation across the Eastern African sub-region, assessing commonalities and differences, and making proposals for strengthening and harmonizing legislation. Saferworld and SRIC are also carrying out research into the scope of police-community cooperation in two Kenyan localities; one of these localities is a crime-ridden inner-city area of Nairobi, and the other locality is a rural area plagued by problems like cattle rustling.

Crucial work on the small arms issue is also being performed by other NGOs in the Eastern African region. For example, the Small Arms and Light Weapons in the Inter-Governmental Authority for Development (SALIGAD) project, led by the Bonn International Center for Conversion (BICC), is examining the local dynamics of small arms flows, with a particular focus on the demand side. The BICC has also done community-level research with local partners in Somaliland, Ethiopia and Kenya, and this work will help inform the implementation of small arms projects across the region.

Questions and Comments

Q: Is Saferworld in contact with local health officials or criminal justice officials in places where it has operations, with the aim of ascertaining whether the programs and activities you spoke about are actually reducing armed violence?

A: Saferworld recognizes that, in its support for the development of regional policy initiatives and their implementation by governments and civil society, monitoring of

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the effectiveness of such programs and activities is an important aspect. For instance, in Tanzania, we have trained local police officers to conduct surveys on the impacts of small arms. People were asked a number of questions, with an aim to obtaining information on small arms as well as on the context in which these people are living. I would imagine that, in a few years, when the National Action Plan has been more fully implemented in all its aspects, subsequent follow-up surveys could be conducted to see if the actual implementation of the program had the desired impact. It is critical that policy aspects involve a monitoring dimension.

Q: Has there been any “cross-fertilization” between the SADC Firearms Protocol process and the East African Firearms Protocol process? I know that, in both sub-regions, the police chiefs’ organization has done much of the work; now that the SADC Firearms Protocol has been signed, and presumably many of the same organizations, such as Saferworld, were involved in both processes, how have the two processes influenced each other?

A: Indeed, Saferworld and its partners have been involved in facilitating the processes whereby both protocols came about, although the actual protocols have been drafted by the legal subcommittees of the SADC and EAPCCO. An important point of convergence of the processes leading to the two protocols may be found in the fact that, during the negotiations for the UN Firearms Protocol, donor governments assisted police officers from both the SADC and Eastern African regions to attend the negotiations. I believe that this international process helped to feed the processes in Eastern and Southern Africa, and enriched the discussions and debates in these regions. Conversely, the regional processes likely had a similar influence on the UN Firearms Protocol process.

Another important example of cross-fertilization lies with Tanzania, a member of both EAPCCO and the Southern African Regional Police Chiefs Cooperation Organization (SARPCCO). Tanzania is probably one of the most progressive countries in the region, and its membership in both organizations gives it a catalytic role in both regional contexts. The forward-looking nature of the Tanzanian government, and the involvement of its police officers in drafting the protocols, was helpful.

Presentation by Etienne Krug

During the past two to three years, the World Health Organization (WHO) has changed significantly. The work of the WHO has expanded beyond issues of pills, drugs and diseases, and has become more involved in societal issues that affect health. Small arms represent one such issue.

At the WHO, I direct the Department of Injuries and Violence Prevention, which aims to spearhead global action to prevent violence and unintentional injuries from threatening public health. This work spans traffic injuries, as well as domestic and organized violence. Landmines and small arms also fall under the scope of this work. The Department's efforts include coordination of international science-based prevention efforts; promotion of international research; promotion of improved teaching and training standards; fostering of multidisciplinary collaboration; facilitation of implementation of violence and injury prevention and control activities in various countries; compilation and dissemination of best practices; and collation, analysis and dissemination of global data.

Fatalities, Violence and Small Arms

Among young people, ages 15 to 44, interpersonal violence is the third-leading cause of death in the world,² immediately following HIV/AIDS and road traffic injuries. Suicide is number four, and war injuries are the sixth-leading cause of death. This means that, among the most productive age groups, violence-related causes of death rank very high.

Where do small arms fit in? Unfortunately, the data on small arms fatalities is not available for inclusion in Table 7.1. However, small arms injuries are embedded in the three categories of interpersonal violence, self-inflicted violence and war-related injuries. We hope to have accurate information on small arms-related deaths in the near future. Some estimates have placed small arms deaths per year at approximately 500,000, which would make small arms the 16th to 18th-leading cause of death per year. I suspect that small arms may cause about 700,000 deaths per year, making them the 15th-highest cause of death. Of course, better data are needed before these figures can be confirmed.

Table 7.2 depicts the situation in South Africa (1999 figures). Only injury-related causes of death are shown in the Table. In the case of South Africa, for all ages from 15 to 64, firearms are the leading cause of injury-related deaths. Firearms in this age group kill more people than traffic injuries. We feel that availability of such data is critical in mobilizing decision-makers to address the problem. This type of data indicates that we cannot just concentrate on making the roads safe, but we must also help to prevent people from being killed by weapons. The Department of Injuries and Violence Prevention is working to inform people about such situations, and about the health-related consequences of such data.

² 1998 figures; see Table 7.1.

Table 7.1: Leading Causes of Death, Both Sexes, 1998

Rank	0-4 years	5-14 years	15-44 years	45-59 years	≥ 60 years	All ages
1	Perinatal Conditions 2,155,000	Acute Lower Respiratory Infections 213,429	HIV/AIDS 1,629,726	Ischaemic Heart Disease 887,146	Ischaemic Heart Disease 6,239,562	Ischaemic Heart Disease 7,375,408
2	Acute Lower Respiratory Infections 1,850,412	Malaria 209,109	Road Traffic Injuries 600,312	Cerebrovascular Disease 600,854	Cerebrovascular Disease 4,247,080	Cerebrovascular Disease 5,106,125
3	Diarrhoeal Diseases 1,814,158	Road Traffic Injuries 161,956	Interpersonal Violence 509,844	Tuberculosis 407,737	Chronic Obstructive Pulmonary Disease 1,974,652	Acute Lower Respiratory Infections 3,452,178
4	Measles 887,671	Drowning 157,573	Self-inflicted Injuries 508,621	Trachea/Bronchus/ Lung Cancers 305,982	Acute Lower Respiratory Infections 1,184,698	HIV/AIDS 2,285,229
5	Malaria 793,368	Diarrhoeal Diseases 133,883	Tuberculosis 427,314	Cirrhosis of the Liver 264,117	Trachea/Bronchus/ Lung Cancers 889,873	Chronic Obstructive Pulmonary Disease 2,249,252
6	Congenital Abnormalities 404,849	War Injuries 57,285	War Injuries 372,935	HIV/AIDS 214,571	Tuberculosis 570,513	Diarrhoeal Diseases 2,219,032
7	HIV/AIDS 349,885	Nephritis/Nephrosis 44,640	Ischaemic Heart Disease 244,556	Liver Cancers 205,394	Stomach Cancers 561,527	Perinatal Conditions 2,155,000
8	Pertussis 345,771	Congenital Abnormalities 43,056	Cerebrovascular Disease 195,983	Stomach Cancers 205,212	Diabetes Mellitus 426,964	Tuberculosis 1,498,061
9	Tetanus 302,668	Inflammatory Cardiac Disease 40,802	Cirrhosis of the Liver 142,445	Chronic Obstructive Pulmonary Disease 203,192	Colon/Rectum Cancer 424,463	Trachea/Bronchus/ Lung Cancers 1,244,407
10	Protein-energy Malnutrition 214,717	HIV/AIDS 39,042	Drowning 141,922	Self-inflicted Injuries 178,478	Cirrhosis of the Liver 355,615	Road Traffic Injuries 1,170,694
11	Drowning 125,301	Fires 38,968	Fires 122,666	Road Traffic Injuries 172,312	Nephritis/Nephrosis 307,832	Malaria 1,110,293
12	STDs excluding HIV 118,178	Cerebrovascular Disease 38,349	Maternal Haemorrhage 116,771	Breast Cancers 132,238	Oesophagus Cancers 296,550	Self-inflicted Injuries 947,697
13	War Injuries 103,323	Tuberculosis 38,093	Acute Lower Respiratory Infections 115,100	Oesophagus Cancers 117,352	Liver Cancers 295,756	Measles 887,671
14	Road Traffic Injuries 82,429	Interpersonal Violence 34,938	Rheumatic Heart Disease 104,635	Diabetes Mellitus 104,855	Inflammatory Cardiac Disease 268,545	Stomach Cancers 822,069
15	Meningitis 60,198	Leukaemia 34,503	Liver Cancers 103,131	Inflammatory Cardiac Disease 97,511	Self-inflicted Injuries 227,724	Cirrhosis of the Liver 774,563

Source: WHO / World Health Report 1999 Database

Table 7.2: Fatal Injuries in South Africa, 1999*

Rank	Age Group										Total
	< 1	1-4 years	5-9 years	10-14 years	15-24 years	25-34 years	35-44 years	45-54 years	55-64 years	65+ years	
1	Burn 13	MVA, Ped 69	MVA, Ped 102	MVA, Ped 41	Firearm 891	Firearm 1,299	Firearm 740	Firearm 309	Firearm 134	MVA, Ped 67	Firearm 3,475
2	MVA, Pass 6	Burn 58	Drowning 28	Drowning 34	Sharp Object 506	Sharp Object 825	Sharp Object 463	MVA, Ped 161	MVA, Ped 76	Firearm 61	Sharp Object 2,030
3	Drowning 6	Drowning 51	MVA, Unspec 27	Firearm 22	MVA, Ped 159	MVA, Ped 352	MVA, Ped 300	Sharp Object 133	Sharp Object 62	MVA, Unspec 35	MVA, Ped 1,330
4	MVA, Ped 3	MVA, Pass 23	Burn 21	MVA, Pass 20	MVA, Unspec 152	MVA, Unspec 275	Blunt Object 214	MVA, Unspec 131	MVA, Unspec 50	Burn 32	MVA, Unspec 897
5	Blunt Object 3	MVA, Unspec 18	MVA, Pass 19	MVA, Unspec 18	Blunt Object 127	Blunt Object 207	MVA, Unspec 189	Blunt Object 100	Blunt Object 32	Blunt Object 27	Blunt Object 731
6	Sharp Object 2	Firearm 8	Firearm 10	Hanging 14	MVA, Pass 111	Burn 198	Burn 143	Burn 82	MVA, Pass 32	MVA, Pass 27	Burn 675
7	MVA, Unspec 2	Blunt Object 7	Blunt Object 6	Burn 13	Hanging 88	Hanging 133	MVA, Driv 113	MVA, Driv 72	Burn 29	Sharp Object 23	MVA, Pass 513
8	Firearm 1	Sharp Object 3	Sharp Object 3	Sharp Object 10	Burn 86	MVA, Driv 132	MVA, Pass 94	MVA, Pass 61	MVA, Driv 28	MVA, Driv 19	MVA, Driv 427
9	MVA, Driv 0	Hanging 3	Hanging 1	Blunt Object 8	MVA, Driv 63	MVA, Pass 120	Hanging 67	Hanging 43	Hanging 19	Hanging 9	Hanging 377
10	Hanging 0	MVA, Driv 0	MVA, Driv 0	MVA, Driv 0	Drowning 43	Drowning 49	Drowning 39	Drowning 24	Drowning 8	Drowning 3	Drowning 285

*10 Leading External Causes of Fatal Injuries by Age Group, 1999; Source: Violence & Injury Surveillance Consortium, 2000

Note: MVA = Motor Vehicle Accident; Pass = Passenger; Driv = Driver; Ped = Pedestrian; Unspec = Unspecified

Non-fatal Outcomes of Small Arms

Besides the fatal outcomes of firearms and small arms-related violence (homicide, suicide, accidents), non-fatal injuries resulting from violence, including disability and mental health consequences, are also a significant problem. Small arms affect health in a variety of ways, and treatment of the injury victims of small arms translates into a formidable expense for health care systems. These injuries often occur in countries where the health care system is already inefficient and poor, so that these expenses place an additional burden on the system.

To contribute to the amelioration of this problem, the WHO's role includes caring for victims, as well as providing emergency response, hospital care and rehabilitation, and mental health support. We carry out such work on an ongoing basis. In addition, we undertake data collection on the mortality, morbidity and disability resulting from the mental health consequences of arms-related injuries, and assess the costs to health care systems and communities. We work on implementing prevention programs and policies. The WHO does not participate in weapons collection, nor marking and tracing efforts. On the other hand, our work in the area of small arms stresses pro-prevention activities, concentrating on violence as a general phenomenon. Such relevant activities as instructing young children and working in schools have an obvious impact on the use of weapons.

Evaluation and Advocacy

As a further aspect of the WHO's work, we need to understand which programs and policies are successful, and which are not so successful, in alleviating the harmful effects of weapons. There are millions of dollars being invested in various programs, and it is important to evaluate and know which interventions are effective. This is especially true because data collected in one

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country may help to implement the best possible programs in other countries.

As part of the WHO's endeavors related to reducing the health effects of weapons, advocacy plays an integral role. We feel strongly that, by having information on victims, why they have been victimized, and their situation, we can attract more attention to these problems. We try to put faces on the incredibly large numbers in order to mobilize resources.

Implementation of the UN 2001 Conference Programme of Action

The WHO is also working to support the implementation of the UN 2001 Small Arms Conference Programme of Action (POA). These efforts are centered around Item 3.19, which says that states, regional and sub-regional organizations, research centers, health and medical institutions, the UN system, international financial institutions and civil society shall develop and fund action-oriented research, aimed at facilitating greater awareness and better understanding of the nature and scope of the problems associated with the illicit trade in small arms and light weapons in all its aspects; whenever possible, a basis should be provided for continued advocacy, as well as preventive action and evaluation of such preventive measures. Norway, the European Union (EU) and a few other countries have pushed the need for data collection, involvement of other health agencies, and prevention and evaluation of preventive measures, and deserve special thanks.

The WHO is currently embarking upon a study of the impacts of small arms on health. Globally, despite some data availability, there is a general lacuna of information about how many people are dying from small arms. This makes comprehension and evaluation of, as well as advocacy on the issue much more difficult. On the regional level, data is even scarcer. And at the country level, for most countries, no data is available. In terms of the injuries and health costs of small arms, we have less data than we have for fatalities. There is one study on the mental health

consequences, but, overall, there is very little information available on these effects and costs. The WHO hopes to correct and compile data on the impacts of small arms; create networks of experts dealing with these issues; build data collection capacity; disseminate informational reports; hold seminars for action; and involve itself in prevention activities.

The WHO is presently beginning Phase Two of the study, which involves a partnership with the Small Arms Survey in Geneva. We hope to be conducting surveys to collect data in various countries on the direct impact of small arms - deaths, injuries, costs, social consequences and so on. Future phases of the study will involve developing and furthering partnerships; developing a methodology, in cooperation with our partners; and pilot testing the methods in two countries. By the end of 2002, we should have this part of the study completed and evaluated. We already possess the funding to conduct this part of the study, but we can only continue the study, and expand it to at least eight other countries, if the funding continues. If this is the case, then a more complete report, with the results and evaluation of the expanded study, will be completed by December 2004. The data should be very useful for policy-makers, and will be released throughout the study, as it is obtained.

Small Arms: One Aspect of a Larger Problem

Although the efforts of the WHO's Department of Injuries and Violence Prevention focus primarily on small arms, this issue should be viewed within the context of the larger problem of violence in general. The work that we are doing on small arms should be integrated into broader violence prevention efforts. In this way, violence needs to be examined in terms of the variety and complexity of its causes, at the individual, family, community and environmental levels.

At the individual level, for example, being a witness to or a victim of a violent act(s) may cause violent behavior later on.

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Social skills problems, or possession of a firearm at home, may similarly contribute to violence at the individual level. At the family level, poor family cohesion, poor monitoring of children, lack of parental skills and male dominance could bring about violent behavior. In the community, low community cohesiveness, negative peer influence and the isolation of women in the community might encourage violence. Finally, at the broader environmental level, we could point to the gap between rich and poor, ethno-cultural heterogeneity, availability and social acceptability of firearms, and impunity as possible causes of violence. These are all merely examples, which should serve as a reminder that, while our work on small arms is very important, we also need to address the root causes of violence in order to alleviate the underlying problem.

In 2002, the WHO will release the *World Report on Violence and Health*, which represents a significant step towards integrating the issue of small arms into a broader context of violence prevention in general. The report will deal with the subject of violence, and will also explore the role of firearms and small arms in contributing to fatalities.

The WHO is developing a framework for action that will lay the groundwork for future activities at the national and international level. We are compiling best practices for violence prevention. We are also providing services for victims. These are the activities that we are pursuing in support of implementing part of the Programme of Action. We realize that we are only one actor in the overall picture, but we think we can contribute through collection of data and subsequent encouragement of other work in the areas of small arms collection and destruction.

Questions and Comments

Q: Do you know which countries you will choose for your survey? What criteria will be used in selecting these countries?

A: We do have some ideas about countries to use, but our choice has not yet been made and remains flexible. The first criterion is that the country should have little data already available. Secondly, we are looking to study countries where small arms are known to be a large problem. Our criteria are as such for practical reasons, for we want to contribute to filling the gaps in the data, and also to conduct surveys where a problem actually exists. We cannot conduct surveys on the impact of small arms if there are nearly no small arms-related injuries or deaths.

Having said that, we are discussing the possibilities with Colombia and Brazil. South Africa, Cambodia and Mozambique are all on the list of potential countries for the survey. We are also considering Sri Lanka as a candidate. An important additional criterion for selection is that it is desirable to have strong local partners in a potential country of study. The WHO and the Small Arms Survey cannot go into these countries and collect all of the data on their own. So, one of the ancillary objectives of the study is to strengthen the capacity of countries' academics, NGOs and governmental institutions as they conduct the project with us.

In the countries that I listed above, we have partners with whom we can work. These countries also have large small arms problems, and a demonstrated need for better data. At the same time, we know that donors have variegated interests regarding certain countries with respect to other countries, so we have left the decision open for now, although Colombia and Brazil will probably be the subjects of the pilot test of the project.

Q: Could you speak about the upcoming meeting at the WHO?

A: Thank you for giving me the opportunity to discuss an important meeting, to be held tomorrow and Friday at the WHO, that will bring together, for the first time, all UN agencies interested in interpersonal violence prevention. There is presently

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little communication between these agencies. We are trying to facilitate increased contact between the agencies, regarding their current work, and discussions on potential for inter-agency collaboration on data collection, research, country activities and prevention. We hope that the meeting will produce some strong links that lead to complete cooperation. A publication describing the agencies' violence prevention activities will also be compiled. We are very pleased to have the full support of the UN Secretary General, whose message to the meeting encouraged agencies to be involved, and to strengthen the links between themselves.

Questions and Comments for all Presenters

Q: Mr. Markram, with regard to discussions in the First Committee, did the current debate on terrorism have practical consequences for the issue of small arms, in terms of the resolutions or the topic in general?

A: Fortunately, we had a Chairman in the First Committee who favored a standalone resolution on this issue. The introduction of a resolution in support of the role of multilateral collaboration on disarmament in dealing with global terrorism provided a basis for action on the issue. This resolution averted the need for many resolutions, dealing with each aspect of the entire spectrum of disarmament. Thus, the debate on terrorism did not have a direct impact on small arms discussions in the First Committee, although the issue does span the whole spectrum of disarmament.

Q: First of all, I would like to again commend Japan and South Africa for their efforts in agreeing the resolution in the First Committee. I think we managed to fulfill our original goals of garnering international support behind the results of the UN Conference in Prague, obtaining numerous sponsorships, and passing the resolution by consensus. The

political capital appears to be present; now, I believe we must concentrate our efforts on the practical side of implementation. Further debate on concepts and purposes is unnecessary, because these are all laid out in the Programme of Action.

There are a variety of recommendations and actions that states could be acting upon now to implement the POA. We need to create pressure so that states take these steps, which include creation of national focal points for international cooperation and coordination, and coordination of national institutions working on the illicit trade of small arms and light weapons. The POA also gave the UN a mandate to produce a study on tracing. Likewise, the UN should be collecting better information on the way in which the POA is being developed in different countries. Different international organizations could also be working with countries to promote action on various elements of the POA.

I approve of the proposal for a project in Colombia. In your study, you mentioned one program that has already been carried out in Cali, and I believe that the results of the program offer strong evidence of the direct link between violence and small arms availability. The program was a simple one, instituted by the city's mayor about three or four years ago. He decided to emphasize arms collection, and asked people not to carry their arms with them during weekends. When this plan was combined with a policy of reduction in sales of alcohol, crime levels in Cali decreased significantly. I think that examples like this show that action on the recommended measures of the POA, by governments and civil society, can have a rapid effect in forwarding the goals agreed at the UN Small Arms Conference.

A: Following these comments, I would like to point to two current activities in the areas of conflict prevention and small arms. First, the Government of Japan, along with the United Kingdom,

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has established a fact-finding mission on conflict prevention measures. Secondly, a Tokyo forum meeting, on the UN 2001 Small Arms Conference, is planned for the 23rd through 25th of January 2002. We hope this conference will contribute to the implementation of both the Programme of Action and the First Committee resolution.

Q: With regards to Dr. Krug's presentation about the WHO, I can say that the Small Arms Survey has received strong support from its governmental and NGO partners for the first year and a half of the project. There are also numerous new projects underway, including some projects with Saferworld, and the Institute for Security Studies, South Africa. I feel strongly that we have taken Ambassador Reyes' appeal to heart. Much of the work in upcoming projects, particularly in light of the WHO's efforts, will concentrate on generating new data on the impact of small arms, so that intervention policies may be developed that effectively deal with this global scourge.

Q: I am pleased that the First Committee resolution went through with the UN study on tracing included within its scope. It is important that it was approved by consensus. However, in examining the Programme of Action itself, there are a number of paragraphs, aside from the paragraph in section four, that deal with the issues of marking, tracing and record keeping. These aspects are at the heart of the French-Swiss initiative, and I believe it would be possible to explore implementation or further validation of these other paragraphs. The French and Swiss are currently thinking about how to help this happen.

Q: Dr. Krug, do you think that the figures on fatalities in South Africa, displayed in Table 7.2, are typical for other countries at similar levels of economic development? How does South Africa, a country where small arms issues are of

first priority, compare to other, more “peaceful” countries, where traditional health problems are more significant?

A: It should be kept in mind that Table 7.1 depicts all causes of death, while Table 7.2, on South Africa, represents only injury-related fatalities. So, in the case of South Africa, in the overall picture, I suspect that HIV/AIDS would rank higher than firearms-related deaths. However, Table 7.2 does show that firearms deaths are still more numerous than traffic-related deaths in South Africa, for ages 15 to 64. This indicates that, overall, firearms-related deaths would still rank very high in South Africa.

In terms of other countries, we do not have adequate data to speak quantitatively or comparatively about causes of deaths in most countries. We do know that firearms-related deaths in Colombia, Brazil and El Salvador, and probably in other countries, are extremely high as well, probably even higher than in South Africa. Hence, South Africa is not an isolated case. The project that we originally embarked upon aimed to map this kind of information for the entire world, but some donors, such as France, told us that our goals were overly ambitious for a \$3M project. We subsequently reduced the scope of the project.

Q: What is the proportion between different types of gun-related deaths, such as suicide, homicide, casualties of war, and so on?

A: In less developed countries, the proportion of homicides to suicides is relatively high, in relation to more developed countries, where the proportion of suicide deaths to homicide deaths is higher. The United States is an outlier, with a nearly equal proportion of homicide deaths and suicide deaths. Brazil also has more homicides than would be expected, according to this pattern.

Q: What is the proportion of injuries to deaths?

A: This is a difficult question. A number of studies have looked at this question, particularly in the US and developed countries. In the US, there are 2.7 non-fatal injuries for each single death. I believe there are about 25,000 gun deaths every year there, and about three times as many people who are shot and survive. In terms of other countries, similar studies do not exist, so we do not know exact numbers for these countries. The proportion in the rest of the world may be higher, on average, because of the large number of suicides in the US; there is a 99 percent rate of death associated with suicides.

I would estimate that there are easily more than 1 million non-fatal injuries in the world, due to small arms, each year. There are probably several hundreds of thousands of deaths caused by small arms each year as well. We hope that our future studies will allow us to be more precise when quoting these figures.

Q: To add to Dr. Krug's comments, in terms of the work the Small Arms Survey is performing in conjunction with the WHO, we have observed an interesting phenomenon whereby a very high proportion of the firearms-related deaths in South Africa and Brazil are caused by handguns. This is contrary to the accepted understandings of prevailing methods for both countries. AK-47 rifles are commonly understood as causing most of the firearms-related deaths in South Africa. In fact, handguns cause more than 80 percent of firearms deaths in that country. In Brazil, the situation is very similar. So part of the work being done by the WHO and the Small Arms Survey, in order to identify some of the dimensions of the health impacts of small arms, involves destroying certain myths and deciphering the data to determine what types of weapons are being used.

Q: I would like to briefly highlight some of the relevant activities of the Centre for Humanitarian Dialogue. We have

established a program, on human security and small arms, with numerous component projects. One of these projects involved a workshop, which attempted to build on a survey that was carried out last year by the Small Arms Survey, aiming to encourage humanitarian organizations to gauge the impacts of small arms proliferation on their work. This is an ongoing collaborative effort with the Small Arms Survey, as well as many other humanitarian, development and relief organizations.

Another project that we are undertaking, in cooperation with the Quaker United Nations Office, seeks to add to the discussion about the driving factors behind the demand for small arms, with a special focus on South East Asia. The project aspires to inject new ideas into current understandings of the reasons for demand, and will be influenced by a workshop in the region.

Finally, a number of organizations are convening a meeting, in Nairobi, which intends to mobilize the humanitarian, development, public health and NGO communities to build the international network on small arms. The meeting will host over 120 people from these various organizations, and will try to assess the situation of this community vis-à-vis the small arms issue, and how the issue is affecting their work. It is hoped that a plan of action will be developed among the organizations in this particular community.