



**World Health
Organization**

**UNITED NATIONS CONFERENCE TO REVIEW PROGRESS
MADE IN THE IMPLEMENTATION OF THE PROGRAMME OF
ACTION TO PREVENT, COMBAT AND ERADICATE THE
ILLICIT TRADE IN SMALL ARMS AND LIGHT WEAPONS IN
ALL ITS ASPECTS**

STATEMENT OF THE WORLD HEALTH ORGANIZATION

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Mr Chairman, Excellencies and Distinguished Colleagues, Ladies and Gentlemen,

The Programme of Action clearly frames State's primary concern as a determination to reduce human suffering.

This determination requires that our objective should be that fewer lives are lost, fewer hopes and families are devastated, and fewer communities are pervaded by fear.

This is not a trivial challenge. Neither is it one that can be met through arms management and disarmament strategies alone.

In a number of countries armed violence is *the* leading cause of death among young people. Lifelong psychological impacts, permanent disability, and shattered family structures are but a few of the consequences of armed violence. At this moment, around the world, health personnel are struggling to save victims of armed violence, drawing down on costly resources that are devoted from strained health system budgets. WHO's *World report on violence and health* has shown clearly that interpersonal violence disproportionately affects lower and middle income countries. These health and other costs are shouldered particularly by the settings that can least afford them, directly eroding long term development prospects.

That, ladies and gentlemen, is the multi-faceted challenge that we face. The Programme of Action sets out a comprehensive framework for addressing this challenge. We are now gathered 5 years after it's inception, and the question we must ask ourselves is how comprehensively have we implemented this framework? Without question the supply side has received attention, but how fully have we implemented the call for simultaneously addressing the issue from the supply *and demand* perspectives? How much effort and resources have supported the call for action-oriented research? Are fewer lives being lost to armed violence today than 5 years ago?

These questions have been the focus of increasing scrutiny, and there has been a very welcome broadening of engagement with the issue, particularly over the last two years. I'd like to mention a few of these that give WHO grounds for optimism: Resolution 60/68 brought forward by the Government of the Netherlands and adopted last year in the First Committee highlighted the importance of the linkages between development and small arms. The recent OECD Development Assistance Committee decision on the issue has cleared the way for development assistance funding to now be allocated for small arms related programming. And finally the Geneva Summit on Armed Violence and Development led to the adoption of the Geneva Declaration which among other things commits governments to enacting programmes to prevent armed violence and to achieve measurable reductions in the burden of armed violence by 2015.

Driving down armed violence is the most direct way of addressing the demand for small arms. Studies have shown repeatedly that the primary factor influencing demand for firearms is the perception of insecurity within one's community. Studies also show that violence can be prevented. More importantly, the strategies to prevent violence are

neither akin to addressing the fundamental challenges to humankind, nor are they unrealistic. In fact, they tend to be highly cost-effective and fall well within the social programming and policy making capacities of governments to enact. Educational incentives for high risk youth and social development and life skills training demonstrably reduce violence. So do programmes focusing on strengthening family relationships such as home visitation, parenting programmes and family therapy. A number of other strategies appear promising, such as reducing availability of alcohol, pre-school enrichment programmes and improving school settings.

I referred earlier to a number of undertakings that had broadened international engagement with the small arms issue and that have occurred in parallel to the Programme of Action. They demonstrate that there is scope for action and commitment by governments in parallel processes that directly support a more comprehensive implementation of the Programme of Action.

This multi-track broadening of engagement with the issue seems to WHO to be both pragmatic and indicated given the multi-faceted nature of the challenge.

The WHO's *World report on violence and health* summarized the evidence base for effective violence prevention and showed unequivocally that preventing armed violence requires multisectoral collaboration between experts in diplomacy and development, justice and public health, human rights and education.

The benefits of this kind of collaboration are precisely why the World Health Organization and the United Nations Development Programme are working together on the Armed Violence Prevention Programme. The overall objective of this programme is to promote effective responses to armed violence through support for the development of an international policy framework founded on a clear understanding of the causes of armed violence and best practices in preventing armed violence.

This action-oriented collaboration is a model example of the partnerships and complementary approaches called for within the Programme of Action. The UNDP brings strong programming capacity and obvious capability in community development to this effort, whereas WHO contributes an informed understanding of the factors driving armed violence, a series of violence specific technical tools, and analytical expertise.

Mr. Chairman, ladies and gentlemen,

Last year at the second Biennial Meeting of States the World Health Organization asserted that we effectively have two choices before us. One way is to continue much as we have done, limiting the focus of this process to the largely normative and legal frameworks that deal with the supply of small arms. The other is to more fully leverage the available resources, competencies, and capacities relevant to the issue by developing a coherent and comprehensive response to the call in the Programme of Action to simultaneously address the demand for small arms.

There is a very real human cost to limiting ourselves to the first path. Without sound interventions to prevent armed violence the projected future for people living in some

violent communities across the world looks particularly grim. Preliminary data from the City of Cape Town and Burden of Disease Unit of South Africa's Medical Research Council shows a young man celebrating his 15th birthday in the settlement of Nyanga would have a greater than 1 in 20 chance of being shot dead by age 35. In an even more desperate setting, published data from Colombia shows a man celebrating his 18th birthday in the Department of Antioquia would have a greater than 1 in 20 chance of being shot dead by age 25.

Quite simply, those are staggering facts. They speak of a reality far removed from this venue, a day to day existence fraught with fear and uncertainty, where the individual demand for a weapon becomes a rational response to the challenge for survival, where international agreements and instruments are distant happenings, and the phrase human security is reduced to an empty concept.

Mr. Chairman, ladies and gentlemen, what we all have in front of us this week and next is the opportunity to move this process down the second path, where the prospects of people living in those communities are no longer relegated to some hopeful outcome of a political negotiation, but rather seen as the central reason we are here.

Thank you Mr. Chairman.