

# Transcription of: Webinar: Explosive Ordnance Risk Education and COVID-19

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Webinar by the EORE Advisory Group. Transcription by Hal Judge, ASEAN Regional Mine Action Centre (ARMAC)

**00:00:07** Introduction by Hugues Laurence, Child Protection Specialist, United Nations Children's Fund (UNICEF) and Co-Chair of the EORE AG

Hi everyone, welcome to this first webinar on explosive ordnance risk education and COVID-19, EORE/ COVID-19. Thanks for joining us despite the very brief, the very short notice you had, just a few hours to plan this participation, so thanks for your flexibility on that.

My name is Hugues Laurence, I work for UNICEF and I am the co-chair of the EORE Advisory Group, and I will just introduce you to the way we will organise this webinar that we will handle in the coming hour.

So, I will start with a brief introduction to set the scene and then give the floor to Kaitlin Hodge. Kaitlin is working with the GICHD and she will handle all the logistics of this webinar so she will brief you about all the different features that we will be able to use, then we will move onto a few presentations. We have a very interesting panel of colleagues from the UN side, from the NGO side, both international and local level, and I will introduce them one by one afterwards. Then after that we have a Q & A to the end until we wrap up and conclude the webinar.

Let me first introduce you and set the scene for the coming hour. Why did we decide to organise this webinar? I think there are two key dimensions that justify this webinar. The first point, the first dimension, is that COVID has tremendous consequences in terms of disrupting our programming our EORE programming activities. That's one dimension. The second dimension that we will explore today is about how our sector can play a role in terms of the COVID-19 response. We may have a special role these days and in the coming weeks and probably months. Apparently, in light of this COVID-19 crisis, the most effective way to mitigate the impact of the COVID is through behaviour change and it is precisely our specialty, our expertise: behaviour change is an outcome for EORE. But of course, it is not easy, as many other sectors, whether it is HIV, WASH, road safety, prevention of child marriage, etc.

The first instinct, the preferred approach that we have is to use face-to-face approaches for behaviour change. But this won't work these days as we have limitations precisely due to COVID, so we need to be creative. The goal of this discussion, this webinar, will be to take stock of the impact of COVID on our EORE programs and to discuss how we can adapt our EORE sector to

maintain our activities or to support COVID risk education efforts, or even to combine both, EORE and COVID-19 risk education efforts.

A longer-term objective or medium-term objective would be to develop some global guidance, that would be the responsibility of the advisory group, the EORE advisory group, with your support, with your input, with your help. I am talking about the broader EORE community.

We still need to discuss with the members of the EORE advisory group to which extent we want to go on that, but the idea is to develop some kind of guidance that would be beneficial for the entire sector. So that's for the longer term. Let me emphasise as well, some ground principles for this webinar. The first thing is that, I should clarify that we will discuss EORE in relation to COVID, but we won't have a general COVID-19 discussion. We are not, ourselves, health specialists. So, we won't dive into this COVID-19 messaging. That's not the purpose. It's really about EORE in light of the COVID response.

This will be a brainstorming, so feel free to participate, and you will see as part of the zoom functionalities, that you have 'Q & A' feature, and a 'Chat' feature. So, I will encourage you to, starting from now, use these Q & A and chat functions. Kaitlin will explain more about that, but you can already start.

As well there is a poll: there is one question and it is on the screen, and this is primarily for the field, so we encourage you to participate in this poll. It is a first experience, it is a first webinar, we think there will be more webinars in the coming weeks, so this is the first one, it is a test, and we will try to improve that as it goes. It will be recorded. I received a number of messages from colleagues, from partners, like from Vietnam or Myanmar. It's already too late there, so they won't be able to join but we will have a recorded version that we can share afterwards. One more point on the Q & A, please send us your questions, your points as well in the chat box and even though we cannot address all these questions and points we will make sure we have a package we can share with all of you in the coming day with the support of Kaitlin.

So without further due, I would like to give the floor to Kaitlin so she can explain to us in more detail the logistics of the webinar.

Go ahead Kaitlin, thanks.

### **Kaitlin Hodge**

Thanks, Hugues. Give me just a second and I will get a slide up here for you.

So as Hugues explained this session is being recorded. That includes both the visuals and what is being said in the chat box. We have also automatically muted your microphones, but that doesn't mean that you can't engage; it's just a practicality purpose for a group this big. So the two ways that Hugues mentioned you can engage is through the Q & A feature and the chats. So

Q & A, meaning questions and answers. There is an icon at the bottom of your screen and that's where you can use to share questions with us.

The panellists will try to monitor this and when possible answer the questions. That could be through written answers or verbally in their presentations. As Hugues said we won't have time to get to all of the questions, and we likely won't have all of the answers yet - this is just the beginning. But of course the questions will inform future guidance and future webinars, so please ask away. You can share your questions at any time. You have the option to share them anonymously. And just so you know everyone will see the questions that you share, of course anonymously if desired.

The other option you have is the chat box - the icon also at the bottom of your screen. You can use this to share messages, for example, if you want to introduce yourself. We encourage you to update us on how your organisation is responding. Also you can use this to tell us if you are having technological challenges, you can't hear, it's going too fast.

I will be monitoring this chat, especially to hear of the tech challenges, but likely the panellists won't be able to read it until after the webinar, so just keep that in mind. The questions is the best way to get a question highlighted quickly. If you select in that chat box to send your message to all panellists and attendees which we encourage you to do, everyone will see what you post here, and it will appear in the recording as well. That's all on the logistics and so with that I'll hand it back to Hugues.

### **Hugues Laurence**

Many thanks Kaitlin, for this crystal-clear introduction. As Kaitlin mentioned, you can even send an anonymous comments or questions if you feel slightly not confident or you think it's sensitive, so please you can use this feature as well.

Generally, as I said, this is brainstorming, we are in a learning curve, this is a completely new situation for all of us so we need to learn from each other, from everyone, so please don't hesitate to raise your points and ask questions and raise your concerns as well.

Without further ado we will start with our very distinguished panellists, with first, the NGO world and I would like to give the floor to Sebastian Kasack, Co-Chair of the Advisory Group and as well representing MAG, so please Sebastian, over to you.

### **00:12:52 Sebastian Kasack, Senior Community Liaison Advisor, Mines Advisory Group (MAG) and Co-Chair of the EORE AG – "EORE and COVID-19"**

Thanks, Hugues, looking forward to all the questions coming from the field and I see that we really have a large range of countries, and common names and friends, so hey to everyone.

I would switch now to a presentation and I prepared a little PowerPoint and I hope you can all see that.

We want to take you a bit into what's the situation for MAG and of course some considerations for all operators, I think we are struggling with, so let me go right into it. We as MAG have been doing risk education in 16 countries but as of this morning, we are down to one country as still implementing in the field and thinking how to start or restart in more remote ways. Some countries are actually on a usual break stand down, extending this period a bit to make a decision later but mostly we are shut down by local authority decisions and the guidance coming from our ministries and the last one today, Vietnam, was for the whole country to shut down. So, in some countries we felt in our own risk analysis that it's wiser to stop operations and I guess that's all of the situations there is.

The communication language used by the COVID community is led by WHO, from health practitioners is similar but not the same, so I thought that was interesting to see if we think to integrate COVID-19 messaging or not. They call it risk communication and community engagement, we call it risk education and community liaison. So, is it easy to integrate or not? At first sight, yes, we have a lot of experience with many aspects like lack of knowledge and how to deal with this. At the same time there is a lot of misinformation, myths going around, such as this is "The white man's disease". Then we have the behaviours that range from acceptance of the mitigation measures to outright rejection. So, we are known to this as well. We have reckless people that don't want to listen, who take risks --- or they are forced to take risks, so we are very well known to this. Forced in the sense that they need to continue do their job, they prefer to, I mean, you know, don't need to go into detail.

So, this all leads to a change in life patterns due to a new risk, that's what we have been dealing with for the last 30 years. And the question we can ask ourselves is does COVID-19 put people at more risk or less risk from exposure? And probably we will find different answers to this. Of course, lockdown will reduce the risk. On the other side, the ones I mentioned among the forced, and in poverty situations, so having to go out, maybe even venture further than before may be more at risk. It is a sensitive subject. People don't want to be stigmatised, seen as bringing the disease, being the first one in the village or whatever. For us we are used to it, people fear retributions and sometimes it does go that far there have also been attacks on people who were coughing, sick, and so on. There are a lot of similarities, however, the stigma is an additional damage, in this sense we have no need to face in the EORE community, we can learn from HIV, from Ebola and so on. Stigma is something I think we need to learn, how to work on it. We have experienced community level work but the spacing is the big question, group meetings, how to do that safely, in case we can operate.

We need to, if we give messages, to wash your hands, do people have access to water, do they have soap, what is the situation in that community? It should be realistic, locally adapted. So, focus our work on the most vulnerable, I just saw Afghanistan mentioning, yeah we work on the

borders, because we think that this is the biggest risk, same for Myanmar as migrants are coming back from the Thai side in the tens of thousands.

Key considerations for MAG, the health and wellbeing of our staff and families is our number one priority with regard to any action that will aid the reduction of the spread of the virus. So, are we becoming a vector by going into communities? That is something we need to consider: is it a risk or not? Definitely all staff in the sense need to be trained in the sense of COVID-19 response we have to start practicing safe behaviour internally, set up our SOPs, work through our existing family and further networks, summarise duty of care. The mitigation measures need to be in place, also like driving cars, what's safe distancing and all these things are changing our work. We should support more further options for remote working. Do people have laptops, have internet connection at home, do they have phone credit to actually make the call, etc.? This will not stop now with the operations being shut down, we will start thinking again, when can we restart, what are the right conditions to restart, all these criteria are in the open, but in MAG we are just discussing it as we speak.

Key consideration two. We will continue to deliver operations if it is both safe and permissible, and that's the big question because there are so many unknowns about COVID-19 and how it is really passed on. So, if we continue face to face messaging, let's see how we can integrate COVID-19, if the organisation agrees to do so. We need to adjust our ways of working and innovate. So, I think we will have some examples from other partners in this call today. Definitely start or enhance the use of mass media, digital, social media, why not think of print media as well. The big question for us is, do we incorporate COVID-19: yes or no and to which extent? Basically, one thing I would say is leave the mass messaging to the pros for two-way messaging on radio for example. We are, as Hugues said, we are not health specialists and we cannot properly answer questions if there is a question raised.

Key consideration number three. We as MAG, are engaged in dialogue with our donors, they remain hugely supportive, and they understand the challenges and you'll see how this develops now over the coming months. But this may mean, ok maybe we need additional different funding to enhance EORE via mass and digital media, maybe we can reallocate some of the money we are not spending right now but of course we don't want to put people out of their jobs and the operational continuity comes first.

Key considerations four. The threat will lessen but the threat posed by landmines continues. It will lessen and people will get used to it but we also know there may be phases of outbreak again and so I think our work will not be the same in the future as it has been in the past. Let's stay focused, do what we know how to do best, and let's make sure that we maintain contact with our staff, do welfare checks, coping mechanisms. But COVID-19 will not go away. So, we really need to be prepared and that is why we are doing this call.

Take aways, final slide. So, first of all, do no harm, do not become a vector yourself, do not spread the disease, have SOPs in place for organisations for transport, spacing in the office, if

you work from home, what's the support. We should not force people to work in communities if they don't want to, so it becomes a bit of a volunteerism instead of we are hiring people, but if they are scared, we should not force our staff if they don't want to. And then there are already communities that do not want to see us, so we have to make sure first, do they actually want any visitors, if so, how do we visit safely and we have to be an example of applying the health and safety protocols.

More practically, reduce group meetings, do more house-to-house visits, other people said no we can't do house-to-house, but one doesn't need to go inside the house, you can keep distances, enjoy the fresh air. Keep groups small, ensure the physical distancing, wear masks, but masks and talking through a mask is not that easy so let's see what the best protocol then really is and explain why we do this, be an example yourself. Set up handwashing, control space, people who can join a meeting and not. Has to be much more rigid than we are used to. And again, let's be creative, let's find alternatives to continue the support for those most vulnerable and exposed to the exposed ordnance threats so, lets stick to what we know how to do best.

## Hugues

Thank you, Sebastian, that's a very great presentation. It's very informative and thanks for sharing all of your takeaways. I have a call for all participants, and I would encourage you to use the Q & A box. I have seen so far very few questions so please don't hesitate to use this Q & A box during this discussion. However, the chat box is very intense, it's amazing to see all these contributions from so many different countries, so thanks all of you for participating in the chat discussion and for the few participating in the Q & A. So, please don't hesitate to continue using the chat box and the Q & A.

Now I'm pleased to introduce the next speaker, as we all know local NGOs are in the forefront of the EORE work, we have actually thousands of local NGOs involved in EORE throughout the world and we wanted to give them an opportunity. The next panellist is Mr. Ahmed Al-Zubaidi from IHSCO. I will give you a chance to unpack the acronym of IHSCO. Go ahead Ahmed, you have the floor.

## **00:25:49 Ahmed Al-Zubaidi, Director, Iraqi Health and Social Care Organization (IHSCO) – "IHSCO EORE COVID-19 Response"**

Thank you so much and thank you for everybody attending this webinar which is really very critical in this time and I hope everybody stays safe, sound and healthy amidst of this crisis. My name is Ahmed; our NGO is Iraqi Health and Social Care Organization, which is doing risk education as part of many other activities. I will try to be very short and succinct in our presentation and hopefully that if we have any questions, then we can answer afterwards. I will just share my screen now.

The context in Iraq is similar to many other contexts in new aging in different countries of the world so. It is hit actually by the curfews that are imposed by the federal and local governments on the different provinces and governorates in Iraq. Even though some of these governorates are not hit by the COVID crisis as a preventative or precaution measure. So these curfews impacted the movement and accessibility of operations according to the original plans in risk education. We had to adapt to the situation, try to work with the possible movement available and try to lobby the government to give exemptions or access letters to support the movement of risk education teams while they do both risk education and COVID, brief COVID messaging to the communities. And that inaccessibility, it creates a lot of logistic and financial obstacles and challenges in terms of mobilisation, reaching of resources, of different types of payment for supplies of materials and even the cash flow, the payment of salaries of people working in different places. The health concerns of spreading the virus, actually, the risks that are posed on the teams themselves, because they are dealing with tens of hundreds of people and then the fear for spreading the virus themselves if they operate in a certain area that is contaminated, and they don't know while they move from one area to another. So, that was a real concern for the health and safety of staff and the beneficiaries. The curfews have also impacted on the shutdown of the government departments and the communications with the different local and federal authorities in order to get different services. For example, the communications with the minister of health, for example the governor offices in different areas, getting some information or exchange of information etc. Even on the private sector, if you have supplies of different materials, printing materials, sending RE SMS through the telecommunication companies, all was really hit by the shutdown and the curfew that started around a month ago.

So, what did we have to do to adapt to this situation? We started with, after consultations with some of our donors and partners, actually we had to do door to door sessions considering that we follow some of the health instructions. Let's say: distance between beneficiaries and teams and among the beneficiaries themselves, the number of group to provide risk education to, combination of the RE messages with the COVID messages, basic messages that we got from WHO and from training by our medics working on other programs, liaising with the department of health in order to get some of the up to date messages in terms of COVID for safety of our staff and people. That is associated with the distribution of what we call RE COVID hygiene kits. These hygiene kits compose of soap, as you can see in these photos, hand soap, different hygiene materials that are distributed with RE stickers on each kit, and these are provided to people while teams go around and give RE COVID short safety briefing messages or emergency messages.

We were also taking into consideration the escalation of the issue and the stricter curfew and movement restrictions that we can get from government. As we expected actually, today DMA asked RE operators or mine operators actually, to stand down in the field, so even before that we were very much prepared and we started actually working on other methods. We focused on different media channels. So one of them is the mass media that we had in agreement with the Iraqi educational satellite channel and you can imagine that all the pupils and students are at

home, studying from home and they should watch that educational channel. IHSCO have 4 TV spots and we have the agreement with the educational channel to broadcast these short 4 to 5-minute spots each one, to show it on the satellite channel so that it has more exposure to people.

Small media would be distribution of the available printed materials apart from the stickers, the leaflets, the posters etc. We also in other projects supported by NMAS actually we installed big screens in IDP camps which are under the health centre and the camp management direction and maintenance and protection. They show RE materials - the tv spots - that we have, some key messages plus some health messages that are provided by the camps by different NGOs operating in the camps and by the minister of health. And now we are trying to get COVID messages incorporated in the same, let's say, screen program that we have for people inside IDP camps.

And on social media, we tried many channels actually, to spread. We created for example a Youtube channel, Telegram account, linking all these to Facebook, spreading the messages (COVID and RE messages) on Facebook, on our Facebook page, IHSCO Facebook page and we are still in the process of exploring different methods actually, in order to reach as many people as we can through the social media.

We also had road shows. We had different techniques in Iraq like many other different countries in the region and worldwide. It is distribution of gas cylinders by certain trucks. Two weeks ago, actually, we agreed with some of these suppliers to use our billboards, to be fixed on them, and these are not affected by the curfews, so once they are moving around everybody can see it. They received a presentation and kind of a short training on risk education and they are urged to try and spread the message, and they are all still advised on COVID safety because they are dealing with many people, they need to be very cautious about the situation.

The other thing is that under, another UNMAS supported project, we did what we call a kind of RE delivery scooter, which is a scooter driven by a volunteer and this volunteer, by the way the scooter is electric, so its environmentally friendly. Each scooter has a small box with RE materials in it, and the volunteer is trained on providing RE and COVID, and he has a loudspeaker which contains short RE messages. We included, we just incorporated short COVID messages also to this loudspeaker program. So, they move around and talk to people. This is one of the key things actually that from previous projects: it's key to mobilise community resources that are available, and I think during development and even emergency projects we need to consider involvement and capacity building of local community members in risk education and community layers for such crisis or any other type of emergency work and even for development.

We have some lessons learnt actually from this process, that we would like to share although it is very short that we have almost a month, we think it is very good to share with the other actors. Before doing such activities with the people we need to get our staff trained professionally on COVID or any type of endemic or pandemic or whatever issues that we have in order to ensure

their safety and ensure not to spread the virus among the community members. The other thing is that it is really hard to measure the impact of these different emergency methods considering the time scale that is available and the context with the movement. It's not free to move very frequently and it is really hard to capture some data and it is very short time that we are manoeuvring. As I said community networks are really important. In previous UNMAS supported projects we had two programmes for what we call Community-based Risk Education volunteers who are adults in order to reach as much adults as we can. The other one is risk education youth ambassadors. They worked perfectly during the project and now we realised during emergency that they are good resources to mobilise to support our activities within their communities.

RE activities can be utilised for other humanitarian response purposes. COVID is one of them and I think other experiences in the world, and other crises it is crucial and I think some experiences, some successful experiences, have proved that, and I think it is something we need to consider for the future, with the integration of RE within other humanitarian responses.

Innovation with any kind of new methods that are context-specific are really key to emergency and we need to keep all this in mind actually. Mine Action or RE actors should always keep in mind, but in such contingency plans in terms of their risk management for similar things to happen in the future, and I think it is a good lesson learnt from different perspectives. Thank you so much.

## Hugues

Thank you so much Ahmed for this comprehensive overview of your work in many parts of Iraq. That was extremely informative. I apologise for not using the right name earlier, so your right name is Ahmed Al-Zubaidi. I left your business card in my office and that's why I completely forgot your name. Thanks Ahmed, this is a great presentation and thanks everyone for participating in the Q & A and the chat, so if you have any questions to any given panellist please raise them through the Q & A or if you prefer through the chat box. I would like to now give the floor to UN colleagues, and I will start with UNMAS. Paul Heslop is leading UNMAS programs globally. Paul you have the floor for this EORE COVID response, thank you Paul.

## **00:42:09 Paul Heslop, Chief of Programme, United Nations Mine Action Service (UNMAS)**

Thanks, Hugues. Well I am glad to be going after Sebastian because Sebastian covered nearly all of the issues that we have got so that will allow me to be much shorter. I think he summarised most of the issues really well. Two weeks ago, two and a half weeks ago we started to look at incorporating COVID materials into our risk education packages being given around the world and very quickly we got overtaken by a lot of the issues he raised in terms of social distancing and social separation, not bringing large groups of people together and having the right materials. Our guidelines, or the direction from headquarters to the field in regards to guidelines was very much to use WHO material where possible and certainly sticking to the messaging and

the guidance that has come out from WHO and UNICEF to a degree. And we are also looking at how we can incorporate materials either as part of explosive ordnance risk education or actually just completely swapping it out and using slots on radios or different media that we have access to just to do COVID education.

But the situation is changing so quickly on a daily basis across the programs that its now virtually impossible for us to maintain any sort of tempo with regards to this issue, and we are going to have a call from our program managers today and see how we can adjust and whether its even going to be possible to continue to do risk education. Across the world in terms of clearance operations we have very little left now, a week ago we had nearly every program working. Now, as of today really the only programs now that have significant operations going on is Afghanistan, Somalia, South Sudan, a little bit in Abyei, Darfur is looking like it's going to go down a lot down today so that will stop, and Mali. So really it's the three big peacekeeping missions - we're still able to provide support to those and some work in Afghanistan, but the rest of the world is rapidly moving towards a lockdown, either with staff trapped out of the country, airports closed so we can't do CASEVAC, or simply there are checkpoints and there are no movements going on and people can't get around. Obviously, this has been reviewed on a daily basis but in route it looks like most of our operations are going to be very significantly curtailed I would say for the next month, six weeks at least.

We are reaching out to donors and seeing what their policies are on that. A couple of donors have been quite positive so far in saying that they are prepared to continue covering salaries for staff who are unable to work due to COVID which will be very significant. We are obviously very concerned about a lot of the deminers who are already in very poor countries and the loss of income will have significant impacts on them and their communities, so we're trying to see what we can do to mitigate that.

In terms of peacekeeping in the UN, we are starting to see potential or exhibiting anti UN fears in that their perception is that the UN has either brought the virus to the country or they're spreading it. So, we are trying very much to ensure our profile is as low as possible and that we are seen to be supporting the national authorities and the government, and to this end some of our peacekeeping budget money is being reprogrammed to go purely into COVID response and not mine action. Which I think as a longer-term trend will probably indicate that there will be less funding over the next year coming through UNMAS for mine action which is obviously a concern but very understandable in the situation.

In terms of next steps, we are very much looking at our resilience plans and business continuity, but again with the situation changing as quickly as it is on a daily basis, its almost every plan we make, gets torn up two days later. But that's a very quick overview and I'd very much hope I supported everything that Sebastian said and say if there is anything we can do to help let us know and we will see what we can do. Back to you Hugue. Thank you.

**Hugues**

Thanks so much Paul for giving some of your time for our EORE community. UNMAS has been increasingly engaged in EORE over the last years. So it is great that we have your perspective, thanks Paul and we will make sure that if there is any specific questions to you we share them with you. So thank you for this UNMAS overview and sharing all your concerns and actually as well, the way you have started to handle this over the last days, this is inspiring as well. You also mentioned the importance of reaching out to donors and we actually invited some donors, but I would say only a few. We didn't manage to invite the Mine Action Support Group which is the most important group of donors for mine action. But I think we should share this webinar with them. It is recorded, so afterwards we should make sure we share the link of this webinar with the donors and you can do that from your end at national or regional level, and we will do that at global level.

The next speaker on my list is actually from Yemen, we have Abraham Achiek who is overseeing the 'Children and Armed Conflict' agenda in Yemen. Abraham, can you share the video and the screen with us, you have the floor Abraham, thanks.

**00:49:52 Abraham Achiek, Child Protection Specialist (Children and Armed Conflict), UNICEF Yemen**

Thanks Hugues and colleagues. This is a very quick participation from Yemen, we did not basically prepare a lot of presentation. We feel that we should be part of the discussion, and what I will do here and not what we are currently doing but I want to share with you the situation of mine risk education or the EORE in Yemen and the way the COVID-19 is going to be impacting our interventions. Basically Yemen is still one of the countries that has not reported any cases so far, but the situation is actually changing the whole country. So what is happening in Yemen despite the fact that COVID-19 is changing the world. We are still seeing a lot of fighting going on in the country. We basically have more than 35 fronts which are active with daily air strikes and a lot of fighting in different forms. So far we have about 20 governorates out of 21 where mines and UXOs continue to impact on the civilians. We have over 3 million people, where 2 million are children that are at risk of injuries and death due to mines and UXOs and ERW in the context of Yemen.

As we speak, the current challenges that we have, we deliver the mine education in the schools, but as we speak now, the schools have been closed down. I will take this time to bore you a little bit with some of the statistics that we have. The highest mine and ERWs are considered as one of the third highest cause of child casualties in Yemen. There are some countries that still report that on the list by UN, indicate mines and explosive ordonates of war are the third leading cause of the child death, in 2019 alone there were 374 children that were killed because of the mines and in the last five years we have had more than 700 children that had been injured and main cause being the mines and other remnants of war.

Now that the schools have been closed because of the COVID-19 we are unable to continue to deliver the mine education messages in the schools. The EORE activities at the community level

have also been suspended, we were hoping that the universal day of mine action was going to be an opportunity for some of the activities, that were going to be coordinated between the ministry of education and Yemen mine authority but this has also been cancelled. Though ongoing, especially a lot of fighting in Aljwaf and Marib is a serious risk that we are anticipating because populations continue to be displaced.

What we are proposing currently, because of the COVID-19 and the closure of the schools and the restriction of movement, we are looking at using the digital platform, and doing this work remotely with the communities, especially doing also training of the facilitators using zoom and skype, and disseminating most of these messages using WhatsApp and other digital apps available in the country. We are also trying to be very careful not to cause a lot of risk especially to the monitors and the community people, because there is a restriction in movement across the country and we do not want to bring people together in this context. We are also trying to work together with the mine risk authorities to have some kind of “flash” information to be delivered in different platforms.

What we are trying to do here is be part of the global initiative to see how best we can reach the communities that are impacted by the conflict in Yemen. We do not want to suspend any activity, but the situation is very fluid in the context of Yemen. So we will continue to borrow best practices from other countries that are currently implementing so that we can continue to see how we can continue to intervene.

There is a serious fear in Yemen because the health facilities are completely destroyed, so if the infection reaches Yemen it will be a disaster because there will be very limited intervention by health authorities and the impact will be very difficult. It will be a serious one on the communities. There are also a serious risk that are existing because there are people that have been deported from the chaos into Yemen, and we are anticipating that this can cause contamination. So until now the capacity to do testing is also a challenge in Yemen so we cannot rule out the presence of the infection, but it has not yet been reported. So basically we are worried there is no movement in the whole country, so we are continuing watching what is happening. And we will continue to be part of the webinars that are happening so that we can take on best practices that are happening in other countries. Thank you.

## **Hugues**

Thank you so much Abraham for this overview on the situation in Yemen and for your interest as well on this webinar. As we said this is the first one, there will be other ones and we will make sure that we can provide some guidance. We don't know which shape it will take but we will make sure we will provide this guidance. I will just ask a quick question to you Abraham, because I didn't listen properly to what you said in the first minute. I heard that there is a curfew, an ongoing curfew that was agreed in Yemen, but you mentioned that air strikes are ongoing, that the conflict is ongoing, did I understand well?

## **Abraham**

Yes there is a curfew which is imposed, but despite this curfew it has not stopped the fighting. The fighting is still going on across the country.

## Hugues

Thank you Abraham for this clarification, and please stay with us for the rest of the webinar. I just want to make a quick point here about the logistics, we have a poll that is ongoing, and we will end this poll by the end of this webinar, so anyone from the field, do not hesitate to participate in it.

We invited ICRC but as you know we had a very short notice for all of us, including for speakers and I think for this webinar we might not be able to have a ICRC speaker this time but I know that the team is very committed and this will be organised for the next webinar. However, I would like to move to the next speaker - and the last speaker unless we have someone from ICRC. It will be Sylvie Bouko from GICHD. You have the floor and please go ahead, thanks Sylvie.

**00:59:40 Sylvie Bouko, EORE Consultant, Geneva International Centre for Humanitarian Demining (GICHD) – "Overview of new technologies used for the remote delivery and monitoring of EORE"**

Yes, thank you Hugues. Hi everyone, can you hear me? Can you please confirm.

[Hugues: We can hear you very well, crystal clear.]

Thank you. Hi everyone, thanks for inviting the GICHD to participate in this very interesting webinar. I hope you are all safe so far and that will continue.

Actually, the GICHD is currently leading a review of new technologies and methodologies for EORE in challenging contexts. Three main challenges have been looked at which are EORE for IEDs, EORE in situations of urban contamination, and the most interesting for us today is EORE for areas with limited or no accessibility. So within this specific context of COVID-19 the use of remote technologies and methodologies are of current importance to ensure that EORE practitioners and beneficiaries don't put themselves at risk and the prevention messages can reach people which are at risk as well as communities.

So we have tried to prepare for this webinar actually a short document presenting an *Overview of new technologies used for the remote delivery and monitoring of EORE* **[attached]** which ends up sharing some of the preliminary findings of the review in particular with regards to technologies used to reach areas with limited to no accessibility as I said. So I have prepared a table which tries to provide an overview of the new technologies used by the sector to facilitate the remote delivery of EORE and that kind of outlines some of the good practices and lessons learnt that has been shared so far. Please just know that the analysis is still going on, that also we have not included mobile data collection tools that have been reported. Now let me share my screen.

Can you see properly?

[Hugues: We can see your screen, very good, thanks.]

Alright, thank you for this confirmation. So the way we have actually prepared this table, you can see in the left column are the technologies, and then good practices and key lessons learnt. We can share this document with all of you after the webinar and I won't read all of it now, so we leave some time for questions and answers. Just know that I can also be contacted, you have my email here, for further details on some specific technologies, because again this is just an abstract that you can see on your screen now.

Social media campaigns using either one of the social media tools, like WhatsApp, Facebook, Twitter and Instagram or so maybe sometimes some of you have been using all of them at the same time. So in terms of good practices, it's obviously a mass communication tool, it has a low cost and it can also play the role of advertisement by posting EORE activities, agenda or messages. WhatsApp offers big monitoring benefits considering the speed and the widespread usage, it's obviously also a good way to send and receive information. Along with the location services, the application allows you to manage and share targeted information and media. It can also be used to report incidents and accidents and allows quick and coordinated response whenever this is appropriate and possible today. It's cost efficient, it facilitates permanent communication and you can also use it to actually disseminate IVR pre-recorded messages.

When we look also at specific Facebook advertisements, you have a rapid dissemination of updated EORE messages which can be based on new accident trends or explosive hazards and target very specific areas at risk. It is low cost, it has an extensive reach and it is also easily scalable. One very interesting lesson learnt that could be shared with you also today, is that turning off the comments section and including contact information for national mine actional authorities can actually help or force the users to bring their concerns to national authorities rather than just comment about them (and then in turn create a requirement for personnel to monitor all comments).

Another tool that has been also reported is Facebook videos using the Behaviour Change Communication approach which can also be very interesting especially now looking at the prevention messages in relation with the COVID-19, it can complement also the dissemination of the videos disseminated on Facebook but also on television since some of you are considering mass media. And also note that a baseline survey can also be done on the phone since most of us are working from home now, being confined.

As it has also been mentioned by Ahmed for example, today we also have the option for a Facebook page and also a website that allows us to establish and maintain good contact with community focal points, community wardens as well as ensuring refreshment trainings and the sharing of new information and instructions. You can also use that to target returnees and IDPS with instant messages related to EORE. And obviously this can also keep digital presence, while reducing the physical presence in the communities. We also have comprehensive digital advertising campaigns that have been used in for example in Ukraine. The campaign was based

on superheroes having different role models, videos, website for adults and another website for kids that have been put online. Cooperation with popular YouTube bloggers as well attracted a lot of attention and millions of views. Screening of comic cartoons can also be considered on the website and it has an extensive reach.

Digital apps that have also been mentioned, that are scalable, low cost, and an interesting good practice is actually to use a back-end system that captures users' performances and can allow you to adjust the focus or program. A lesson learnt is that from a social behavioural perspective, the use of different tools to transmit EORE messages will reinforce the messages being transmitted.

And I will end with the Risk Education Talking Device. The good practices are that it is environmentally friendly, it's solar powered, it fosters social cohesion and can be used to record multiple dialects. It's also user friendly and entertaining, it's sustainable because people can actually listen on different locations, whenever they want to, can be easily shared and it remains in the community. It is also interchangeable which is of particular interest today for us with the COVID because it can be used for other awareness needs. It's also inclusive in terms of accessibility, for when we consider gender, age, literacy and also most of the disabilities. As someone said also in the Risk Education Working Group, what is also very interesting here with the risk education talking device methodology and tool is that encrypted messages are able to be sent actually to users through SD Micro Cards and messages can be easily updated, shared and delivered to users in a cost effective manner rapidly.

Other reported technologies that still need additional research and details but we wanted also to share with you today is the WHO initiative, it's a WhatsApp app Helpline, which is very interesting tool to consider and that would be absolutely great I believe, it's my personal opinion, if we could actually come up with such a helpline tool for our sector. You can find the link of an article that explains further. You also have IVR pre-recorded voice messages that can be sent by SMS or WhatsApp. You have the Tik Tok methodology, which is short form mobile videos. And you also have Sign Post targeting specifically people on the move like returnees and refugees. And that's it for now for me.

## Hugues

Thank you so much Sylvie for sharing your findings and this is actually the first time we see the outcome of your work in which we have been engaged with over the last months. So thanks. Sylvie said we will be able to share with all of us these slides on this overview of methodologies and digital approaches that can be used, or technologies that can be used for risk education, EORE, and possibly, EORE and COVID-19. So thanks a lot Sylvie. I think we are now reaching the end but before we wrap up I would like to give the floor to Louis Maresca from ICRC, just to have a few of your insights. Louis, if you can take the floor that would be great, you will be the last speaker, and then I will wrap up thanks.

**01:12:07 Louis Maresca, Adviser, Conventional Weapons, Weapons Contamination Unit, International Committee of the Red Cross (ICRC)**

Thanks Hugues, thanks for giving me a moment, it's not often I get the last word but I'm always happy when I do though so thank you for that. Now it was a bit short notice, but I thought maybe I would give you at least a few words as to how the ICRC is kind of orienting itself in the current environment in relation to its risk awareness and safer behaviour activities. I think most of what has been said so far touches upon the concerns that we have both in terms of our duty of care to our own staff and also in particular to the national society partners with whom we work with very closely, and also the concerns we have about of course affected populations and the potential increase to their vulnerabilities, in or nearby with a contaminated context.

I think, like others, our way of working in this field of course is having to adapt to change. We are taking a variety of steps to do so, to adapt to those circumstances, I think the actions taken by others are also being taken by us with regards to reducing the face to face meetings, moving more towards electronic means of communication, whether that be Facebook or WhatsApp, Viber, maybe going back to SMS and videos, and national and regional radio programs. Maybe now we have to add Zoom to the potential list of platforms and if my children are correct we should add house party to the list of potential platforms. I am not sure I understand how that works.

So some of this is being used not only to broadcast widely but also to use it in a bit more of a targeted way in smaller groupings, even setting up groups along with the director in a particular school, so that within these areas we can pass more targeted messages. Our aim is certainly to do as much as possible and to the extent possible keep the programs we have ongoing perhaps in a different way and maybe enhancing our efforts in the electronic media track for the time being.

So in essence I think we are not necessarily doing anything ground breaking or outside the box, or even different than others. We are all using the same kind of tools that we have available in this evolving context, and we will try to use them to the extent possible to try and keep our activities going. So that's sort of a short summary from where we are coming from. Thanks for giving me a moment to highlight all that. Thanks.

**01:16:45 Summary & Conclusions: by Hugues Laurence, Child Protection Specialist, United Nations Children's Fund (UNICEF) and Co-Chair of the EORE AG**

Thanks so much Louis for this ICRC perspective. Whenever we have your insight, it is important as it also relates to the work of the Red Crescent/Cross Societies all over the world. You are a key EORE actor, so thanks for this Louis.

We had planned as well to have a short brief presentation from Ukraine, I mean a brief update from Ukraine, but we won't have time in this webinar. So I suggest we postpone that until the

next webinar where we would use this update from Ukraine. Thanks all of you for your participation in the Q & A and the chat. I won't be able to summarise all the points that have been raised but just a quick few highlights:

From the challenges side, we have MAG, through the voice of Sebastian Kasack, that raised the principle of do-no-harm that we have to keep in mind as this is a sensitive topic: the COVID-19. It has sensitivities that we don't necessarily face in mine action such as stigmatising some members of the communities. Sebastian highlighted that if we have a two-way communication with communities, we have to be very cautious when it comes to COVID because we are ourselves not health specialists. So if we have a two-way communication, let's make sure basically we are not engaging in COVID messaging because we won't be able to respond to all the questions raised by the communities. Perhaps on the positive side, a one-way communication can be used. As Paul Heslop highlighted we can use WHO guidance for this, there is also UNICEF global guidance on how to address COVID messaging as a one-way communication tool.

Ahmed also highlighted all the constraints, that didn't come across my mind until this webinar. Of course, the COVID as a crisis has an impact on all sectors. So even when you want to mobilise radios, even medias, any media, even if you want to print materials, these days it is quite difficult, because the whole world is slowing down. And it is challenging to even print new material or mobilise radios. So that is the type of constraints that were highlighted.

Ahmed highlighted the opportunities to use for example, loudspeakers to display the risk education messages and still keep the distancing. That was an example of activities. But there were many others like using large screens in IDP camps, using Facebook etc.

I saw as well in the chat box there was an interesting comment that if there is restriction in movement that means less exposure on EO. That's a very good point: the less we have movement, the less we have exposure and the less we have accidents. So that was observed by Ako from IKMAA. Thanks Ako for this point. But as well, other colleagues like Reuben McCarthy from ICRC mentioned that we still see movement in locations among vulnerable communities, so we still have to be very cautious about that. As always, in any crisis the most vulnerable are still at risk, even if there are constraints, even if there are curfews, the most vulnerable remain the same, it's just that the COVID is exacerbating this vulnerability. So perhaps our work in our field is to make sure we still prioritise the most vulnerable people while we deal with these two threats: the EO threat and the COVID threat.

And then there were a few more points on opportunities to work more with the ministry of health, that was highlighted by many of you, especially Ahmed, from the Iraq perspective. Paul also mentioned that we have a situation that is changing on a daily basis, so that's another challenge. We can have a plan one day, and then the day after the whole plan fails, cannot be implemented because the restrictions are changing. So that's another challenge to take into account.

Paul as well mentioned the issue of having clearance activities that are now basically suspended in most contexts, and this also has an impact on our EORE activities because the link between risk education and clearance cannot happen anymore, if clearance activities are on standstill or are suspended. So that was another good point. We had a very good example from GICHD on the useful technologies that can be used so thanks again for this overview. I already mentioned the ICRC perspective, I think that we will stop here in terms of trying to summarise the takeaways.

There were many questions such as ‘how we can coordinate with the health sector?’ What are the recommendations for us to safely deliver? What are the basic recommendations? We have not shared that yet through the risk education working group for example, so this is something that is needed. Funding was also raised in the chat box: ‘How do we communicate with the donors on this?’. So many questions have not been addressed during this webinar but we will do that in the coming days and share with you the Q & A, with the answers.

I should also add that there is an ongoing discussion in the International MRE Working Group on this; it is an email discussion. Feel free to participate. We already have a very good thread of discussion that allows us to dive into examples of what works and what doesn’t work and all the challenges you are facing. Many of you are not part of the working group yet so we will also provide guidance on how to join the group. It is actually very simple, very straightforward, and you can also send me an email if you want to join this group and participate in this discussion.

I would also like to emphasize that we don’t know yet as I mentioned in the intro, how the guidance will take shape but there will be some guidance, and we will work on that with the fifteen organisations that are members of the Advisory Group.

So we will keep you informed on all of this. I have as well one more point, April 4<sup>th</sup> is forthcoming, it is this week. This is our international day for mine action, mine awareness, for mine risk education or EORE and basically mine action. So this is happening now, I know that in Syria, in Ukraine, in so many countries, most of the April 4<sup>th</sup> messaging will focus on COVID. This is a huge crisis, possibly hundreds of thousands of people will die from this virus, so we can contribute from our side, from our sector. We are known to be risk education specialists so we can also contribute, including for this April 4<sup>th</sup> celebrations.

I would like just to check with Kaitlin before we close this webinar if I don’t forget anything or if any panellists, would like to jump in, did I forget anything? Please panellists or Kaitlin, go ahead.

**Kaitlin**

All good from my side. We have a few people asking when the guidance be available, and I don’t know Hugues if you have an idea on that one. But other than that all good.

**Hugues**

I think we cannot give a date, thanks Kaitlin for that. We cannot give a date now but I can confirm that this is on our top priority and we will raise this among EORE members. So no date so far but as soon as possible and probably, I think my take on this is that we would provide very short guidance, very practical guidance, it won't be necessarily comprehensive but there will be some links to other types of guidance that have been displayed by other sectors from the protection side. We didn't mention the role of the AOR, the Mine Action AOR, but they already today shared very good guidance from the Global Protection Cluster so we can share as well those guidance from all the sectors. And I think as well the Q & A that we are now reading, will be an annex to this guidance but we need buy in and we need agreement from all members and I know this will happen quickly and because it is on top of our priorities and we have high pressure on our shoulders and a lot of appetite to address this. So it will be coming soon.

Any other last final point from any speaker and also my co-chair from the advisory group Sebastian, any last point?

### **Sebastian**

All good, I found it really interesting, I see some positive feedback already on the chat box, some good sign everyone was staying on the call. So this is our first experience and I think it worked very well. Thanks to Kaitlin also for really managing this well and I think we will meet together soon.

### **Hugues**

Many thanks Sebastian for this very brief conclusion from your side. Any other intervention from any other panellist?

### **Sylvie**

Yeah this is Sylvie from GICHD, again I would like to thank all of you and please stay safe as much as possible. Also just as a reminder, don't hesitate to get in touch with me via email and I will be very happy to provide more details on the abstracts that have been presented today, because those are just extracts, I can also share some limitations, some other good practices and lessons learnt that have been shared by people who have been contributing to the survey online and also a massive and huge thanks to all of them who have been contributing so far. You are really helping the sector and your contributions are extremely valuable, thank you.

### **Hugues**

Thank you so much Sylvie for that. I don't see any other speaker but please go ahead if you want, don't hesitate to jump in. Ok, I don't see any other points so I just want to apologise for all of you who wanted to speak or to raise your hand during this webinar. We had more than 127 participants at some points and that was quite challenging to give the floor to all of those who wanted to jump in but we will improve this in the next webinar, to make this webinar as

participatory as possible, and as I said, we will address each single question, each single point that has been raised.

So all of you please stay safe, stay sane, in this particular time and we will keep you informed for the next steps. I would like to share my special thanks to our logistic lead Kaitlin who helped us manage the whole webinar, so thanks a lot Kaitlin for your support on that and thanks all of you for your great participation.

We stay in touch, all the best, this meeting, this webinar, this first webinar is now over. All the best. Have a very nice, evening, night or day.