

# **Twenty-fifth Annual Conference of the High Contracting Parties to Amended Protocol II to the Convention on Prohibitions or Restrictions on the Use of Certain Conventional Weapons Which May Be Deemed to Be Excessively Injurious or to Have Indiscriminate Effects**

14 November 2023

English only

---

Geneva, 14 November 2023

Agenda item 9

Consideration of matters arising from reports by High Contracting Parties according to Article 13 (4) of the amended Protocol

## **Amended Protocol II National Annual Reports Analysis**

### **Informal note prepared by the Implementation Support Unit**

#### **I. Introduction**

1. Article 13, paragraph 4 of the Protocol on Prohibitions or Restrictions on the Use of Mines, Booby-Traps and Other Devices as Amended on 3 May 1996 (Protocol II as amended on 3 May 1996) stipulates that High Contracting Parties shall provide annual reports to the Depositary, who shall circulate them to all High Contracting Parties in advance of the conference, on any of the following matters: (a) dissemination of information on this Protocol to their armed forces and to the civilian population; (b) mine clearance and rehabilitation programmes; (c) steps taken to meet technical requirements of this Protocol and any other relevant information pertaining thereto; (d) legislation related to this Protocol; (e) measures taken on international technical information exchange, on international cooperation on mine clearance, and on technical cooperation and assistance; and (f) other relevant matters. To submit Amended Protocol II National Annual Reports (NARs), High Contracting Parties use the reporting forms as adopted by the First Annual Conference of the High Contracting Parties to Amended Protocol II and the summary sheet adopted at the Fifth Annual Conference of the High Contracting Parties to Amended Protocol II.

2. This note was prepared by the Implementation Support Unit (ISU) to provide information to High Contracting Parties (HCPs) to Amended Protocol II on quantitative and qualitative trends related to the submission of NARs under the protocol. It offers statistics on submissions since January 2006 and a brief analysis of the information provided by High Contracting Parties in NARs submitted in 2023 (for the reporting period of 2022). NARs that were submitted until August 2023 have been included in the analysis. Only information from reports that are publicly available has been used.

3. The preparation of this note is based on the mandate of the ISU to serve as a focal point for submission of information by and to the High Contracting Parties related to the Convention and its annexed Protocols and to support the High Contracting Parties, on request, in the implementation of the CCW and its Protocols. It follows from requests by CCW officeholders, in 2022, to provide succinct quantitative and qualitative analyses of Compliance Annual Reports and NARs under Amended Protocol II and Protocol V, to inform High Contracting Parties at the annual meetings during their consideration of the relevant agenda items. The preparation of the note was made possible through voluntary contributions received in support of the universalization, implementation and strengthening of the CCW,<sup>1</sup>

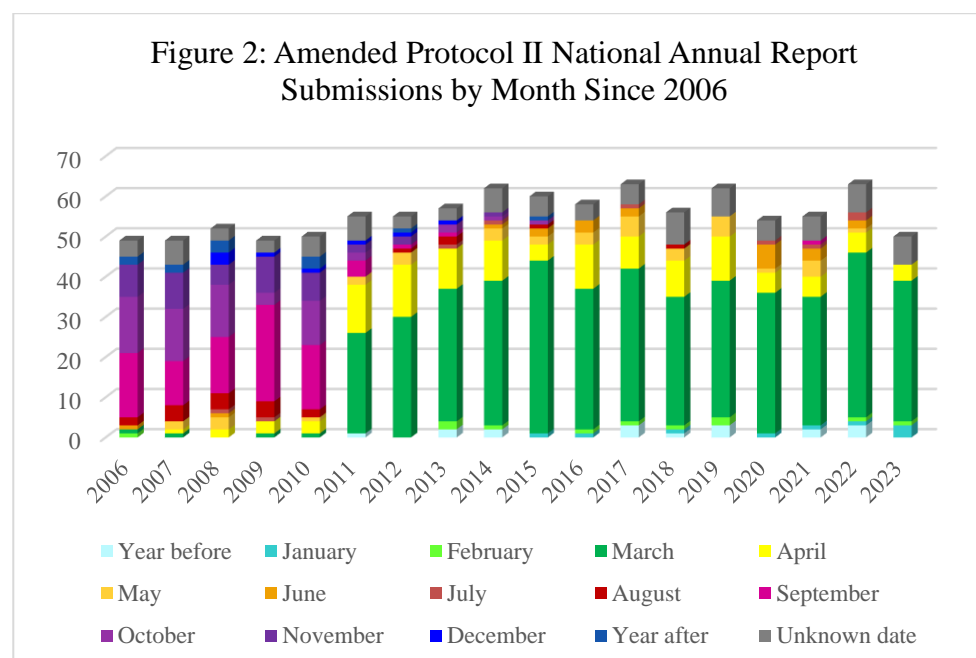
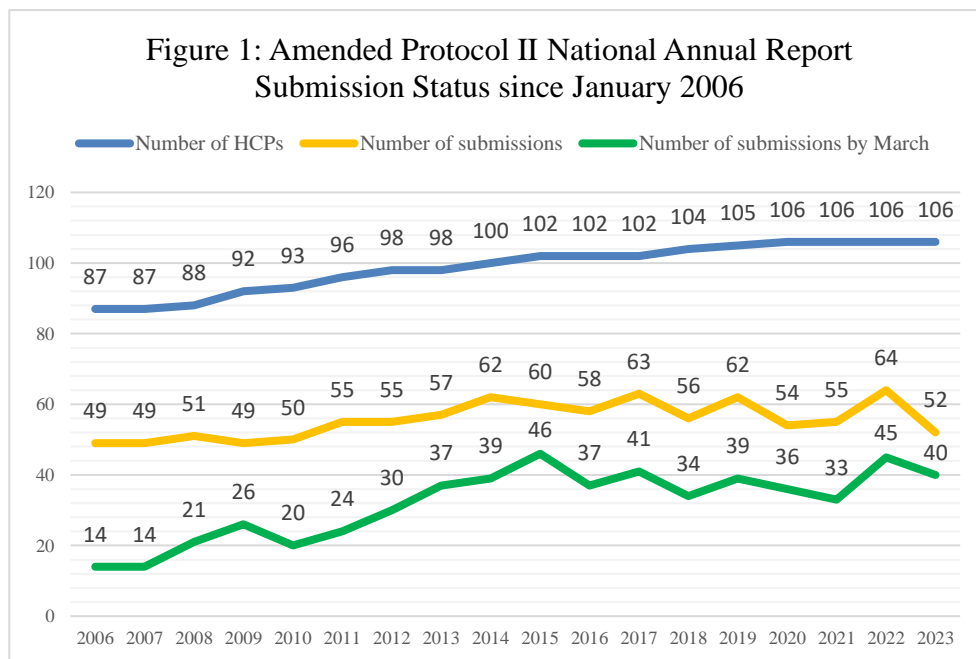
---

<sup>1</sup> Under the UNODA project in support of the universalization, implementation and strengthening of the Convention on Prohibitions or Restrictions on the Use of Certain Conventional Weapons Which May Be Deemed to Be Excessively Injurious or to Have Indiscriminate Effects (CCW).

which has enabled UNODA to provide strengthened support to identify and overcome gaps and challenges in the current compliance and implementation mechanisms of CCW.

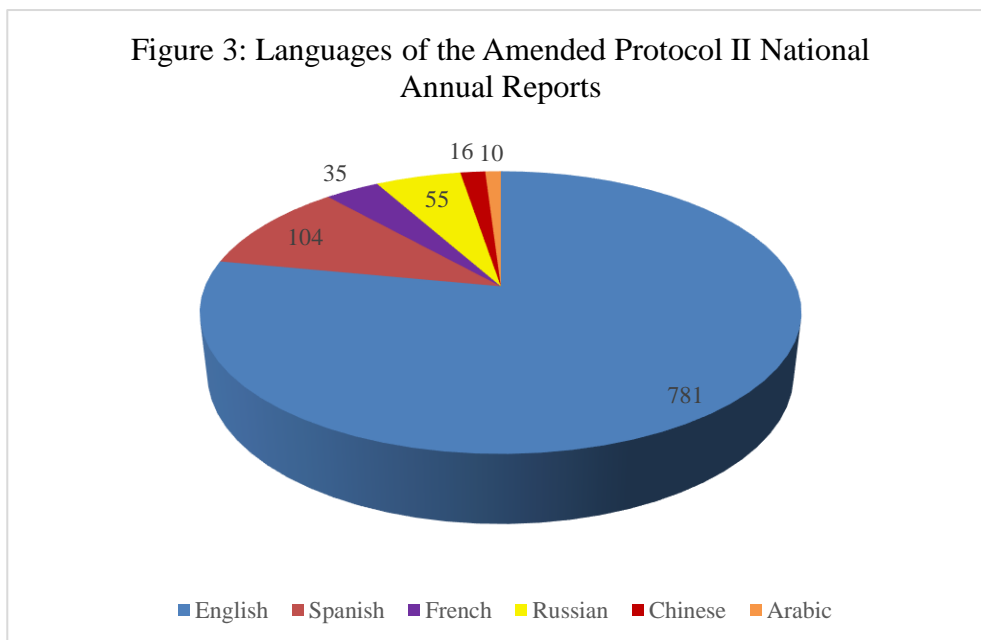
## II. Overall submission status since 2006

4. From January 2006 to August 2023, the Implementation Support Unit (ISU) has received 1,001 NARs from HCPs to Amended Protocol II. The average annual submission rate is 55% of all HCPs at any given time. The submission number reached its highest peak in 2022, with 64 submissions, amounting to 60% of HCPs. (See figure 1).



5. Since 1999, the deadline for submitting NARs was set to no later than 8 weeks before the annual conference (according to the recommendation of the First Annual Conference of the High Contracting Parties to Amended Protocol II held in December 1999). From 2006 to 2010, most of the HCPs submitted their reports in September, October and November, which corresponds to the period during which the Annual Conference of the High Contracting

Parties to Amended Protocol II is held. In 2011, at the Twelfth Annual Conference of the High Contracting Parties to Amended Protocol II, HCPs decided to synchronize the submission of National Annual Reports under Article 13, paragraph 4, of the Amended Protocol II, with the submission of national reports under CCW Protocol V on Explosive Remnants of War. The submission date for both reports was then set to 31 March of each calendar year. Consequently, starting in 2011, HCPs began submitting their reports in March of each year, deviating from the previous reporting pattern (see figure 2). Nevertheless, the ISU continues to receive the reports all year round.



6. Of the 1,000 NARs received, 577 were submitted by 31 March. 781 were submitted in English, 104 in Spanish, 55 in Russian, 35 in French, 10 in Arabic and 16 in Chinese. (See figure 3).

7. HCPs can be categorized into four groups based on their NARs submission rates since the year they became parties to Amended Protocol II. The four groups consist of: HCPs with 0% submission rate; HCPs with less than 50% submission rate; HCPs with a submission rate of 50% and above; and, HCPs with a 100% submission rate.

8. Twenty-two out of 106 HCPs have never submitted their Amended Protocol II National Annual Reports. Regional trends<sup>2</sup> for these HCPs are as follows: 9 HCPs are from Africa; 7 from the Americas; 4 from Asia; 1 from Europe; and 1 from Oceania.

9. There are 25 HCPs with a submission rate of less than 50%. Within this group, the regional trends are as follows: 7 HCPs from Africa; 7 from the Americas; 6 from Asia; and 5 from Europe. The highest submission rate of an HCP within this group is 44% (8 actual submissions<sup>3</sup> out of 18 possible submissions<sup>4</sup>) and the lowest submission rate is 5% (1 actual submission out of 18 possible submissions).

10. There are 40 HCPs with a submission rate of 50% and above. Within this group, there are 2 HCPs from Africa, 10 HCPs from the Americas, 7 HCPs from Asia, 19 HCPs from Europe, and 2 HCPs from Oceania. The highest submission rate for this group is 94%, which corresponds to 17 actual submissions out of 18 possible submissions, and the lowest submission rate is 60%, which corresponds to 3 actual submissions out of 5 possible submissions.

<sup>2</sup> For the purpose of this analysis, the UN geographical regions as per the UN Statistics Division are used.

<sup>3</sup> Actual submission means the number of reports submitted.

<sup>4</sup> Possible submission means the number of reports that could have been submitted starting from 2006 when the database became available.

11. Nineteen HCPs have been submitting their NAR every year since 2006 (18 actual submissions out of 18 possible submissions). In this group, there are 3 HCPs from Asia and 16 from Europe.

### III. Submission status in 2023

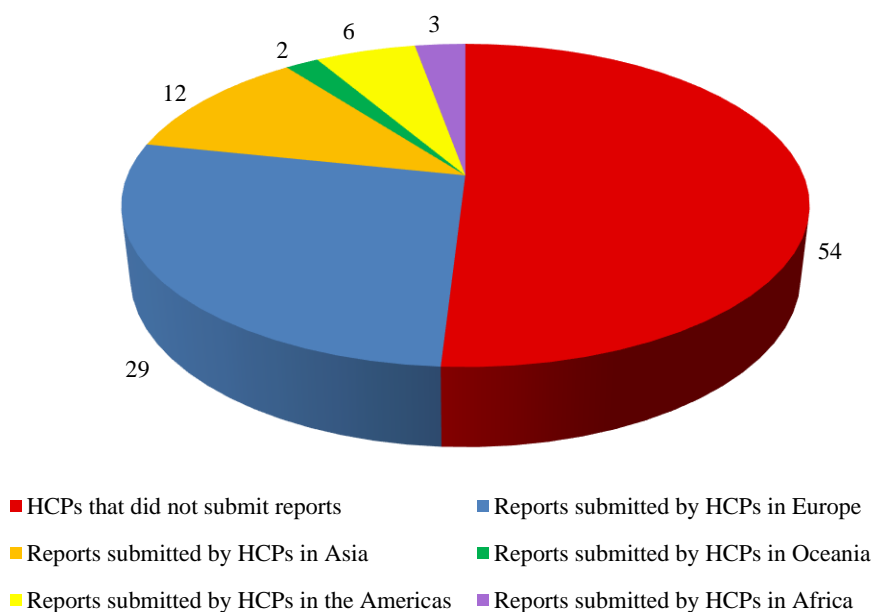
12. As of 31 August 2023, the ISU had received 52 Amended Protocol II National Annual Reports for the year 2022. Fifty-four HCPs had yet to submit their reports.

13. Out of the 52 NARs submitted, the regional trends are as follows: 29 reports are from HCPs in Europe; 12 from HCPs in Asia; 6 from HCPs in the Americas; 3 from HCPs in Africa; and 2 from HCPs from Oceania. (See figure 4). The number of submissions has decreased by approximately 10% from the previous year. Out of these 52 submissions, 40 were submitted according to the deadline, 2 are not available publicly, as per the indication of the HCPs, and 1 is only partially publicly available, also at the request of the HCP.

14. With regard to the language of submissions, 40 reports were submitted in English, 4 in Spanish, 3 in Russian, 2 in French, 1 in Chinese, and 2 in Arabic.

15. Of the 52 HCPs that submitted their reports, 39 designated the Ministry of Foreign Affairs and/or Ministry of Defence as national contact points. Other entities designated as national contact points were, for example, the Ministry of Interior, Ministry of Civil Affairs, or National Mine Action Authority. Five HCPs did not indicate information on the designated national contact point, and 3 HCPs designated individuals rather than entities as national contact points.

Figure 4: National Annual Report Submission in 2023



### IV. Overview of information in reports submitted in 2023

16. The NARs for Amended Protocol II consist of form A: Dissemination of information; form B: Mine clearance and rehabilitation programmes; form C: Technical requirements and relevant information; form D: Legislation; form E: International technical information exchange, cooperation on mine clearance, technical cooperation and assistance; form F: Other relevant matters; and form G: Information to the UN-database on mine clearance. The paragraphs below summarize information received under each form.

## **Form A: Dissemination of information**

17. Most HCPs indicated no change in this section compared to the previous year. They reported that the relevant information regarding the CCW, including Amended Protocol II, was disseminated to military personnel through military universities, academies, and training centres. Some HCPs referred to refresher exercises being part of the routine professional qualification of military personnel. Some HCPs included training on the international law of armed conflict in their preparation process for peacekeeping missions. In addition, one HCP mentioned the use of a landmine compliance distance learning system to educate officers and military personnel on international humanitarian law, including the principles set by the CCW and its annexed Protocols.

18. To raise the awareness of the civilian population about the dangers of landmines, HCPs used various approaches. These included the mine risk education programme, direct warnings through local radio stations, and the installation of signs and fences to mark contaminated areas. Some HCPs also organized field trips for schools, youth movements, and companies. They also used activities such as broadcasting awareness campaign video clips in local languages through the media, introducing a minefield information bank to the public, or providing free phone calls from mobile phones to report the discovery of war remnants or projectiles.

19. HCPs also provided information about international humanitarian law and other relevant conventions within the United Nations framework, including the CCW. This information was made available to the public through various channels, such as education programmes in universities, e-learning courses, public libraries, and websites.

## **Form B: Mine clearance and rehabilitation programmes**

20. HCPs reported on areas that are contaminated with mines and the progress being made in their clearance and destruction. One HCP reported completing the construction of an international humanitarian demining training centre. Some HCPs were continuing surveys and inspections, monitoring operations, marking minefields, and carrying out demining activities. Additionally, four HCPs reported providing funding and assistance to other HCPs under the humanitarian demining framework and cooperation.

21. HCPs reported various rehabilitation programs aimed at supporting mine victims, not only in terms of medical assistance but also in social inclusion. One HCP shared details on how their national law on civilian victims offers legal protection to victims and helps improve their socioeconomic status. HCPs also highlighted the challenges faced in the rehabilitation process, such as the lack of necessary infrastructure for victims in remote locations. They also emphasized collaboration with international organizations to provide better assistance to victims.

22. Furthermore, the HCPs reported the number of casualties and deaths caused by Unexploded Ordnance (UXO), Explosive Remnants of War (ERW), and Improvised Explosive Devices (IEDs), with one HCP describing the threat of use of IEDs by terrorists.

## **Form C: Technical requirements and relevant information**

23. In this form, 48 HCPs reported unchanged information. One HCP reported the number of mines and ERW pieces that were found and destroyed in 2022. Additionally, this same HCP also provided information on the impact of a project on the assessment of mine-suspected areas; during the project implementation period, from 2018 to 2019, the size of the suspected area was reduced, and new data has been established and corrected.

24. Two HCPs provided details about national mine action standards. One HCP stated that its national mine action standards have been updated to be in line with international requirements. Another HCP reported that its technical standards for comprehensive action against mines were issued. These standards included the most relevant issues regarding

humanitarian demining and their relationship with the protocol and the destruction of antipersonnel mines, as well as IEDs.

25. One HCP reported that unlawfully established armed groups continue to violate the provisions of the Convention as they indiscriminately install different IEDs.

### **Form D: Legislation**

26. One HCP reported a new decree in 2022 at the national level that provided the national mine action authority the mandate to formulate, lead, and monitor the implementation of comprehensive action strategy against antipersonnel mine.

27. Another HCP informed that their national centre for demining has been using several manuals in conducting humanitarian demining operations, including on national demining procedures, the manual of deactivation and destruction of explosive devices in a state of risk.

28. One HCP highlighted progress made in developing its legislation. It reported that it is in the process of preparing the Mine Affairs Department Act legislation.

29. Several HCPs included information on their national guidelines, such as decisions related to dual-use goods, national mine action standards and standard operational procedures on mine clearance standards with neighbouring countries, manual of procedures for the handling of weapons, explosives, and chemicals, and general guides for unexploded explosive devices or explosive remnants of war.

### **Form E: International technical information exchange, cooperation on mine clearance, technical cooperation and assistance**

30. Regular exchanges of technical information have been reported in this form. Such exchanges took place bilaterally with neighbouring countries and multilaterally through meetings, conferences, and working groups both at policy and technical levels in the area of surveys, defining the accuracy of locations, demining, and victim assistance.

31. HCPs also described in this form ongoing national projects in collaboration with NGOs, international organizations, and donor countries. In terms of capacity building, 13 HCPs reported on the organization of trainings for other countries in their regions. Several HCPs reported providing equipment, financial support, and mine clearance teams to participate in demining missions in other countries. Assistance was also provided through the relevant international organizations and other frameworks including the Anti-Personnel Landmine Convention and the Convention on Cluster Munitions.

32. One HCP reported an ongoing research project on the development of Artificial Intelligence (AI) for the detection of explosive devices.

### **Form F: Other relevant matters**

33. HCPs acknowledged the technical assistance provided by international organizations in their countries and highlighted the significance of international cooperation and assistance in implementing humanitarian demining activities.

34. HCPs also mentioned their national policy on mine action in this form.

**Form G: Information to the United Nations database on mine clearance**

35. HCPs submitted a wide range of information in this form including clearance capacity i.e. the number of mine action operators and companies. HCPs also provided information on means and technologies available in their countries, such as mine detection dogs, manual demining techniques, clearance equipment, survey equipment, and demining machines. HCPs also provided a list of experts and contacts in this form.

---