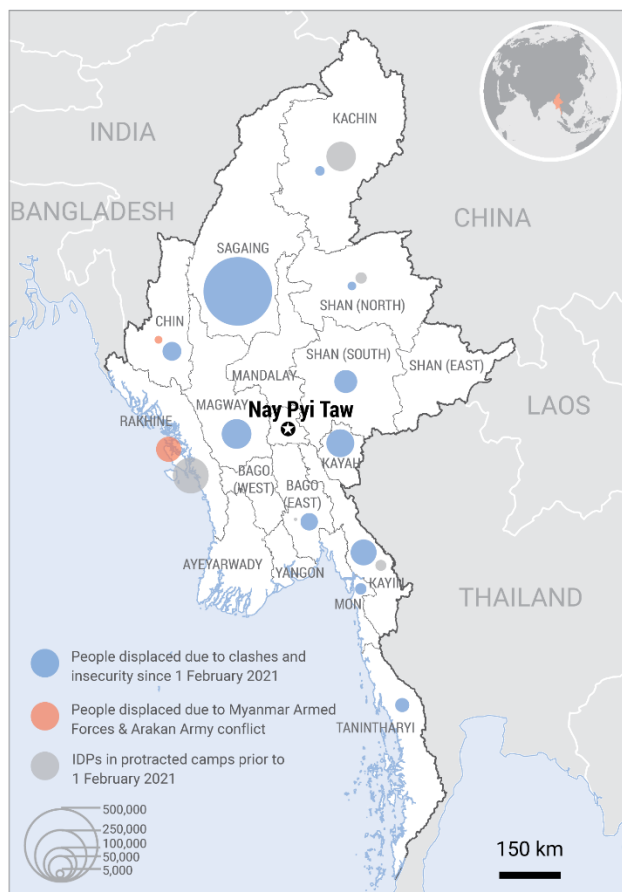


This regular update, covering humanitarian developments up to 25 August, is produced by OCHA Myanmar in collaboration with the Inter-Cluster Coordination Group and UN agencies. The next humanitarian update will be issued at the end of September 2022.

HIGHLIGHTS & KEY MESSAGES

- Civilians continue to bear the brunt of the armed conflict while households are grappling with financial stress as a result of soaring inflation.
- Almost 1.3 million people are currently displaced across the country. This includes more than 974,000 people displaced by the conflict and insecurity since the military takeover last year.
- Tensions are rising in Rakhine state and southern Chin between the Myanmar Armed Forces (MAF) and the Arakan Army (AA) with concerns for the impact of a resumption in full-scale fighting on civilians. Funding is urgently needed to procure depleted supplies for both the ongoing response and to meet new needs both for displaced people and affected communities.
- Rising food prices and constrained agricultural production nationwide are contributing to deep food insecurity as items become more unaffordable for much of Myanmar's population. Fertilizer and other farm inputs are now prohibitively expensive, lowering productivity at the same time that fuel challenges and conflict are making transportation of produce more difficult. Concerns remain regarding food availability during the upcoming lean season as conditions are expected to worsen.
- Low availability of some medical products is being reported due to import issues.
- Despite the ongoing challenges, humanitarian partners have continued to rapidly scale-up in response to new needs, reaching a total of 3.1 million people with at least one form of assistance in the first half year of 2022.
- However, due to a shortfall in funding and access constraints, partners are not able to deliver the depth of relief required and there are significant unmet needs.
- The 2022 Humanitarian Response Plan (HRP) is only 17 per cent funded, leaving a gap of US\$688 million (FTS) that is forcing partners to make tough decisions about prioritization of assistance. Worryingly, funding remains below 2021 levels despite a dramatic increase in needs in 2022.



KEY FIGURES*

1.3M

People internally displaced across Myanmar

974K

People currently displaced by conflict and insecurity since February 2021

330K

People internally displaced due to conflict prior to February 2021, mainly in Rakhine, Kachin, Chin, and Shan

26K

Civilian properties estimated burnt or destroyed since February 2021.¹

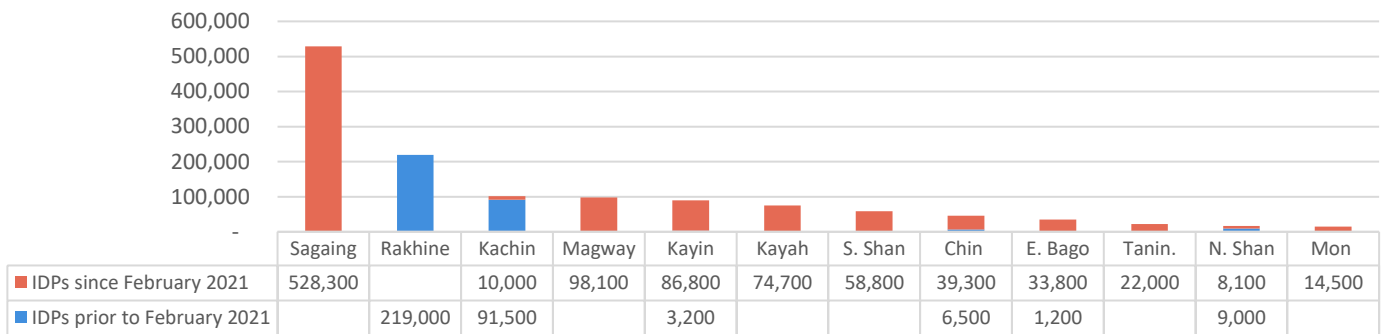
**Displacement figures fluctuate during any given month. These figures represent the number of people currently displaced. Cumulative numbers for returns and displacement are not always available.*

¹ Data for Myanmar in remaining states (up to 25 August 2022), Progressive Karenni People Force on Kayah (up to 31 July 2022), OCHA field data on Sagaing/Magway/Chin (up to 15 August 2022)

SITUATION OVERVIEW

The humanitarian situation in Myanmar has continued to be dominated by ongoing hostilities and increasing economic stress for households during the reporting period. The impact on civilians is severe with frequent indiscriminate attacks in civilian areas and incidents involving explosive hazards, including landmines and explosive remnants of war (ERWs). More than 2,000 men, women and children have been killed since the 2021 military takeover, according to the UN Special Rapporteur on the human rights situation in Myanmar.² Between January and June 2021, UNICEF recorded 185 landmine and ERW incidents, which is equal to two-thirds of the total incidents reported in the whole of last year (284 reported).³ Displacement has also been on the rise despite some reported returns. According to UN figures, the estimated number of IDPs since the military takeover has passed 974,400, bringing the total number of IDP across the country to almost 1.3 million.⁴ More than 45,500 people remain in neighboring countries after fleeing since the takeover.⁵ Nearly 26,000 civilian properties, including houses, churches, monasteries, and schools are estimated to have been destroyed during hostilities, although figures are difficult to verify.⁶ The level of destruction of civilian property, particularly homes, combined with the deteriorating security situation and explosive ordnance (EO) risks, is prolonging the displacement of the IDPs.

Internally Displaced Persons in Myanmar

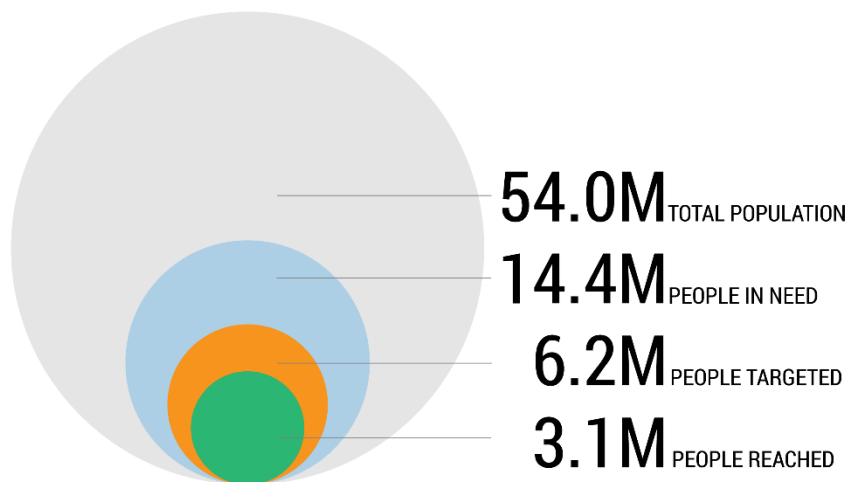


*UN figures as of 29 August 2022

■ IDPs prior to February 2021

■ IDPs since February 2021

This suffering is further compounded by heavy restrictions on humanitarian access, including cumbersome bureaucratic processes and systematic blocks on access approvals, that continue to hamper humanitarian responses and delay the delivery of assistance. Despite these obstacles, local, national and international humanitarian partners continue to stay and deliver and are reaching record numbers of people with life-saving assistance to address both pre-existing and new needs. During the first half of 2022, 3.1 million people across Myanmar were reached but this support was not as deep or multi-sectoral as planned due to funding and access constraints. As of the end of August, this year's Humanitarian Response Plan is only 17 per cent funded, which amounts to only \$138 million out of a total of \$826 million required. For comparison, at the same time last year, the combined HRP and Interim Emergency



² End of Mission Statement: Thomas Andrews, United Nations Special Rapporteur on the situation of human rights in Myanmar (23 June 2022)

³ UNICEF, Myanmar Landmine/ERW Incident Information, Jan-Jun2022

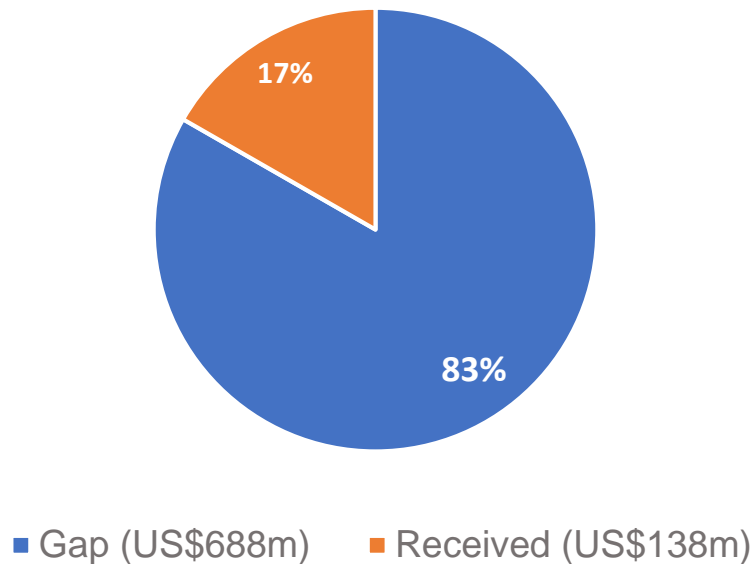
⁴ UN figures as of 29 August 2022

⁵ Ibid.

⁶ See note #1.

Response Plan (IERP) had already received almost \$218 million out of \$386 million required (56 per cent), demonstrating a year-on-year drop in funding received despite soaring needs.

Myanmar Humanitarian Response Plan 2022 (US\$826m)



Tensions rise in Rakhine and displacement surges in the Northwest

Across the country civilian lives continue to be lost and protection concerns are growing as a result of heavy fighting, air strikes, and artillery fire; the use of landmines; destruction or burning of civilian properties; and indiscriminate violence and security operations. This is driving surging displacement of civilians and growing humanitarian needs.

In **Rakhine and southern Chin**, growing tensions between the MAF and the AA have led to frequent sporadic clashes and use of heavy weapons, particularly in the northern townships of Rakhine since June. Intermittent fighting has been reported in Maungdaw, Rathedaung, Buthidaung and Paletwa townships over the past month, prompting fresh displacement and limiting freedom of movement. An estimated 1,000-2,000 people are thought to have been displaced in northern Rakhine although figures are difficult to verify. Some assistance has reached IDPs and affected communities, but access is challenging. There have also been skirmishes in southern Rakhine in Taungup over recent days and near Mrauk-U, Minbya and Kyauktaw in central Rakhine.

Security measures have been tightened in many areas across the state, and waterways and roads have been blocked in northern Rakhine, while transportation of medical supplies and food have been restricted into Paletwa. Funding is urgently needed to replenish humanitarian supplies to serve newly displaced people. It is also likely there will be significant needs in non-displaced communities and protracted IDP camps whose movement is being restricted. With the evolving situation in Rakhine, intercommunal tensions are also closely being monitored, with 150,000 mostly stateless Rohingya IDPs still living in protracted displacement camps in central Rakhine that were established in 2012. Ten years after they entered the camps, fundamental issues such as Rohingya people's freedom of movement, access to basic services and citizenship rights remain unaddressed, limiting their ability to obtain an education, seek healthcare and explore livelihood opportunities. In 2022, this leaves them in a precarious position, heavily reliant on humanitarian assistance for their survival. The Rohingya received assistance covering a broad spectrum of needs including camp management, shelter, relief items, education, food security, health, nutrition, protection, water, sanitation, and hygiene (see a case study below). This assistance has been critical in saving lives, ensuring their protection, and alleviating their suffering. It is critical that these needs continue to be met as we respond to emerging crises in other parts of the country. 25 August 2022 also marked 5 years since the start of the forced mass displacement of Rohingya and other communities from Myanmar's Rakhine State to Bangladesh. Around a million refugees remain sheltered in Bangladesh, without immediate prospects for return.

In the **Northwest**, armed clashes have continued unabated over recent months between the MAF and various people's defence forces (PDFs), including the Chinland Defence Force (CDF), across multiple townships in Chin State, Magway and Sagaing regions. As a result, the number of IDPs is surging. The Northwest currently hosts the highest number of IDPs nationally, with more than half a million IDPs located in Sagaing Region alone, according to the latest UN figures. In addition, at least 24,280 houses and other civilian properties, including churches and monasteries, have reportedly been destroyed across the Northwest since the military takeover.⁷ Furthermore, sources have raised protection concerns regarding house raids, arbitrary arrests and indiscriminate violence, particularly in Sagaing. Restrictions on movement and access to healthcare and other essential needs were also reported. According to partners, displaced populations and host communities alike are facing shortages of food and other basic commodities because of blockages on transportation routes imposed by the de facto authorities and the ongoing restrictions on access by humanitarian partners.

The **Southeast** is the area with the second largest number of IDPs, with 283,800 people being hosted according to the latest UN figures. This is linked to the continued fighting between the MAF and the joint forces of the EAOs and PDFs across the southeast, including in eastern Bago, Kayah, Kayin, Mon, southern Shan and Tanintharyi. In eastern Bago, intermittent clashes have been reported in Kyaukkyi township since mid-May 2022, forcing thousands of people into displacement. An estimated 33,800 people are currently displaced in eastern Bago, with the majority in Kyaukkyi township, followed by Taungoo and Hntatbin townships. In Kayah and southern Shan, there has been ongoing fighting in Demoso, Hpruso, Loikaw and Pekon townships for months. Food insecurity has been highlighted as a major concern in Kayah, with reports of shortages at IDP sites in Demoso, Hpruso and Loikaw townships. In Kayah State, farmland has been contaminated with landmines, according to partners. In several townships across Kayin State, intense clashes involving massive air strikes and artillery fire have been a near daily occurrence for months, particularly in Kawkareik and Myawaddy, according to local partners. This has resulted in an unverified number of civilian casualties, destruction of civilian properties, as well as internal and cross-border displacement. Likewise, insecurity and hostilities reportedly continued in several townships in Mon State and Tanintharyi Region, although at a comparatively modest scale. The dynamics of displacement in the southeast are fluid with frequent flight and return, often followed by re-displacement.

In **Kachin State**, intense fighting mainly between the MAF and the Kachin Independence Army (KIA) has taken place particularly around Se Zin village in Hpakant township since the end of July 2022. In Se Zin village, partners report that aerial bombardment and arson attacks have destroyed an estimated 300 houses, affecting an estimated 500 households, while also resulting in an unverified number of civilian casualties. More than 3,000 people from Se Zin village have also fled their homes, seeking refuge in 10 displacement sites in Tar Ma Hkan and Haung Pa villages in Hpakant township and 10 villages in Mohnyin township. This number is expected to increase as many remain trapped in Se Zin village and are unable to safely move.

Life-changing surgery: providing rehabilitation services in Rakhine



Mohamad Omaire before and after the surgery at Dar Paing camp, Sittwe.
Photo: Action Against Hunger (ACF)

Three-year-old Mohamad Omaire lives with his family in Sar Mar Nar village near Dar Paing IDP Camp in central Rakhine. Mohamad Omaire was born with bilateral congenital talipes equinovarus, also known as "clubfeet." He could not walk, run or play like the other kids in the village. His family were very worried about his physical condition for years; however,

they could not afford to get him the necessary medical treatment.

"It was very difficult for me to see my son in pain and not living a normal life like the other kids. He could not wear shoes and could not walk without help. We had to hold his hand all the time, but his father and I did not have enough money to cure him," his mother shared.

When Mohamad Omaire's family heard from their neighbors about the Integrated Nutrition Center in the Dar Paing camp, they took their son for a check-up. This center is operated by Action Against Hunger (ACF) in cooperation with



⁷ OCHA's data on Sagaing/Magway/Chin (up to 15 August 2022),

Humanity & Inclusive (HI) with support from [the Myanmar Humanitarian Fund \(MHF\)](#). The center referred the boy for surgery and provided follow-up physiotherapy sessions after his successful operation.

“Going to the nutrition center changed my son’s life. The surgery fixed his legs. It was like a magic. He can now wear his shoes, run and play. I am very grateful to HI team for their treatment and all the support they have provided along the way,” the mother added.

Mohamad Omaire is one of many children who have benefitted from HI’s rehabilitation and nutrition services in Rakhine State.

“It feels satisfying to see an immediate impact of our services in the lives of these children. This is the minimum that we can do to bring back a smile on their faces in such difficult circumstances in Myanmar,” explained one of HI’s physiotherapists.

Supporting better living conditions for displaced communities in Rakhine



A displacement sites in Mrauk U, Rakhine State. Photo: People in Need (PIN)

Almost two years after the previous round of fighting ended between the MAF and the AA in 2020, almost 75,000 people remain displaced across 160 sites in Rakhine and southern Chin where they continue to live mostly in makeshift shelters.

The NGO ‘People in Need’ (PIN) is providing shelter assistance to these conflict-affected communities in Rakhine in preparation for the rainy season. In 2022, they distributed 230 emergency shelter kits to 9 displacement sites with support from [the Myanmar Humanitarian Fund \(MHF\)](#).

U Ba Kyaw is a site leader at the Pya Hla IDP site in Mrauk U township where the shelter conditions were very poor before the international assistance arrived.

“Our shelters are made of bamboo and tarpaulin, constructed in previous years as a temporary measure. Most of our shelters ...are damaged, causing difficulties for the IDPs who live there,” he said. “PIN distributed shelter kits and other necessities to aid us. International organizations and UN agencies continue to provide us with shelter, food, and cash distribution. Thank you to these organizations and donors for supporting us.”

Regularly impacted by cyclones and floods, and home to some of the most vulnerable displaced people in the country, Rakhine state is one of Myanmar’s most disaster-affected areas.

During the rainy season, many IDPs like Daw Yin Nu Sein face miserable living conditions. The 62-year-old lives at the Wet Hla IDP site with her granddaughter. By borrowing money, she was able to temporarily repair her small hut when it was damaged by strong winds and bad weather, but she needs more support.

“I cannot wait until assistance comes because my small hut was already damaged. Even though I do not have money to rebuild the house, I borrowed it from others at high rates. This small hut cost me 80,000 kyats (\$50). Regardless of borrowing money, I was afraid that if heavy rain and strong winds came, we could not stay at our hut,” she explains.

HUMANITARIAN RESPONSE

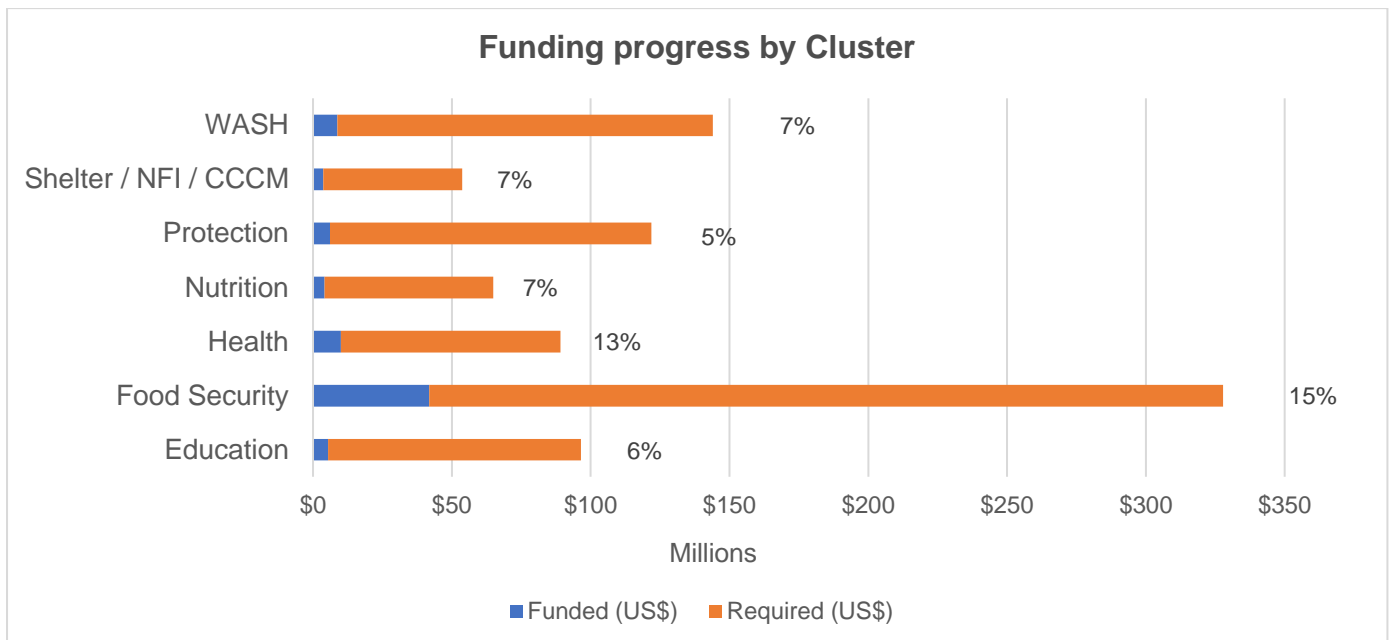
Humanitarian Access: Humanitarian agencies continue to face serious access challenges across the country. Heavy bureaucratic processes and attempts to interfere with humanitarian activities were compounded by ongoing fighting. Restricted mobile telecommunications and internet data services, particularly in Sagaing and Tanintharyi regions, are hampering the ability of humanitarian actors to effectively communicate with each other and with the affected population. As discussed above, after a period of relative calm since the informal ceasefire in November 2020, there are escalating tensions between the AA and MAF with the deployment of additional troops, new or expanded checkpoints, and roadblocks all further restricting humanitarian access in Rakhine State.

The security situation is impacting on humanitarian operations, especially in conflict areas, with partners facing increased risks of being collaterally impacted by IEDs or being caught in crossfire, either when traveling along roads that are disputed or when they are in proximity of a potential target. To reach people in need, partners often need to

pass several military checkpoints, facing harassment and increasingly heavy scrutiny along the way. In areas affected by conflict, partners reported military personnel staffing checkpoints, restricting and/or limiting the passage of humanitarian items, including food or medicine, alleging that these goods may be distributed to PDFs and EAOs and so cannot be allowed through.

The access environment is expected to remain challenging in the second half of 2022 with a need for continued high-level access advocacy with all sides. In the meantime, the humanitarian community will need to continue principled partnerships with local civil society organisations and community-based organisations and a mix of approaches, depending on what is best suited for the respective area that needs to be accessed.

Funding situation by cluster: Eight months in 2022, the funding level of the 2022 HRP stands at 17 per cent with all clusters seriously underfunded, threatening their ability to respond to the growing needs and gaps in response. Given the considerably wider scale of assistance planned in 2022, increased resources are urgently required to support a meaningful package of support to people in need. Funding constraints are now affecting the breadth and quality of assistance delivered by humanitarians. As part of the [HRP Mid-Year Monitoring Report](#), partners have made tough decisions about their plans and operations in the second half of the year. The consequences of underfunding and deprioritized or scaled-down activities in 2022 will be grave, including a potential worsening of malnutrition and an increase in the adoption of negative coping strategies. Donors are urged to give generously in solidarity with the people of Myanmar to prevent suffering and a loss of hard-fought development gains.



Education in Emergencies

Needs

- Across the country, there is a need to continue to advocate with the respective authorities to allow specific minority communities to access education.
- There is a shortage of textbooks in Temporary Learning Centres (TLCs) in Rakhine State and teaching and learning materials in most learning centres in other conflict-affected areas, such as Chin, Magway, Sagaing, Kachin and Kayah.
- More financial resources are required for continuation of secondary education as current funding mostly focus on Early Childhood Care and Development (ECCD) and primary education.
- There is a need to hire more volunteer teachers as more children are attending community schools. Incentive payments to attract more volunteer teachers is therefore needed.

Response

- During the first half of 2022, cluster partners reached 314,000 children out of the 1.4 million targeted (22 per cent) with education services and support.
- At the sub-national level, cluster coordinators are now in place in most locations and are able to better support partners on evidence-based planning and decision making.
- Based on community consultations, the Education Cluster has produced a common analysis of children's access to education across the country and their immediate needs.

Gaps & Constraints

- Delayed and extended waiting times at checkpoints, as well as blockages and delays with travel authorizations (TAs) continue to present significant challenges for multiple partners in delivering humanitarian assistance.
- The renewed tensions between the MAF and the AA in Rakhine have led to increased security, tougher scrutiny at checkpoints, which cumulatively make it harder to reach people in need.
- Educator capacity building is a massive and urgent gap which should be filled to enable children enrolled in community-based education pathways (such as monastic and ethnic learning centres) to have meaningful learning experiences.
- In Chin state, Magway and Sagaing, children must rely on independent education service providers and community-based models to access education as schools run by the de facto authorities remain closed. However, humanitarian support for these alternate models is currently insufficient due to access limitations. In Kayah and Shan states, distribution of assistance is being affected by increased security checkpoints.

Food Security

Needs

- The third round of the FAO-WFP Joint Food Security and Livelihoods Assessment conducted between March and May 2022, found the following:
 - Among surveyed households, 61 per cent experienced 1 shock and 30 per cent experienced 2 or more shocks due to violence and conflict. The most commonly reported shocks were economic shock, loss of employment and high prices of food and fuel. The highest impacts were reported in Kayah (56 per cent), followed by Chin (49 per cent), and Kachin (15 per cent).
 - Nationwide, household food and nutrition security is being increasingly compromised due to higher food prices and lower household incomes. Food consumption outcomes are worse in rural areas (18 per cent insufficient) than urban areas (11 per cent). In particular, nearly a third of respondents report insufficient diets in Kayah and southern Shan (31 and 29 per cent, respectively). Those without incomes and nearly one-quarter of wage/casual labourers, both on and off farms, report insufficient diets (23-25 per cent).
 - A heavier reliance on crisis or emergency livelihood-based coping strategies was reported in Kayah (54 per cent), Kayin (53 per cent) and Rakhine (51 per cent states).
 - One in five (20 per cent) of the population is reportedly food insecure, compared to one in four (25 per cent) reported in October 2021. This slight improvement in food security is likely seasonal and is not expected to be repeated in the next survey. Even in these third-round results roughly 10.8 million people, of whom 1 million are IDPs, remain food insecure.
 - Farmers are being forced to spend more on services and imported farm inputs, such as fertilizers, despite using less and reducing hired labour. This has lowered productivity. Concerns remain regarding food availability during the upcoming lean season as conditions are expected to worsen.

Response

- A fourth round of the FAO-WFP Joint Food Security and Livelihoods Assessment is underway with initial results expected in mid-September for use in the next HNO/HRP analysis.
- During the first half of 2022, the Food Security Cluster reached 2.7 million people with humanitarian assistance (67 per cent). For the humanitarian response, 66 per cent of beneficiaries reside in Yangon or Rakhine, compared to 79 per cent in the first quarter. Kayah State saw the largest increase in the number of people reached with humanitarian assistance between Q1 and Q2.
- There has been progress in accessing hard-to-reach areas. In the second quarter of 2022, food security partners have reached five new townships in Ayeyarwady Region; three new townships each in Magway and Mandalay regions; two new townships each in Kayah, Mon, and Rakhine states and Sagaing regions; and one township each in the eastern Bago region and in Chin and Kayin states.
- During the second half of 2022, the Food Security Cluster will continue to support partners in accessing hard-to-reach areas with food and cash-for-food assistance.
- Given agricultural disruptions, the Food Security Cluster will prioritize support for farmers during the winter cropping season. This includes support to vegetable production, livestock (health, animal feed to small ruminants) and livelihoods.

Gaps & Constraints

- Households continued to report a shock-driven decrease in the areas being planted with crops. The share of farmers who planted less was particularly high in Rakhine and Shan (more than 30 per cent reported planting less).
- To support agriculture, funds need to be allocated earlier in the year, so partners have ample time to conduct the necessary assessments, select households for assistance, and implement the procurement process for agriculture inputs (e.g. seeds and fertilizer).

- The sensitivity of purchasing nitrogen-based fertilizers is becoming an obstacle for Food Security Cluster partners who fear this material could be seized by the military, compromising the implementation of their programmes.

Health

Needs

- An increasing number of IDPs have rapidly developing health needs including: (1) additional frontline health service provision; (2) malaria prevention and control through rapid diagnostic test kits, anti-malaria drugs and insecticide-treated mosquito nets during the rainy season; (3) antenatal care and support to pregnant women; and (4) essential medicines.
- Myanmar has a history of low availability of medical products and the sale of sub-standard and falsified products in the market. This is being exacerbated by the current political situation and restrictions on importation, creating challenges for the local availability of medical products in the market. The Health Cluster is looking into this issue to better analyse the situation and its implications.
- Information and awareness-raising on adolescent and sexual reproductive health (SRH) has to be strengthened, with youth-friendly discussions, counselling and other SRH services very limited in hard-to-reach areas.

Response

- During the first half of 2022, health partners reached 427,000 people out of the 1.4 million targeted (30 per cent) for health assistance. This involved the provision of primary health care services, including COVID-19 activities. Of the total, 129,000 were IDPs and 23,000 non-displaced vulnerable people. A total of 157 communication disease outbreak notifications were verified and addressed through the Early Warning, Alerts and Response System (EWARS).
- During the second half of 2022, the Health Cluster response will focus on providing life-saving and primary care through mobile clinics, including reproductive, maternal, newborn, child and adolescent health (RMNCAH); trauma care; referral of serious cases for higher level specialist care; communicable disease detection and response; and rehabilitation services. However, given the current funding gap, training of health workers; contingency medical supply stockpiling; COVID-19 prevention; and continuing treatment for HIV/AIDS, tuberculosis, and non-communicable diseases, such as diabetes and hypertension, might not be provided.
- The Health Cluster will continue engaging development partners in revitalizing routine immunization, mobilizing essential medical supplies and health services such as reproductive maternal, newborn, child and adolescent health (RMNCAH), HIV/AIDs, malaria, tuberculosis, and non-communicable disease management. Furthermore, the Health Cluster will seek support of development partners in preventing the spread of the monkeypox.
- During the month of July, health partners undertook the following responses:
 - In Rakhine State, a mobile delivery unit for obstetric emergencies was piloted by a health partner in Mrauk-U township despite limited access.
 - In Kachin, 3,838 consultations were provided through mobile health activities in Bhamo, Mansi, Myitkyina, Momauk, Putao and Waingmaw townships.
 - In northern Shan, 9 mobile clinic teams provided 3,625 consultations to IDPs.
 - In Sagaing, health partners provided Tuberculosis (TB) referral support for 454 diagnosed TB cases and patient support, including consultation and infection control, for 108 cases.
 - In Kayin, 1,085 people from Hlaing Bwe town, and Kawkareik and Ka Ma Maung (Hpa-Pun) townships received health consultations through mobile clinics and 159 patients received emergency referral services. Health partners distributed 3,769 clean delivery kits to pregnant women in Kawkareik, Myawady, Hlaingbwe, Thandaunggyi, Kyarinnseikkyi townships.
 - In Mon, health partners distributed 221 clean delivery kits to pregnant women in Ye, Bilin, Kyeikhto townships.
 - In Kayah, mobile health services operated in 25 IDP camps in Demoso and Hpruso townships. Health partners referred 13 patients to public hospitals for further treatment.

Gaps & Constraints

- Inflation has negatively impacted the Health Cluster's response plan, increasing the cost of purchasing medical supplies, transportation and patient referrals. Patient referral costs are reimbursed by partners to patients and attendants, covering transportation, investigation, medicines and meals. Some partners provide direct referral transportation services using rented or organization-owned vehicles.

- Flooded paths and muddied roads caused by heavy rains continue to delay the transportation and distribution of medicines and related equipment.
- Funding gaps remain for ensuring referrals of medical emergency cases to secondary and tertiary level health facilities.
- From 1 January 2022 to 31 July 2022, there were 24 confirmed attacks on health care providers and facilities in Myanmar, resulting in 17 deaths and 1 injury.

Nutrition

Needs

- In light of poverty levels and surging inflation, increased funding for emergency nutrition referral support is needed. At present, people are reluctant to be referred on to health services because of delays and a prolonged process for reimbursement of those who can afford to pay upfront.
- A total of 75 displaced households (370 people), including 27 displaced pregnant and lactating women, in 5 displacement sites in Tar Ma Hkan village, Hpakant township, Kachin State need essential nutrition services. These households were recently displaced from Se Zin village due to armed clashes (Rapid Needs Assessment, 30 July 2022).
- In Muse and Kyaukme townships in northern Shan, life-saving nutrition supply pipelines are facing imminent breakage due to problems in logistic issues, which might affect planned nutrition interventions, including Infant and Young Child Feeding (IYCF), counselling and micronutrient supplements. The cluster is working on an improved logistics plan to avoid this breakage.
- In the Southeast, emergency support is urgently needed to respond to the recent surge in new displacement in the region. In Mon State, there are close to 10,000 people recently displaced in Thaton and Thanbyuzayat townships, while some 11,000 IDPs have returned to their places of origin in Bilin township.
- There is need for more nutrition partners in the Southeast, particularly in Mon, Kayin, Southern Shan, Kayah, eastern Bago and Tanintharyi, to strengthen coordination on nutrition responses.
- In Kayin State, a rapid mid-upper arm circumference (MUAC) screening identified 45 cases of severe acute malnutrition (SAM) and 280 cases of moderate acute malnutrition (MAM) among 3,505 children who were screened in 17 clinics and were showing proxy global acute malnutrition (GAM) 9.5 percent. This increasing proxy GAM rate is of concern as the supply pipeline is under strain from increasing needs and transportation bottlenecks.
- According to partners, the treatment program for acute malnutrition in children under 5 in Rakhine is taking longer than the nationally recommended period (on average ~70 days vs. 45 days). This is likely due to the security situation and access restrictions; a lack of resources for quality community-based interventions; and poverty, which forces people to share therapeutic foods.

Response

- During the first half of 2022, 122,000 people (12 per cent) of the 1 million targeted have accessed nutrition services and treatment across the country, with most of the assistance so far provided in Rakhine State, followed by Yangon and Kayin State.
- In displacement sites in Hpakant township in Kachin, a local partner provided nutrition services, including malnutrition screening for pregnant mothers and children under 5 and distribution of vitamin B1 and iron tablets.
- Nutrition partners conducted a series of awareness sessions and cooking demonstrations in communities and IDP camps in 13 townships.
- UNHCR, together with a local partner, conducted a joint visit to two displacement sites in Mansi township and provided primary health care services and nutrition activities. This included: MUAC screening of 21 children under 5, provision of micronutrient tablets (MNT) to 16 pregnant and lactating mothers and micronutrient powder (MNP) to the screened children, and IYCF counselling. There was no acute malnutrition detected among the screened children.
- In Rakhine State, the Nutrition Cluster conducted a Community Support Group training session for 40 staff (25 male and 15 female) from 14 nutrition agencies in July 2022. This training aimed to strengthen community-based nutrition interventions and increase awareness about nutrition information and services among wider vulnerable communities, to foster positive behaviours in Rakhine.

Gaps & Constraints

- Funding shortages, unstable internet and telecommunication services, and poor road conditions due to the rainy season have affected the ability of nutrition partners to conduct regular nutrition monitoring visits and obtain accurate nutrition data from affected people.
- The high price of fuel due to inflation has increased the cost of transport, consequently affecting the delivery of essential nutrition services and supplies within and between townships.

- Nutrition partners are strengthening community-based screening and have started to identify malnourished children in remote villages. However, there are some challenges in receiving timely treatment as the public health facilities are facing delays in nutrition supply chains and limited coverage by partners in many areas. The cluster is working closely with the nutrition teams to fill the gaps and with partners to offer referral services where needed.

Protection

Needs

- In Kachin and northern Shan, Protection Cluster partners identified the following concerns and needs in July:
 - Children and adolescents are at high risk of drug abuse, forced recruitment and human trafficking due to lack of access to formal or alternative education. In 92 out of the total 158 camps and displacement sites across Kachin and northern Shan, IDPs reported that school age children (close to 7,000) do not have access to education.
 - In northern Shan, there is a need for more vocational training and case management of victims of human trafficking. Young people are resorting to early marriages or leaving their places of origin to avoid of forced recruitment. This has exposed them to exploitation, trafficking, and drug abuse.
 - In northern Shan, women and girls reported that there is a need to repair the doors and locks of the latrines in camps, especially in Man Weingyi RC1, and there is a need to repair 12 latrines in Pan Law Lisu camp in Kutkai township (GBV Safety Audit, Q2/2022).
 - There is a need for sexual and reproductive health and rights awareness sessions targeting adolescents in the camps and relocation sites in Namtu, Manton, Kyaukme townships. There is also a potential GBV risk due to the lack of fencing and widespread drug and alcohol issues in the temporary displacement site in Kyaukme township (Inter-agency mission, July 2022).
- In the Southeast, IDPs reported on the following concerns needs during protection monitoring assessments in July:
 - There are concerns over an increase in arbitrary arrests, as well as death and injury of young males through indiscriminate shelling. Families need MHPSS support, especially for children.
 - The restrictions on movement of people prevent IDPs from accessing basic services, in particular food items and livelihoods. As a result, IDPs are resorting to harmful coping mechanisms, including low food consumption, child labour, and early marriage for girls.
 - IDPs, especially women and girls, reported a lack of privacy due to overcrowded accommodation.
 - The destruction of houses and other properties in places of origin is preventing IDPs from returning.
 - There are reports of arbitrary taxation and extortion, especially in Tanintharyi Region.
- In northwest Myanmar, there was an increase of 99,376 new IDPs in July, most of them are in Sagaing. Existing services remain limited compared to the needs. They urgently need protection interventions, including child protection, GBV services, mine awareness, and mental health and psychosocial support (MHPSS).
- In central Rakhine, there are increasing reports of extortion incidents during the imposed night curfew, according to protection partners.

Response

- During the first half of 2022, protection partners provided protection assistance and targeted lifesaving services to 659,000 affected people (33 per cent of HRP target). Specifically:
 - 95,000 people received children protection services.
 - 90,000 people received GBV services in 93 townships. About 60 per cent of them are IDPs, including displaced stateless people, and 21 per cent are vulnerable crisis-affected people.
 - 87,000 people received Mine Action services.
- During the second half of 2022, the Protection Cluster will prioritize the following responses in the absence of sufficient funding:
 - Protection monitoring, community-based protection, direct assistance and referral for persons with specific needs, and legal aid support, targeting mainly IDPs.
 - The Child Protection AoR partners will expand its legal services to children arrested and detained, particularly Rohingya children who are detained outside of Rakhine due to smuggling and trafficking.
 - GBV responses will mainly focus on life-saving services, including case management, safe-house, and psychosocial support for IDPs and stateless groups.
 - The Mine Action AoR will focus on advocacy efforts and scale up explosive ordnance risk education (EORE) activities and victim assistance.
- A sub-national protection coordination structure was set up to support partners and facilitate responses in northwest Myanmar. Local partners are co-chairing this forum to further enhance localisation efforts.

- Nationwide, Mine Action AoR partners have been conducting capacity building and village contamination assessments because of increasing casualties from explosive ordnance. Other activities that have been strengthened include referral pathways, service mapping, legal services, developing contingency plans, and advocacy efforts.
- In central Rakhine, the Protection Cluster developed a 4W mapping and Rapid Information, Communication, and Accountability Assessment (RICAA) tool for partners to capture information needs, preferred communication channels, and existing accountability mechanism available for at-risk communities. These tools were developed as part of the transitioning of the Communication with Communities Working Group into an AAP WG in line with operational protocols.
- In Rakhine, GBV partners distributed 182 dignity kits and 26 clean delivery kits in displacement sites in Buthidaung township as part of a joint response in July.
- In Shan South, GBV partners distributed 1,000 dignity kits in IDP locations in Pinlaung, Nyaung Shwe, Hsihseng and Pekon townships through local partners in July.
- In Kachin, 862 dignity kits were distributed in IDP camps in Bhamo, Mansi and Momauk townships in July.
- The child protection information management system (CPIMS+/Primero) was launched in Myanmar in July for the first time to further harmonize case management processes. This initiative will promote effective case management for vulnerable children and help case-management staff move away from the cumbersome paper-based system, while adhering to high data protection standards. A total of 2,893 humanitarian workers, including community-based volunteers, have received capacity building support on the system during the second quarter of 2022.
- Nationwide, child protection partners, including many local organizations, distributed 10,250 child protection kits in July.
- To address the increasing reports of children casualties from explosive ordnance in northwest Myanmar, a virtual Training of Trainers (ToT) was organized in July for Child Protection actors operating in the Northwest. In the Southeast, partners undertook the following responses:
 - UNHCR organized trainings on Accountability towards Affected People (AAP) and MHPSS for members of the Protection Network in Kayah to strengthen their work in these thematic areas.
 - In Bago Region, child protection partners distributed child protection kits in Taungoo township to IDPs who fled from Kyaukkyi township due armed clashes.
 - In Kayah, protection partners conducted awareness raising sessions on EO risk, child protection, psychosocial support, and GBV for affected people in Pekon, Demoso and Hpruso townships.
- In central Rakhine, UNHCR and an international NGO organized a joint assessment exercise for IDPs from the AA-MAF conflict in Ann township. During the field mission, partners distributed messages pertinent to safe, voluntary and informed decisions around IDPs returns.
- In Kachin, 4 UN agencies, together with their implementing partners, developed a joint action plan on durable solutions, including return to areas of origin and local integration for approximately 14,500 IDPs upon their request. The joint action plan aims to support selected initiatives in collaboration with local partners, targeting around 7,100 people in 14 displacement sites in 3 townships. The plan does not include any new commitments but represents an alignment of existing programmes. Upon consultation with the IDPs in the 14 sites, the following key support is needed as part of this plan: 524 individual shelters in two sites; water supply in all sites, latrines for about 581 households; transitional food assistance; household electricity; protection services, including legal consultation and assistance and GBV services; strengthening of community-structures and other public services such as education and health.

Gaps & Constraints

- Human rights defenders continue to increasingly be targeted and scrutinized. Greater protection needs to be provided to lawyers responding to the arrested and detained children and young people.
- Access constraints and detention of humanitarian workers in the Northwest continue to be a huge challenge. Advocacy for inter-sectoral humanitarian work, access and safety of humanitarian workers in this part of the country remains a top priority.
- Lack of GBV partner coverage in the Northwest is a huge challenge. The GBV AoR is currently coordinating with the Protection Cluster and the Child Protection AoR to identify operating local partners to expand the coverage.
- In Kayin, there are no partners covering GBV case management in Myawaddy township. Currently, only legal services are available for GBV survivors through one legal partner. The GBV AoR group is engaging with the Protection Cluster to identify further local resources.
- In northern Rakhine, field missions to IDPs sites in Rathedaung were delayed for up to five hours because of security checks, and TAs were not approved to some specific IDP sites. In some IDP locations, armed groups demanded submission of official documents.

- There are limited child protection actors available to respond to the deteriorating situation in eastern Bago. This is worsened by restrictions on access and insecurity.
- Telecommunication services have been interrupted in several IDP sites in Kayah over recent months due to airstrikes. Telecommunications problems, security concerns, coupled with access restrictions for local humanitarian actors, are limiting the effectiveness of the response. The Protection Cluster is looking into ways to better coordinate responses in this state in the absence of telecommunication services.
- Access to six displacement sites in Mong Koe in northern Shan remained very limited. In addition, local partners, reported that they are facing challenges in transporting relief items and food to two villages in Mohyin townships in Kachin state, where IDPs from Se Zin village, Hpakant township, are temporarily staying with their relatives. Cash-based interventions, such as cash for food, are being considered for areas with access challenges.

Shelter, Non-Food Items (NFIs), Camp Coordination and Camp Management (CCCM)

Needs

- In Rakhine and southern Chin, partners are planning for potential new needs as a result of tensions in Rakhine with new and re-displacement of returned IDPs considered possible, on top of existing IDP sites.
- In central Rakhine, 551 of the 2,256 camp longhouses, which shelter more than 28,000 Rohingya and Kaman IDPs, are in urgent need of reconstruction. Funding has now been secured for 310 longhouses; the other 241 longhouses remain structurally unsound and require immediate action for the safety of the IDPs. This presents a US\$2.1 million funding gap.
- In Kachin State, more than 10,000 shelters need to be constructed or repaired. Of these, the Shelter Cluster has planned to construct around 2,540 shelters by the end of 2022. In addition, more than 3,500 IDPs in 9 camps in Hpakant, Mansi, Mogaung, Myitkyina and Waingmaw townships urgently need to be relocated to a new site due to the expiration of land agreement for site. The shelter construction cost for the relocation site is estimated at US\$1 million.
- In Magway, an assessment by partners in late July reported a need for new shelters and renovated roofs, latrines, and bathrooms for about 800 displaced households in 3 camps in Kyaukhtu town of Saw township.
- In southeast Myanmar, the trend of population movement continues to be fluid, given the volatile security situation in almost all states and regions. Large displacement, spontaneous returns and secondary displacement are causing additional shelter and NFI needs in the Southeast.

Response

- During the first half of 2022, a total of 276,500 people (44 per cent of the 621,700 people targeted for assistance in 2022) were provided with Shelter/NFI and CCCM services across the country. It is important to note that the number of IDPs is on the rise nationally due to ongoing armed conflict, which is resulting in increased Shelter/NFI/CCCM needs.
- In Kachin State and as of 31 July, 1,486 out of the planned 2,540 shelters have been constructed or repaired. Cluster partners have also supported camp running costs by partially covering electricity or fuel usage in 132 camps in Kachin and northern Shan.
- Since the beginning of 2022, 206 shelters have been constructed in IDP camps in Kyaukpyu, Pauktaw and Sittwe townships, in central Rakhine, to provide safe and dignified housing for more than 9,000 IDPs. In parallel, 10,405 households comprised of 55,725 IDPs in Rohingya and Kaman camps in these 3 townships received full NFIs kits that replenished their key household items.

Gaps & Constraints

- In Kachin State, US\$5 million is still required for the construction of 8,448 shelter units to meet all the identified needs in the state.
- In Rakhine, land issues around the IDP camps in Sittwe township have caused delays in shelter and infrastructure construction, as well as other general service delivery, affecting the more than 106,000 Rohingya IDPs.
- Access to the camps in Pauktaw township, which are home to more than 25,000 IDPs, is significantly obstructed due to a new checkpoint in Sittwe township. Service providers must spend at least four hours per day undergoing the lengthy checking process for boat travel. Continued advocacy is needed to alleviate the increased securitization of this water route for humanitarian actors.
- In southeast Myanmar, the provision of shelter materials and NFIs is still in short supply in affected townships due to restrictions for both service provision and the movement of service providers (transporters).

Water, Sanitation and Hygiene

Needs

- In Rakhine, 16 per cent of 135 AA-MAF displacement sites lack sufficient water; 34 per cent lack appropriate sanitation; and 51 per cent have hygiene gaps (Cluster 3W analysis, July 2022).

- In northern Rakhine, there is an urgent need for WASH services, including water points and toilets for people with disabilities (GBV Safety Audit, July 2022). Communicable diseases are spreading during the rainy season due to poor drainage and overcrowding in the IDP camps.
- In Chin, 87 per cent of 211 displacements sites covered by WASH partners lack appropriate sanitation and 98 per cent of them had hygiene gaps in June (Cluster 3W analysis, July 2022).
- In northern Shan, WASH needs were reported in 38 protracted camps hosting 10,396 IDPs. These include critical water gaps at 7 per cent of the sites, sanitation gaps at 28 per cent of the camps, and hygiene gaps at 36 per cent of the sites (4W Q2, 2022).
- In Kachin State, latrine desludging activities are still required in seven camps in Myitkyina and Waingmaw townships.

Response

- During the first half of 2022, a total of 790,000 people (38 per cent) out of the targeted 2.1 million received WASH services across the country. Specifically:
 - Across Rakhine State, partners have provided 55 per cent of the target population with water, 65 per cent with sanitation services, and 79 per cent with hygiene interventions.
 - In the Yangon region, partners reached 72 per cent of the target population, with distribution of purified drinking water and 17 per cent with hygiene interventions to vulnerable people living in informal settlements in Hlaingtharya township in peri-urban Yangon.
 - In the Northwest (Chin, Magway and Sagaing) 16 per cent of the targeted population was reached with water, 19 per cent with sanitation services, and 34 per cent with hygiene interventions.
 - In Kachin State, partners reached 65 per cent of the target population with water, 77 per cent with sanitation services and 70 per cent with hygiene interventions.
 - In northern Shan, partners reached 30 per cent of the target population with water, 65 per cent with sanitation services, and 51 per cent with hygiene interventions.
 - In southeast Myanmar, cluster partners reached 56 per cent of the target population with water, 34 per cent with sanitation services, and 60 per cent with hygiene interventions.
- In July, the following WASH responses were undertaken:
 - In the Northwest, WASH Cluster partners covered 211 of 320 displacement sites, reaching 51,151 IDPs across 7 townships in Chin State; 21 of 52 displacement sites in Magway Region, reaching 43,685 IDPs across 4 townships; and 58 of 245 displacement sites in Sagaing Region, reaching 215,756 IDPs across 21 townships. Partners reached 18 per cent of the targeted population with water, 13 per cent with sanitation services, and 2 per cent with hygiene interventions (3Ws WASH Analysis).
 - In Kachin, partners distributed 198 water purifiers and carried out desludging or renovation of 455 latrines in IDP sites. In addition, 2,385 students received hygiene items from partners in July.
 - In northern Shan, WASH partners distributed hygiene kits, water containers and water purification items in both temporary displacement sites and protracted camps in Kyaukme and Muse township, benefiting 2,465 IDPs.
 - In Rakhine, WASH partners provided critical WASH services to 91 AA-MAF displacement sites, reaching 42,393 people across 8 townships. These included 21 water filters, 75 jerrycans, 1,455 hygiene kits, 2,620 soap bars, sanitary pads for about 1,500 women and girls and 108 hygiene promotion sessions at displacement sites in Kyauktaw, Minbya, Mrauk-U, Myabon, Ponnagyun and Sittwe townships.

Gaps & Constraints

- In Rakhine, delivery of humanitarian interventions continues to be impeded by access constraints due to expired MOUs
- Land issues continue to present a significant challenge for WASH infrastructure, particularly in IDPs camps in Sittwe township, where landlords are trying to claim land compensation from humanitarian organizations.
- In northwest Myanmar, WASH responses were implemented in a low-profile approach, with partners facing challenges in reaching affected people due to humanitarian access constraints, blocked transportation and insecurity.
- Travel restrictions imposed on humanitarians due to insecurity remain in Monekoe sub-township of Muse in northern Shan, at the border areas between northern and southern Shan, as well as the border areas of southern Shan and Kayah states.

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