

MYANMAR: COVID-19

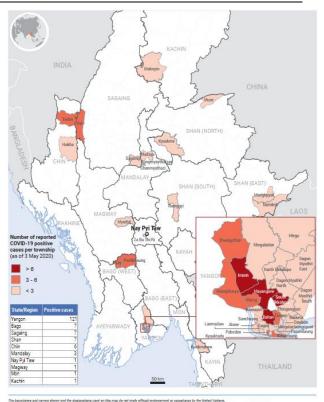
Situation Report No. 03

4 May 2020

This report is produced by OCHA Myanmar in collaboration with Inter-Cluster Coordination Group, the Maungdaw Inter Agency Group and wider humanitarian partners. The next report will be issued on or around 18 May 2020.

HIGHLIGHTS

- 155 cases have been confirmed with six fatalities and 43 recoveries.
- Over 60,300 migrant workers had returned from abroad as of 23 April, according to the International Organization for Migration. As of 2 May, around 42,600 people had been quarantined in over 8,300 facilities across the country.
- As of 30 April, five internally displaced people (IDPs) in Myebon Township of Rakhine State had been home quarantined, after returning from Yangon.
- Preparedness and response efforts, as well as risk • communication and community engagement by Government and humanitarian partners continue, reaching IDPs and communities in almost all conflict-affected areas as well as returning migrants in quarantine facilities.
- The Government announced a budget of 2.4 billion Myanmar • Kyats (US\$1.7million) for preventive measures in IDP camps.
- On 20 April, the World Bank approved a US\$50 million loan for the Myanmar COVID-19 Emergency Response Project.
- An Addendum to the 2020 Humanitarian Response Plan has been finalized targeting over 900,000 people, including 50,000 returning migrants and with an additional US\$46 million funding requirement.

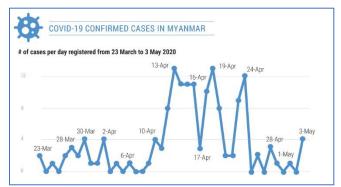


SITUATION OVERVIEW



Confirmed cases

Recovered



 3_3 Persons tested



TOTAL CASES: As of 4 May, there are 155 confirmed cases in Myanmar. Most of the cases have been reported in Yangon Region, with 78 per cent, while 10 states and regions out of 15 (including Nay Pyi Taw Union Territory), now have reported cases. As of 4 May, there has been no confirmed case of COVID-19 in camps or displacement sites for IDPs or in communities affected by conflicts.

HEALTH FACILITIES: On 21 April, the Government opened a new medical center in Hlegu Township of

Yangon able to treat up to 600 patients, with the possibility to expand to treat up to 2,000 patients. The facility has four intensive care units (ICU) capable to support almost 40 patients, and a special ward with two oxygen therapy rooms for 240 patients. Given the high proportion of confirmed cases and limited ICU beds in Yangon, the Government of Myanmar has also repurposed a training facility into a medical center.

RETURN OF MIGRANT WORKERS: As of 23 April, more than 60,300 migrant workers had returned from abroad, according to IOM, with the number of official returns remaining very low due to the closure of borders, and with only a small number of returns permitted through the Three Pagodas Pass checkpoint. Thousands more are believed to have returned through unofficial border crossings. Public sources indicated as many as 25,000 migrants from China were due to return through border gates in Laukkaing and Chinshwehaw towns of northern Shan. Many returning migrants have a range of humanitarian needs, particularly during the 21-day quarantine period.

- Returns from China into Shan State: As of 23 April, close to 1,100 migrants had returned to Laukkaing town in northern Shan. Due to insufficient quarantine facilities and other challenges, local authorities are sending the returning people directly to their towns of origin. The National Democratic Alliance Army in eastern Shan stated that it had hosted over 3,000 migrants who would be transferred to the regional Government following quarantine. Similarly, the Restoration Council of Shan State/Shan State Army (South) had accommodated some 1,000 returning migrants from China and Thailand and was seeking support from the Government for food during the quarantine period.
- Returns from China into Kachin State: As of 28 April, returns into Kachin State also picked up, with 3,125 returns, mainly from China and through the Lweje border gate, according to data from the Kachin State Government (695 internal migrants also returned from other states and regions of Myanmar). Returnees are being transported to Myitkyina, and from there to their communities of origin where they will stay in community-based facility quarantine centers.
- Returns from Thailand: The border with Thailand was expected to re-open on 1 May to allow a second large influx of migrants (estimated 20,000 to 50,000 returns). The Government of Myanmar had requested to the Thai Government to only allow 2,500 returnees per day through the Myawaddy border gate. However, due to the extension of the Emergency Decree in Thailand until 31 May, returns are delayed for a few more days to allow for the necessary internal transportation arrangements to be put in place by Thai authorities. As of 28 April, more than 16,300 Myanmar migrants in Thailand had registered online to return home, according to IOM. Approximately 2,000 returning migrants are expected to be quarantined in Myawaddy, while the remainder will be transported from the border to their communities for community-based quarantine.
- Quarantine facilities: According to MoHS, as of 2 May, around 8,400 quarantine facilities had been established across the country. In conflict-affected areas, 461 facilities host over 3,500 people in Shan, 518 facilities host over 5,700 people in Kachin, 367 facilities host more than 230 people in Kayin and 209 facilities host around 2,000 people in Rakhine.

PREVENTION AND RESPONSE

GOVERNMENT PREPAREDNESS AND RESPONSE: The Government had budgeted to spend 2.4 billion Myanmar Kyats (US\$1.7 million) for preventive measures in IDP camps throughout the country. The Ministry of Social Welfare, Relief and Resettlement (MoSWRR) continued its response efforts, and together with national and international partners, delivered hygiene items (soap, masks, washbasins and infrared thermometers to IDP camps), and provided awareness sessions and psychosocial support. Below is a summary of support provided by MoSWRR across different states (19 and 28 April).

STATE	FACILITY	ITEM	UNIT QUANTITY	BENEFICIARY
Rakhine	Kyauk Ta Lone	Soap bar	>260	> 360 households
		Mask	>730	
		Soap bar	>10,600	
	7 camps	Mask	>11,750	10,600 households
		Washbasin	10	
		Thermometer	3	
	3 quarantine facilities	Soap bar	200	People released from prisons
		Soap bar	3,670	
		Mask	3,670	

Kachin	No. of camps TBC	Washbasin	7	3,000 households
		Thermometer	7	
		Vinyl poster	10	
		Soap bar	740	
Shan (north)	6 camps	Mask	980	600 households
		Washbasin	4	
		Thermometer	3	
Kayin	2 camps	Washbasin	18	870 households
		Thermometer	2	

PREPAREDNESS AND RESPONSE BY HUMANITARIAN PARTNERS: While maintaining ongoing life-saving humanitarian operations, humanitarian organizations continue to scale up COVID-19 prevention and response preparedness activities in camps, displacement sites and conflict-affected areas, as well as activities in support of Government to provide basic assistance to returning migrant workers in quarantine facilities.

INTERNALLY DISPLACED AND CONFLICT-AFFECTED POPULATION

PROTECTION

- In Rakhine State, the United Nations Population Fund (UNFPA) provided nearly 120 dignity kits to women at quarantine centers in Sittwe. Gender-based violence (GBV) case management (including online services), small-scale psychosocial support (PSS) and GBV safety audits are ongoing. UNFPA also plans to provide PPE (gloves and masks) for GBV staff providing GBV services for women and girls in communities.
- In Chin State, UNFPA together with the Myanmar Enhancement to Empower Tribal (MEET) provided 1,000 dignity kits to women and girls and clean delivery kits to 200 pregnant women in Paletwa. The Triangle Génération Humanitaire (TGH) is currently working on alternative measures to provide PSS support to crisis affected children. A COVID-19 coloring book with child-friendly prevention/Mental Health and Psychosocial Support (MHPSS) messages has been finalized and a first round of samples will be distributed to 600 children (aged 6-9). TGH is planning to strengthen family-based PSS activities/community-based child protection.
- In Shan State (north), GBV case-management and PSS as well as provision of safe house/temporary shelter are ongoing. GBV case workers from camps continue providing COVID-19 awareness activities at Women and Girls Centers (WGCs). GBV survivors are now able to access services through case workers from camps and directly call the GBV hotline of the International Rescue Committee (IRC) call center. Child Protection Working Group provided hygiene and prevention supplies to 10 institutions under the Department of Social Welfare (DSW). The Karuna Mission Social Solidarity is providing remote case management and PSS services.
- <u>In Kachin State</u>, UNFPA, along with Metta and the Myanmar Medical Association (MMA), plans to distribute more than 400 dignity kits to women and girls in quarantine centers in the coming week. GBV case management, small-scale PSS, provision of safe house/temporary shelter and MHPSS groups are ongoing.
- In Kayin State, UNFPA, in coordination with the government, non-government organizations (NGOs) and civil society organizations (CSOs), plans to distribute around 3,500 dignity kits to women and girls in quarantine centers. Integrated Sexual and Reproductive Health and Rights (SRHR)/GBV services as well as clinical care for GBV survivors are ongoing.

WATER, SANITATION, HYGIENE

• In Rakhine State, the WASH cluster partners continued to support some 130,000 Rohingya IDPs and over 47,000 Rakhine IDPs in new displacement sites with provision of soap bars and installation of handwashing stations. World Vision Myanmar (WVM) provided around 11 tons of soaps to some 42,400 people in 80 villages. UNICEF will provide up to 8 litres of water per person daily until the onset of monsoon in Pauktaw Township, while other partners are also providing drinking water. Over 16,000 families in IDP camps received monthly hygiene kits from the cluster partners. Additionally, WVM has provided liquid soap and hand sanitizer in 17 displacement sites as well as in other 17 villages in Mrauk-U township. WVM also tested water quality around 180 water point-of-use and 53 drinking water sources from 30 villages in the month of April. WVM has provided water purification sachets for one-month safe drinking water to over 3,700 households for a total of 20,500 individuals.

- In Kachin State, the cluster partners have set up handwashing stations with soaps and distributed toothpastes and brushes, as well as water bottles for over 4,100 people in some 220 quarantine facilities. Additionally, the partners provided hygiene items and Information, Education and Communication (IEC) materials to more than 24,600 people living in nearly 50 IDP camps. OXFAM constructed handwashing stations with soaps and provided hand sanitizers and nutrition support for 1,250 vulnerable people.
- <u>In both states</u>, WVM provided 10,000 surgical masks and 10,000 bars of anti-bacterial soap for IDPs through the Department of Disaster Management (DDM) COVID-19 Response Team.
- <u>In all locations</u>, the Red Cross Movement distributed over 56,300 surgical masks, 27,200 bottles of hand sanitizer, 5,180 bars of soap to most vulnerable communities. The WVM also provided 10,400 bottles of hand sanitizer, 75,800 gloves, 140 bottles of disinfection solution, 20,000 bars of soap, 7,520 aprons, 200 googles, 2,700 surgical gowns, 500 caps, 2,200 boxes of chorine and 450 boxes of bleaching powder.

EDUCATION

- <u>In all locations</u>, children are currently unable to access education and teachers to attend trainings. The Education in Emergencies (EiE) partners in all states and regions continue to pay volunteer teachers and some continue rehabilitation work in education facilities.
- In Kachin and Shan (north), EiE partners are undertaking preparedness planning for education to continue.
- <u>In Kayin State</u>, the partners are supporting the State Education Department to distribute IEC materials and mitigate the risks of using schools used as quarantine centers.
- <u>In Rakhine</u>, the EiE partners continue to provide support to volunteer teachers in IDP camps in Rakhine through remote monitoring and information sharing.

HEALTH

• <u>In all locations</u>, the Health cluster adapted programmes and prioritized infection prevention and control measures to ensure essential services are delivered in the Humanitarian Response Plan (HRP) target areas. WVM supported the Township Health Departments and General Administration Departments (GAD) across the conflict-affected areas and provided 2,660 sets of personal protective equipment (PPE), 8,360 surgical and KN95 masks and 480 non-touch thermometers. Additionally, over 450 masks produced under UN Women livelihood support programme were distributed in Sittwe for those quarantined in two facilities as well as to the volunteers.

SHELTER, NON-FOOD ITEMS, CAMP COORDINATION AND CAMP MANAGEMENT

- <u>In all locations</u>, the cluster is working with local organizations and government authorities to provide nonfood items (NFIs) and other essential items, including emergency tents and washing machines, for both camp-based and non-camp-based quarantine facilities.
- <u>In Kachin State</u>, the cluster partners provided NFIs, including blankets, mosquito nets, plastic mats and tarpaulin to quarantine facilities in Bhamo and Myikyina towns.
- <u>In Shan State (north)</u>, the cluster partners have provided NFIs to schools, which are being used as quarantine facilities in Kyaukme, Lashio, Namtu, Namhkan, Muse, Kutkai, and Laukkaing.
- <u>In Rakhine State</u>, the cluster partners provided NFIs to eight quarantine facilities across Rakhine hosting 250 people.



NUTRITION

- Community nutrition activities in all parts of Myanmar, such as cooking demonstration, nutrition awareness sessions and mother-to-mother support group activities are suspended due to the COVID-19 outbreak.
- <u>In Kachin State</u>, the sector partners continue to provide minimal nutrition services, such as screening of acute malnutrition, growth monitoring, and Infant and Young Child Feeding (IYCF) counseling in home visits.
- In Rakhine State, essential nutrition services, such as screening, referral and treatment of children with severe acute malnutrition (SAM) and moderate acute malnutrition (MAM) as well as awareness to the staff and beneficiaries are ongoing.

- In Shan State (north), screening and referral of children with severe acute malnutrition with complication, except for IYCF counseling, is ongoing.
- <u>In Chin State</u>, screening, referral and treatment of children with SAM and MAM continue, while pregnant and lactating women are receiving key nutrition messages during antenatal care visits.

FOOD SECURITY

- In Kachin and Shan (north), WFP has completed the April distribution cycle for emergency relief activities with two- to three-month rations. Local CSOs and NGOs in Shan (north), with support from GAD, provided food items to eight villages in Lashio Township, where there is a food shortage and limited livelihoods.
- In Rakhine State, WFP distribution cycle for emergency relief activities is ongoing. WFP is introducing remote monitoring in its operational areas to track the food and nutrition security situation of WFP-supported beneficiaries. Food and Agriculture Organization (FAO) organized a workshop for Disaster Risk Reduction (DRR) in Sittwe to restore and protect the agriculture livelihoods of vulnerable communities through DRR. Additionally, WVM distributed over 710 tons of food rations to over 42,400 beneficiaries in 81 conflict-affected villages across Rakhine.

- WFP is coordinating the consolidated procurement of key personal protective equipment such as masks, gloves and basic hygiene supplies for humanitarian organizations.
- With pledges from the European Union and Switzerland, WFP is arranging chartered flights connecting Yangon to Kuala Lumpur on a weekly basis in May.
- The air service will provide access for humanitarian workers and help transport humanitarian cargo. WFP is promoting the use of its newly established Consolidation Hub in Guangzhou, China to humanitarian partners for storing and forwarding COVID-19-related humanitarian cargo.

MAUNGDAW INTER AGENCY GROUP

- The Maungdaw Inter Agency Group (MIAG) continued to strengthen prevention activities and operational
 response in support of the Government and WHO. Response efforts are closely coordinated with the Red
 Cross Movement. UNHCR and UNFPA, on behalf of MIAG, participate in the COVID-19 taskforce, based in
 Sittwe, to ensure synergy and information sharing across the response in Rakhine.
- The United Nations and non-governmental organizations are complementing MoHS activities, including
 through the printing and distribution of IEC materials. Additional awareness raising has been incorporated
 into regular programmes, including dissemination of key messages during food distribution, with staff
 members also delivering relevant messages through small group awareness sessions at a community level.
- WASH activities are also taking place, including the distribution of hygiene items, additional soap and hand sanitizer in displacement sites and in communities. The installation of handwashing/water points, and latrines is also underway in IDP and quarantine/isolation sites as well as busy areas, e.g. markets.

RESPONSE TO PERSONS RELEASED FROM DETENTION CENTERS: Around 900 Rohingya men, women and children, and an unconfirmed number of Rakhine people had returned to Rakhine State, after release from detention centers on 17 April and assigned to Rakhine State Government designated quarantine facilities for 21 days. This followed the amnesty from the President on 17 April.

- On 19 and 20 April, Relief International (IR) provided NFIs and hygiene kits for some 92 Rohingya men, women and children in three quarantine facilities in Mrauk-U Township. In addition, RI has set up 10 latrines, four bathing places, six washbasins at the facilities, and provided three tanks of water. RI also provided nutritional support, clothing and toys for children, and mobile phone top-up cards for the women.
- UNICEF and WASH clusters provided hygiene kits, water filters, jerrycans to all people released in three quarantine facilities in Sittwe Township. UNHCR, LWF and Save the Children distributed NFI kits at all the three centers while UNFPA distributed dignity kits to all the women. UN Women has donated 600 cloth masks, which have been produced locally by conflict-affected women, to be distributed in the three Sittwe quarantine facilities and in one Mrauk-U facility.

RESPONSE TO RETURNING MIGRANT WORKERS:

- IOM continues to support the Ministry of Health and Sports and State/Region Health Departments in Kachin, Rakhine, Mon, Kayin and Yangon in surveillance and health screenings for COVID-19 near points of entry.
- UNHCR provided 100 NFI kits to quarantine facilities in Kayin, 350 sets of IEC materials and 280 blankets to quarantine facilities in Kachin, 20 washing machines to the quarantine facility near the border crossing at Waingmaw Town of Kachin, and 700 sets of blankets and mosquito nets to quarantine facilities under the GADs of Momauk and Bhamo towns in Kachin State.
- The International Labour Organization (ILO), in coordination with local partners and supported by LIFT and the Australian Aid, is providing hygiene kits and IEC materials on COVID-19 prevention in Kachin, Shan and Kayin states, in Bago and Tanintharyi regions, as well as in Yangon, reaching an estimated 25,220 beneficiaries as of mid-April.
- WFP has deployed an emergency response team to Myawaddy Township along the Thai-Myanmar border. On 12 April, WFP donated 13 tons of rice for 2,500 people at the Myawaddy gate quarantine facilities. On 21 April, WFP delivered meal boxes to 800 people who had completed the quarantine period in Hpa-an. Since 22 April, WFP in partnership with ACCESS Advisory Myanmar has been providing three meals a day at the facility quarantine centers under the guidance of the concerned government departments in Myawaddy.
- Starting from May and in partnership with WVM and ACCESS Advisory, WFP plans to provide meal boxes for 21 days for 15,000 migrant returnees in quarantine centers in Myawaddy, Hpa-An and Kyarinseikgyi townships. WFP also aims to provide one-time cooked meals to around 30,000 migrant returnees at Friendship Bridge in Myawaddy.
- In Mon State, WFP has provided in-kind food assistance for 3,000 migrant returnees who are in quarantines centers for 21 days in Mawlamyine Township. Save the Children has provided meals to 800 people for 14 days at quarantine centers in Hpa-An and Kyainseikgyi townships.
- UN Women and its partners are supporting 10 quarantine centers in Kayin State with financial support for PPE, IEC and dignity kits for women, while UNFPA is working with the DSW to support women returning migrants and has provided them with dignity kits in Muse.

OPERATIONAL CHALLENGES

A number of challenges continue to disrupt and/or delay operations across all sectoral response in all conflictaffected areas, and/or in areas where returning migrants are hosted in quarantine. Below is a summary of operational challenges reported by humanitarian partners across sectors/clusters.

- Shortage of local staff
- Transportation (lack of)
- Insecurity
- Internet shutdown
- Restrictions on gatherings
- Unclear movement restrictions
- Restrictions to enter camps
- Delay in procurement
- Increase in cost of materials
- Closure of local markets/supply

IMPACT ON ONGOING HUMANITARIAN OPERATIONS

Humanitarian partners continue to provide live-saving assistance across all sectors and conflict-affected areas. However, the evolving situation with the COVID-19 has had an impact on ongoing or planned humanitarian response across the targeted locations, including due to preventive measures introduced in efforts to reduce the risk of introduction of or exposure to the virus, increase in caseload, remote management, prioritization of resources and adjustment of operations, etc.

PROTECTION	- Temporary suspension of child-friendly spaces, alternative means to provide mental health
	and psychosocial support are being sought.

	 Conducting trainings/awareness sessions are no longer possible, so modalities have been adapted in Chin State. GBV prevention activities and large-scale awareness/outreach sessions are suspended in Rakhine, Kayin and northern Shan. Most of the partners have suspended their child protection activities, which has an impact on child protection programmes in Lashio, Kutkai, Muse and Namhkan townships in northern Shan. Identifying child protection risks is becoming difficult.
WASH	 The sector partners in Kachin State have re-adjusted their programs in community quarantine places in both government-controlled and non-government-controlled areas in addition to the border checkpoints. Partners are re-evaluating the criticality of the ongoing programs and prioritizing the risk communication and community engagement activities in IDP camps. The normal WASH programmes in Rakhine have been scaled down to life-saving activities. Many WASH partners are working remotely.
EDUCATION	 Education in Emergencies partners continue to suspend classes, trainings, and other activities that would normally bring people together. Adjustments to programming are being made for students to continue learning remotely. Developing learning resources may have a setback due to limited funding. Additionally, uncertainty about the scale of COVID-19 in Myanmar over the next months requires preparing for multiple scenarios when schools will re-open.
HEALTH	 Some activities in Chin and Kayin states are modified to observe public health infection prevention and control measures, such as social distancing. The delivery of essential services in Kachin, Rakhine and northern Shan continue while the frequency of mobile clinics and routine services in HRP target areas is reduced due to reallocation of government and partner's funding.
SHELTER/CCCM /NFI	 Majority of the shelter activities have been suspended in Kachin and northern Shan. Most of the CCCM monitoring is being done remotely. In the central part of Rakhine State, partners receive fewer travel authorization approvals due to the change of policies related to COVID-19.
NUTRITION	 Community nutrition activities such as cooking demonstration and nutrition awareness session have been suspended in Kachin State. In Rakhine State, three nutrition sector partners have suspended community activities such as mother-to-mother support group and nutrition awareness sessions. Modifications of treatment and management of acute malnutrition have been re-adjusted while ensuring COVID-19 risk reduction measures are in place. In northern Shan, most of the nutrition activities are postponed until the end of April. In Chin State, nutrition interventions, such as rapid nutrition screening are not held since April. However, collaborations between the MOHS and nutrition partners are sustained through telephone and virtual meetings.
FOOD SECURITY	 Since the beginning of April, WFP has shifted its emergency relief assistance to a two-month ration in the majority of its operational areas and a three-month ration in hard-to-reach areas in Kachin, Kayin, Rakhine and northern Shan. WFP is also monitoring commodity price inflation to adjust the purchasing power of beneficiaries and to potentially increase the value for cash-based transfer.

- To minimize exposure to the risk of COVID-19, WFP has developed a set of standard operating procedures for in-kind and cash distributions in the context of COVID-19.

PLANNING

COVID-19 Addendum to the 2020 HRP: The Addendum has been finalized, for an initial period of three months, that outlines priority preparedness and response actions for COVID-19 in humanitarian settings, in particular in Chin, Kachin, Kayin, Rakhine and Shan states.

The total caseload includes the existing HRP target (850,000) and an emergency support for 50,000 returning migrant workers. Response will be mobilized through existing humanitarian coordination structures (including clusters/sectors) with additional requirements for Logistics. An inter-sectoral Rapid Response Mechanism is also being established. US\$46 million will be required to implement priority activities in regard to COVID-19 in high risk areas, in addition to the \$216.3 million requested through the existing HRP (total \$262.3m). Priority activities of the Addendum include:

- Risk communications and community engagement across humanitarian settings.
- Rapid expansion of hand washing stations and scale up of hygiene promotion.
- Support for alternative education modalities, e.g. home-based learning.
- Immediate food and NFI needs in quarantine centers.
- Provision of **double food rations** (two months) in areas covered by HRP.
- Strengthened **community-level COVID-19 surveillance** in humanitarian settings.
- Setting up mobile infection treatment centers (as a contingency).
- Prepositioning of **ready-to-deploy shelter solutions** that support the Government facility quarantine locations as well as other infrastructure to expand/enhance medical facilities.
- Secure continuity of supply chain services

RESOURCE MOBILIZATION

Myanmar Humanitarian Fund (MHF) has increased the Reserve Allocation from US\$2 million originally planned to a total of \$4 million, including \$1 million support of the Access to Health Fund to support coordinated activities for vulnerable communities, including IDPs in conflict-affected areas as a response to COVID-19.

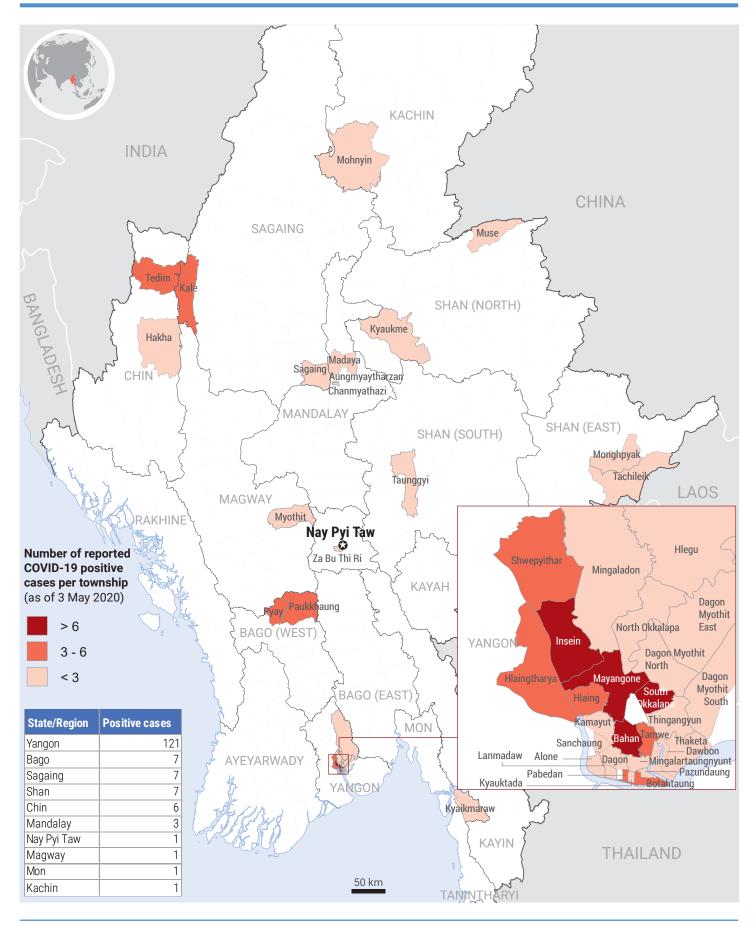
The Central Emergency Response Fund (CERF) has allocated US\$95 million to the COVID-19 response globally, including a \$20 million allocation (9 April) to WFP for global logistics and medical evacuation services. WHO and UNICEF headquarters have apportioned US\$500,000 and US\$749,000 respectively of the total allocation they received to their Myanmar operations.

Myanmar 2020 HRP funding update: Over US\$45.8 million has been received or committed to the 2020 HRP, amounting to 17.5 per cent of total requirements. Other humanitarian funding received (outside of the HRP) totals to over US\$37 million.

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As of 3 May 2020

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